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### **How to develop more effective assessments of the needs of families and children through multi-agency working**

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#### **Abstract**

The purpose of my research project is to develop an integrated approach to working with children and families and to streamline the assessment process and documentation at levels two and three on the local authority guide to levels of need. Research highlights the need for more effective documentation to support issues surrounding deprivation, poor parenting and better outcomes for children and more effective multi-agency working in providing much needed support earlier. The intention is to provide a universal document to enable families and professionals to work together more effectively, with families not having to repeat their story to multitudes of people, and identifying extra support earlier, to prevent escalation of need.

Within my research project I have been very aware of ethical considerations and have addressed them throughout each stage of the project. My research has formed the basis of implementing a new assessment, examined the perspectives of parents and professionals in comparing their experiences and understanding of the assessment process. It has formed a platform for parent voices. The next stage is to widen the consultation of the new assessment document to other multi-agency teams, whilst still continuing to review and evaluate its effectiveness and consistency of use within safeguarding policies and processes.

**Keywords:** multi-agency working, families, safeguarding, leadership, assessment.

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## Introduction

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This assignment will have three parts: a learning contract, a self evaluation and a small research project. In my self-evaluation my intention is to analyse how I have led within a multi-agency team in the past. Through my NPQICL journey I want to develop a better understanding of research and theories to shape my knowledge, experiences and understanding of my leadership. I will look at how the modules have made a difference to my leadership philosophy.

The purpose of my research project is to develop an integrated approach to working with children and families to streamline the assessment process and documentation at levels two and three on the local authority guide to levels of need. I am using this research to improve my own Professional Development to inform how I can be more effective in my leadership.

## Learning Contract

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In this section of my assignment I will analyse my current leadership status by reflecting on my diagnostic profile; identifying my strengths and weaknesses against the National Standards (DFES, 2007). This will include making a contract with myself to focus and prioritise areas I want to develop as a leader (NS 1.8, 4.8, 4.10, DFES. 2007); I intend to create a plan and approach to support my change and progression.

Following my first assignment I realised that I am becoming a more effective leader and I want to build upon my effectiveness (NS 1.2, 5.6 DFES. 2007); I will reflect upon my leadership style as this will be critical for successful partnership working. My research project will become the main focus of my Learning Contract and I intend to use the knowledge it generates to support leading professional practice in a multi-agency team to work in collaboration, to forge effective partnerships in working to improve outcomes for children and families (NS 1.1,1.9, 2.1, 2.3, 2.10, 6.1, 6.2, 6.6, 6.7, 6.8, DFES. 2007.)

I plan to triangulate my research by dividing it into stages. The research will be both quantitative and qualitative and will contribute to improving and developing multi-agency working and my own development as an effective leader. I will use a questionnaire, focus group and interview methods.

From my findings the purpose will be to streamline the assessment process and documentation to introduce a universal document for families and professionals to work together more effectively where families are not repeating their story to multitudes of people, identifying extra support earlier to prevent escalation of need (NS 5.2, 5.6, 5.7, 6.2, 6.5, 6.6, 6.7, 6.8, DFES. 2007).

# Self-Evaluation

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## Background

Following the ever changing government agenda and the impact of local spending cuts, restructuring of services and the recurrence of child deaths where recommendations have been made through serious case reviews and the new edition of the "Working Together Safeguard Children" (DFE 2013) our Local Authority has under taken a review of safeguarding our city's vulnerable children.

I was approached to become one of the leads for a pilot to bring together a multi-agency team to trail a new assessment to replace the Common Assessment Framework (DFES 2006) and to provide an integrated multi-disciplinary approach to Safeguarding (NS 6.1,6.2, 6.3, 6.4, 6.5, 6.6, 6.7, 6.8, 6.9, DFES 2007)).

## My Journey.

My NPQICL journey has made me appreciate and understand more fully following my first assignment that I am a leader and I needed to build upon my leadership effectiveness and not be afraid that I am not good enough (Clance and Imes,1978). It has been an Inspirational experience so far and I am looking forward to the next stage.

Following discussions with my Learning Group regarding conceptualisations of leadership I found Ladkin (2008) very interesting, she has shown a different view of leadership particularly when there is a practical, relevant task to complete within a multi-agency team. Within our group we felt that "Leading Beautifully" is a skill that can create a safe environment, focus on the end goal and value everyone's contribution. The key component it was felt, is the quality of the leader to influence this perspective (NS 1.8, 1.9, 2.3, 2.5, 6.2, 6.7 DFES 2007). I felt that as a Children Centre Leader I have used this approach whilst in multi-agency meetings and within my Centres. Sometimes this approach can be quite challenging particular where other agencies use different hierarchical structures and approaches.

"...using innovative approaches to leadership where roles and responsibilities are clear but hierarchies are flattened. The leaders themselves model approaches that they wish staff to adopt when working with children, parents and colleagues and they model these approaches when meeting with colleagues from other agencies and professions."

Gasper (2013 page xviii)

In my journal I had recorded two critical incidents which I believe illustrate how hierarchical structures and approach does impact on the individual within a team.

*"The first incident involved a team manager from Social Care who telephoned me to complain about a conversation with one of her Social Workers regarding the funding of a taxi for a parent and two twin babies whose mother was fleeing Domestic Violence. The team manger started the conversation by shouting and demanding I pay for the taxi for this parent, she said that I had to pay. This conversation and the attitude of this person was unprofessional and quite rude. When I challenge her by speaking calmly and asking her to stop shouting at me so that this could be resolved she seemed quite shocked that I had stopped her verbal attack and had not been challenged before."*

*" The second incident happened an hour later when my line manager telephoned me and forwarded an e-mail she had received from a Social Worker regarding a family and a member of my team which was quite condescending, the tone of the e-mail suggested that my team were not equipped with the knowledge or understanding regarding safeguarding children as they were 'only sure start workers'. She couldn't understand why they had contacted this family as she was the professional.*

*I investigated both the reason the family had been contacted by speaking to my senior practitioner and reading the chronological order of events recorded. I also looked at which team the Social Worker was from and who her manager was, I was not surprised to see it was the same manager from earlier.*

*I telephoned her and e-mailed my response to her and cc her manager, my manager and my Senior Practitioner into my response. I informed her that I was the Team Lead for this service. My team were all highly qualified and had received extensive safeguarding training which included our Local Safeguarding Boards training to Level 4. I said that I felt her reference to a Sure start work was not only unprofessional but very patronising.*

*I couldn't understand why she didn't know why we had contacted the family as she had completed a referral to our service and had been contacted regarding a home risk assessment and joint visit. I informed her that all of this including the information she had previously supplied was documented in great detail in the family file.*

*This was not the only incidents regarding this Social Work team."*

*(Journal 16th October 2013.)*

As part of module 4 the concept was "walking in other professional's shoes" to imagine how that person felt and the restraints on roles that might impact on partnership working. I found this quite an interesting concept as I have met people who do the same role but are quite different in their approach. Within the group as a whole this was evident in how they portrayed the role they were. I found it quite difficult as several times I asked the person who took the lead first to be the Social Worker to change places. However she didn't want to and was ignoring any advice. I did feel it was your own experience with that service at times that was being displayed.

This is a concept I have used to portray to other teams within the Centres' "the role of the Integrated Family Intervention Worker".

*"I asked my team to brainstorm ideas to promote their role to other teams within the Children Centre. When I returned thirty minutes later there were still no ideas; I discussed several ways it could be completed; one member of the team suggested a home visit scenario involving role modelling different roles including a family, professionals and any others which portrayed different experiences the team had encountered and introduce unknown incidents that could impact on the visit. It was agreed to write a narrative referral to our service that indicated different level of need for all four children. Each member of the team selected different roles to play as the referral took shape, even individuals who "didn't do role play" took parts. On the day resources were brought in, costumes were worn and the roles were defined. Their enthusiasm and realism of roles were quite inspirational. Not only for the participants but also for my own teams learning and understanding of multi-agency partnership working.*

*(Journal 4th March 2014)*

On reflection I have realised that the example from my journal has highlighted to me is; that being passionate, trust worthy, proactive, encouraging, using humour, fun, enthusiasm, mentoring and motivation were key to inspiring the team to illustrate an honest and professional in sight their role. This is acknowledged by Day (2004) as characteristics of successful leadership and further influenced by Bahlmann et al (2001).

"Encouragement strengthens a person's confidence and his or her sense of self and as a result is the key to personal growth and development."

Bahlmann R, (2001 page 273)

I believe that Ladkin (2008) three aspects of Mastery, Coherence and Purpose were the motivating force in this scenario to make it a real experience and Lew et al (1996) research highlighted the crucial C's which links to meeting the groups basic needs to work in partnership. The NPQICL Programme encourages leaders to be:

"... and steadfast, courageous creative in inspiring and developing leadership in others. Mentoring provides a safe and supportive space in which leaders can..."

John.K, (2008 page 2)

During Module 4 the fish bowl exercise looked at roles within a multi-agency meeting and how the experience from different perspectives can influence how people react within a situation an experience that I reflected upon within my journal.

" In 2003 I became part of a new project within Social Care which involved working with different agencies supporting children who were in the Local Authority Care or who were or about to be registered on the Safeguarding Child Protection Register across the city. It was a very demanding and challenging project which gave me an insight into the effects this traumatic experience affects everyone involved in the welfare of each individual child I believe this experience has impacted on me as a leader and the personal characteristics highlighted in my last assignment at this period were being defined and developed."

(Journal 5th March 2014)

#### Reflection

The styles of leadership I adopt will be crucial to the success or failure of working in partnership with other agencies on this research project. (NS 6.1, 6.2, 6.3, 6.6, 6.7 DFES 2007) There will be implications regarding finances for training, resources, time and staffing which will need to be agreed.(NS 5.1, 5.2, 5.3, 5.4, 5.6, 6.5, 6.3 DFES 2007). Most important is that it is child centred to improve outcomes for children (NS 1.1, 1.3, 1.4, 2.7, 2.10, 3.3, 6.8, 6.9 DFES 2007) and the child and parents voices are heard to shape the service. (NS 2.5, 2.7 DFES 2007). My NPQICL journey has supported me in providing the

tools, knowledge, understanding to meet this challenge and to develop into a more effective leader.

# Context

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The focus of my research is to work in collaboration and partnership within a multi-agency team to improve outcomes and also, at the same time, to strengthen my own professional development and understanding by developing my effectiveness to lead professional practice for children and their families. (NS 1.1, 1.9, 2.1, 2.3, 2.10, DFES 2007)

## Background

Historical Serious Case Reviews have highlighted a number of failures of agencies to work effectively together, acknowledging communication, poor policies, processes and procedures as some of the main reasons. This has led to a number of government reports including Laming Report (2003) Munro Report (2010) and white paper Every Child Matters (DFES 2004). This led to the introduction of the Common Assessment Framework (2006). However in 2008 the case of 'Baby P' (2009) came to light and the recent serious case review of Daniel Pelka (2013) that again raises the same issues already highlighted in previous case reviews;

".....it was disconcerting that the themes about lessons to be learned which have been identified in to reflect this report, tended to reflect the findings of many Serious Case Reviews nationally. For example, poor quality assessment practice, the failure to maintain a child focus to interventions..."

Lock. R, (2013) Page 69 and 70

Since the introduction of the Common Assessment Framework (DFES 2006) our Local Authority data set (LA 2013) revealed considerable reductions in assessments being completed and the impact on our city Social Care Team has seen referrals quadrupled. Following a review of these referrals it was deemed that at least half needed an early intervention approach at level 2 or 3 to stop the escalation of need; these referrals did not meet the threshold for Social Care intervention. A review has been completed by our local Safeguarding Board which highlighted the fact that the guide to the levels of need

(Appendix 1) needed to be reviewed and that, following the new edition of the "Working Together Safeguard Children" (DFE 2013) more effective documentation need to be in place to support issues surrounding deprivation, poor parenting and better outcomes for children and more effective multi-agency working.

"Providing early help is more effective in promoting the welfare of children than reacting later. Early help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years."

DFE (2013, Page 11)

This has been reiterated by Blatchford et al (2007) and acknowledged by Todd (2012

"...many professionals broadly welcomed the multi-agency agenda, appreciating the prospect of taking a more holistic approach to the needs of children."

Todd. L, (2011 Page 9)

In December 2013 it was decided at a strategic level and consultation with the Local Safeguarding Board that a pilot the "Early Help Assessment" should be introduced to replace the Common Assessment Framework (DFES 2006) following the recommendations to:

"provide targeted early help services to address the assessed needs of a child and their family which focuses on activity to significantly improve the outcomes for the child. Local authorities, under section 10 of the Children Act 2004, have a responsibility to promote inter-agency cooperation to improve the welfare of children."

DFE (2013, Pg 11)

Following extensive research reviewing other Local Authorities Assessments an agreed format was approved by our local Safeguarding Board, Strategic and Team Leads from

multi-disciplinary agencies. A Pilot sheet was agreed for professionals to explain the project and pathway was introduced in conjunction with the assessment paper work (Appendix 2). The Early Help Assessment was to be piloted to test its suitability to meet its purpose and to be evaluate periodically to make necessary changes to the format. It was agreed that the new assessment would have financial implications to services which would include the initial streamlining of paperwork; however this would benefit eventually the reduction in staff time repeating and completing assessments. The style of the assessment also supports the information required if there is an escalation of need to Social Care and would be sent as part of the referral.

The sample group includes the City Integrated Family Intervention teams (represented by two Seniors from each Locality), 4 health visitors, 4 school nurses, a primary school and high school safeguarding officers, probation officer, a common assessment framework officer and voluntary organisation. It was agreed that group would use this assessment with all new referrals where an action plan to meet outcomes at level 2 or 3 was required.

*"What if the sample group didn't represent a fair multi-agency example to trail the assessment adequately. I felt that the new assessment was very similar to my own teams current assessment so the transition to using the new one would be minor.*

*The challenge will be for all sample participants to buy into this new way of working and to be open and honest in their evaluation so that there will be a mutual agreed assessment to replace the CAF and a more effective way of inter-agency working. The impact would reduce stress for families as only one initial assessment would be completed.*

*(Journal 31st January 2014)*

I arranged a meeting with the sample group to review the outline of the action plan, assessment and evaluation process at the beginning of January 2014. Within the meeting training dates were arranged to go through the assessment and answer any queries or questions raised. The introduction of a further tool was to be piloted alongside the assessment called "The Family Outcome Star" (2006). This would take place after the initial paperwork had been completed to plot progress. I introduced to the group all paperwork and

explained why the new assessment was being introduced and how through the pilot it would be developed. A following meeting was arranged three weeks later to discuss any changes that may be needed.(NS 6.1, 6.2, 6.4, 6.5,6.7, 6.8, 6.9 DFES 2007)

*"The meeting went well and everyone seemed eager to take part in the pilot. Everyone understood the paperwork and felt that they had support in place if needed. An agreement had been made previously regarding finances this was raised as a query by the voluntary organisation. I felt in control and could discuss the pilot with confidence my planning before supported me to do this. The most exciting part was a city wide assessment to replace the multiply assessments being used."*

*(Journal 15th January 2014)*

During Module 4 of my NPQICL I realised I had used Lew et al (1996) "Crucial C's" cited in John (2008) during the pilot meetings my own growing confidence and vision had also impacted on the positivity of the group by means of my understanding, vision, pre-planning and researching of the subject. John (2008) acknowledged that by meeting your own needs and expectations you can better aid others and foster more effective understanding of the concept and task.

The key to the new assessment, will be the understanding of the rationale and the commitment to implement in their own agency system's and daily practice.

Maisey (2013) recognised that the Common Assessment Framework had not met its expectations;

*"...Initial evidence suggested that there were difficulties for professionals recognising its purpose alongside their "own" established systems of assessment."*

Todd, L (2013) (Maisey. D, page 109)

# My Research Question

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"How to develop more effective assessments of the needs of Children and Families through Multi-Agency working?"

# Rationale

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The purpose of my research project is to develop an integrated approach to working with children and families, to streamline and provide a more effective child centred assessment at levels two and three on the local authority guide to levels of need. The new assessment will be instrumental in accessing services when needed, improve communication between professionals and families, strengthen partnership working and improving outcomes for children. (NS 1.1, 1.9, 2.1, 2.3, 2.10, DFES 2007)

I am using this research to enhance my own Professional Development and understanding by developing my effectiveness to lead professional practice through Multi-agency working to raise outcomes and improve practice for the benefit of children and their families. (NS 6.1, 6.2, 6.3 6.4, 6.5, 6.6, 6.7, 6.8, 6.9, DFES 2007)

# Research Cohort

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The first stage of my research project had been agreed before the pilot group had been identified, I was asked to complete research to collate the effectiveness of the new 'Early Help Assessment' before it was cascaded across the city as the replacement for the Common Assessment Framework (2006) in part two of the pilot.

I discussed within my personal supervision on the 10th March 2014 with my line manager regarding my research project and how I intended to use it to form part of my assignment for my NPQICL. The pilot will be the basis of my assignment research and how I intended to use it to support myself, my team and the pilot group through future changes.

The second stage will involve discussing with the pilot group the research project and for them to form the research focus group.

The third stage will involve interviewing families to gain their perspective and experience of the new Early Help assessment and to gain an insight into any prior experience of the Common Assessment Framework (2006)

The Fourth part of my research project will include completing a pre-test of the questionnaire asking people who have experience of my leadership within meetings.

" A questionnaire should be pre-tested on a smaller number of people in what is called a pilot study. It is best to test it on people of a type a similar to that of the intended sample, so as to anticipate any problems of comprehension or other sources of confusion."

Walliman N (2008) Page 282

The fifth stage will involve inviting the pilot group to complete a questionnaire which asks questions about the multi-agency group working and my leadership within the group.

Copies of invite is in Appendix 3.

# Methodology

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Structuring the research was very important as the assessment document would be used to form a new way of interagency working which will focus on the whole family whilst maintaining a balance to ensure it is child focused.

My research is structured using a mixed method approach as identified in Denscombe (2007) of quantitative, qualitative and triangulation this has been further influence by Walliman (2008).

"The use of more than one method can enhance the findings of research by providing a fuller and more complete picture of the thing that is being studied."

Denscombe M (2007) Page 110.

Within my research project I wanted to explore my leadership, develop a quality assessment and compare the previous and new assessments to evaluate its viability; Interviewing parents to gain this perspective. The pilot group would form my focus group and sample group to complete a questionnaire to examine my leadership and effectiveness in moving this project forward.

I had arranged to meet the focus (pilot) group to evaluate and collate qualitative data regarding the process and format of the assessment. I discussed that I was in the process of completing my NPQICL and part of the process included completing a research project, I confirmed that I had received permission to use this pilot study to form part of the evaluation process. I reiterated the ground rules previously agreed at the first meeting which included confidentiality, being open, honest and everyone's opinion was valued. I highlighted the

Ethical considerations for my research project and gave each participant a copy of the ethics form.(The ethical issues are captured in the attached BCU form, Appendix 4 )  
I checked that everyone was happy to continue. The information gathered was recorded and I read back their findings to gauge the accuracy of information and to give further opportunity to make additional comments or alterations.

" For checking whether a particular item or experience evokes disagreement among members of a group or expose a range of contrasting views. This facet of focus groups has been used for checking hypotheses."

Denscombe M (2007) Page 180

A further copy of the information was sent to all participants alongside the altered assessment form.

The next stage of this research project will be to interview families who have had experience of the Common Assessment Framework (2006) and the new Early Help Assessment. The interviews will be semi-structured to gain a better perspective of their views and understanding. Walliman (2008) acknowledges that:

"The interviewer is in a good position to be able to judge the quality of the response of the subjects, to notice if a question has not been properly understood, and to reassure and encourage the respondent to be full in his/her answers."

Walliman N (2008) Page 284

I will discuss the Ethical considerations at each interview to gain permission to use the information to improve the assessment process, to reassure that anything discussed is

confidential and will be used anonymously and there will be no risk to anyone.

"The idea that the action researcher is exempt from the need to gain authorization, as a consequence, evaporates. Because the activity of action research almost inevitably affects others, it is important to have a clear idea of when and where the action research necessarily steps outside the bounds of collecting information which is personal and relating to the practitioners alone. Where it does so, the usual standards of research ethics must be observed: permissions obtained, confidentiality maintained, identities protected."

Denscombe M (2008) Page 128-129

The next stage of my research is to use a questionnaire to explore the pilot groups perspective of my effective leadership. My questionnaire is strongly influenced by Northouse (2007) and my design was further influenced by Aubrey (2007). I have attached a blank questionnaire in Appendix 5 . I decided to use Likert (1932) cited in Cohen et al (2008) scale, as suggested by Denscombe (2007).

I will complete a pilot study to pre-test the questionnaire as suggested by Walliman (2008) and reiterated in Cohen, et al (2008) to anticipate any issues or confusion regarding the format, instructions or questions being asked.

The invite letter and questionnaire will be e-mailed to the pilot group for completion I will confirm the ethical considerations regarding the information and the returning of the document. Walliman (2008) acknowledges that 'Ethics' in relation to other people is a vital consideration this is further influenced by Cohen, et al (2008) who states:

"The questionnaire will always be an intrusion into the life of the respondent, be it in terms of time taken to complete the instrument, the level of threat or sensitivity of the questions, or the possible invasion of privacy. Questionnaire respondents are not passive data providers for researchers; they are subjects not objects of research."

Cohen. L, (2008) Page 317.

I have asked for the questionnaire to be returned within a time scale of two weeks. Twenty two questionnaires were e-mailed to the pilot group. I hoped the questionnaires would provide me with an insight into how effective during this pilot I have been as a leader and to ascertain the group dynamics in working together.

All of the information collated is recorded in "Findings and Results Analysis" on page 21, I have used a systematic approach to collate my findings, which has been informed by Cohen et al. (2008) and further expanded by Denscombe (2007) who suggest that by using different ways of capturing results and adding further open questions the validity of Responses gives a more qualitative approach.

# Ethics

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".....research ethics are principally concerned with the effects of research on people, and importantly, on those people who get involved in the research process in one way or another. It is the researcher who plans the project that has the responsibility to predict what the effects will be on those people that he/she will approach and involve in the research, as subject, participant, respondent, interviewee etc."

Walliman N (2005) Page 342.

Within my research project I have been very aware of ethical considerations and have addressed them throughout each stage of the project. I have provided an Ethical consideration form to all participants and I have further explained what the considerations involve when required to both focus group and parents.

I have provided a means to return any questionnaires anonymously and I have reassured people that any information provided will be treated with respect and will be treated in a non-judgemental way.

From this research project I will gain a greater insight which will impact upon my own professional development and enrich my effectiveness as a Leader.

Ethics in action research is vital to the validity of the research this is acknowledged by Winter (1996) and cited in Denscombe (2007):

"Ethics in action research

- The development of the work must remain visible and open to suggestions from others
- Permission must be obtained before making observations or examining documents produced for other purposes.
- Description of others' work and point of view must be negotiated with those concerned before being published.
- The researcher must accept responsibility for maintaining confidentiality.

Denscombe M (2007) (Winter, 1996:17) Page 129

# Findings and Results

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The following findings are identified from my research project and the mixed method approach used.

## Focus Group.

The Focus group consisted of 22 participants and the group's aim was to develop an integrated approach to working with children and families, to streamline and provide a more effective child centred assessment at levels two and three on the local authority guide to levels of need. The new assessment will be instrumental in accessing services when needed, improve communication between professionals and families, strengthen partnership working and improving outcomes for children. (NS 1.1, 1.9, 2.1, 2.3, 2.10, DFES 2007)

The focus group objective was; identifying any changes to the Early Help Assessment document during the first phase of the pilot. The information collated highlighted quite a few changes were needed to improve the quality of the document, the changes have been recorded in Appendix 6. The second part of the focus groups' objectives were to complete Early Help Assessments and evaluate their findings at the review meetings. I asked the group to compare the Early Help Assessment with the Common Assessment Framework (2006) in their experience of using both particularly looking at the pro's and con's for each. The Early Help Assessment was considered more family friendly and the pro's highlighted the assessment as being more accessible and more productive. (NS 4.1, 4.3, 4.4, 4.6, 4.7,4.8, DFES 2007).

## Interviews

I interviewed eight parents who had experience of both the Early Help and the Common Assessment Framework. I visited individually at their home address after contacting them by telephone to discuss the reason for the visit and how I would value their views and opinions not only for my own research but also for the Early Help pilot that they had agreed to take part in.

When meeting all eight parents I explained the Ethical Considerations regarding their participation and they all agreed to continue with the interview. I explained that I would record any comments made on a form (Appendix 8 contains a summary of all eight parents comments) regarding the questions and if they agreed they were accurate I would ask them to sign and date the form.

I asked five questions relating to both Assessments the overall summary showed that the Early Help Assessment was the one that all eight parents preferred their experience had been very positive and they all agreed they felt they had a voice. The meetings held were smaller were not as intimidating and they all generally felt that they were benefiting their children and family.(NS 1.1, 2.1, 2,5, 6.1,6.2, 6.8, DFES 2007). All parents agreed they liked the name 'Early Help' and one father said "it does what it says!"

The Common Assessment Framework (2006) however all parents had a negative view of it and felt that there were barriers in place to undermine, blame and label them as bad parents. It was seen as a "Stick to beat them with" so didn't help or support them. The rooms meetings were held were more where a room was available so it meant travelling or were at times to suit the people holding the meeting and they were unanimous in saying they had no control or voice at the meetings. All parents agreed they didn't like the name as it implied they were 'Common' or 'unworthy'.

## Questionnaires

The following summary is based on the results from the questionnaires distributed to the twenty two participants from the pilot group. I e-mailed 22 Questionnaires and 21 were returned which equates to a 96% response rate.

I wanted to use the questionnaire to examine the teams perspective of my effectiveness as a leader, the teams dynamics and to review if the goal of the team had been met.

In Appendix 9 are the results and an overview detailed summary.

The team response has been very positive they have highlighted that the Early Help Assessment is considered to be a quality working document.

My effectiveness as a Leader has been highlighted through various examples including different tools I have introduced from my NPQICL modules which have provided support to focus on tasks, recapping of ground rules has reiterated mutual respect, confidentiality, etc.

My knowledge and experience has been positively highlighted, as conclusive factors to the group dynamics, understanding their roles, services, the complexity of working with families and the challenges individuals may face. Communication, collaboration, research and theory have developed my effectiveness to lead professional practice through Multi-agency working to raise outcomes and improve practice for the benefit of children and their families.

(NS 6.1, 6.2, 6.3 6.4, 6.5, 6.6, 6.7, 6.8, 6.9, DFES 2007).

# Analysis and Discussion

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My research project has been very informative, it has formed the basis of implementing a new assessment, examined the perspectives of parents and professionals in comparing their experiences and understanding of the assessment process. It has formed a platform for parent voices and has informed my professional development.

Using a mixed method approach has enabled me to form a complete picture of the research project, Denscombe (2007) acknowledges that;

"...mixing of methods can be a valuable research strategy for: the validation of findings in terms of their accuracy; checking for bias in research methods; the development of research instruments."

Denscombe. M, (2007) Page 110

By triangulating the research findings it has provided me with a better picture of the effectiveness of the collaboration and communication within the pilot group and their perspectives of working as a team and how my leadership is perceived. Interviewing parents has highlighted the difference between assessments and the dissimilarity of each. This research highlighted the same perspectives of each assessment by parents and professionals and I realised that is why so few Common Assessments had been completed. Agencies have continued to complete their own service assessment. Parents have formed an important part of this research without their voice this new way of working will not reach fruition. (NS 1.4, 1.5, 2.5 DFES 2007).

Gasper (2013) recognises that some leaders define multi-agency working as;

"Collaborative professional working relationship with others in both the professional and para-professional world of agencies who work jointly to deliver services to local children and families. I also mean this to mean a partnership with parents and their children to deliver services in consultation with them to address their needs."

Gasper M (2013) Page 24.

There have been challenges to address within the focus group, I was very aware of team dynamics. Egolf (2001) whose model recognises this, he acknowledged that groups can be proactive or dysfunctional dependant on the support they receive; a multi-agency group can bring a multitude of issues which include professional barriers, resources, etc. To ensure that everyone recognises the importance of working together to produce a process and assessment that keeps the child as the focus and includes working with the whole family.

(NS 3.3, 4.1, 4.3, 4.7,4.8, 5.1, 5.4, 5.5,6.1, 6.2, 6.4, 6.6,6.7, 6.8, DFES 2007)

Adair (2009) suggests that an effective leader is a skill, this is acknowledged by both Goleman (2011) and Northouse (2011). Maisey (2011) cited in Trodd et al (2011) reiterates that communication is key, there needs to be consistency of approach for effective intervention, mutual trust and a shared vision to safeguard our vulnerable children and truly have shared inter-professional practice.

I have used tools obtained throughout my NPQICL journey to improve and support my leadership which have been highlighted within the research as best practice. To be effective in my leadership I have recognised:

"Integration of individual action is one of the fundamental characteristics of effective teams."

Northouse P, (2007), Page 20

# Recommendations and Conclusions

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I believe I have addressed my research question; completing this assignment has supported my professional development by enabling me to analysis my effectiveness as a leader within a multi-agency team. I have used my learning about leadership concepts and analytical tools with confidence.

I have continued to journal as this has helped me to reflect on my thoughts and feelings in this research and leading the Early Help Pilot.

The next step of the pilot is to continue to review its effectiveness and to complete observation visits and case studies as part of the evaluation. Case audits need to be completed to evaluate consistency and review outcomes and progress. The numbers of Early Help Assessments have increased, this will be reviewed monthly to compare data of both assessments.

A step down process needs to be established with Social Care for any referrals that do not meet their threshold.

Publicity of the new assessment and preparation for the next stage of the phased process needs to be planned as part of a multi-agency team.

There are a lot of future changes for our children and families; I know that my NPQICL journey has prepared me to meet those changes and challenges to lead both my own team and a multi-agency team.

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# Appendices

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<b>APPENDIX 1</b>	<b>COPY OF THE GUIDES TO THE LEVEL OF NEED</b>
<b>APPENDIX 2</b>	<b>PROFESSIONAL PILOT SHEET AND PATHWAY</b>
<b>APPENDIX 3</b>	<b>COPY OF INVITATION</b>
<b>APPENDIX 4</b>	<b>ETHICAL CONSIDERATIONS FORM</b>
<b>APPENDIX 5</b>	<b>COPY OF BLANK QUESTIONNAIRE</b>
<b>APPENDIX 6</b>	<b>COPY OF FOCUS GROUP INFORMATION</b>
<b>APPENDIX 7</b>	<b>NEW EARLY HELP DOCUMENT</b>
<b>APPENDIX 8</b>	<b>COPY OF INTERVIEW FORM</b>
<b>APPENDIX 9</b>	<b>COPY OF RESULTS</b>