

5.1 GOOD PRACTICE EXAMPLES

Introduction

Joseph is two and a half years old. He lives with his mother Helen in a one bedroom flat in an inner city area. Helen comes from the Democratic Republic of Congo; she recently arrived in the UK and after a period living near London, she was moved to her current accommodation. Joseph's father, himself Ugandan, does not live with Helen and has little contact with Joseph. Helen had an extremely traumatic childhood and adolescence. She was sexually and physically abused in the DRC following the murder of her parents. She and Joseph's father arrived in the country together but they separated on arrival. After some weeks Helen was placed into independent accommodation by National Asylum Service (NAS).

Current Service Delivery Within Universal Provision and Presenting Issues

Helen has met other asylum seekers through NAS but has limited social contacts. She finds it hard to relate to men due to the abuse she has suffered. Helen receives money from NAS to support herself and Joseph. Her initial application for leave to remain has been turned down, but she is continuing to try to challenge this through the appeal system.

Joseph is registered with a GP and has a health visitor. The Health Visitor is concerned about both Joseph and his mother. Joseph is an extremely quiet, withdrawn little boy, who is not meeting his developmental milestones. There are no toys for Joseph and Helen rarely leaves the flat which is poorly furnished and is extremely damp. Helen's mood is very low and her GP has prescribed anti depressants for her. The Health Visitor tells Helen about her local Children's Centre and offers to take her and Joseph there on a day when there is a group running for asylum seeking parents and their children. This group has a number of French speaking parents. She is worried about Helen's mental health and suggests that Helen might like to talk to the Children's Centre counsellor. After having spent time with Joseph and his mother at the Children's Centre visit, the Health Visitor suggests that the nursery nurse from the clinic comes to see Joseph once a week for a while to help develop his play and communication skills.

Initial targeted response

Helen begins to attend the Children's Centre asylum seekers' group every week with Joseph, and a Family Support Worker from the 7 Day Response Team based at the centre, who runs the group also begins to visit her at home to help her liaise with the housing association who own her flat, to try and sort out the damp problem and necessary repairs. The Family Support Worker takes Helen and Joseph to a stay-and-play group at the Children's Centre until Helen feels confident enough to attend on her own, and takes Helen to the Children's Centre toy library to borrow some toys and books for Joseph. Helen begins to drop into the Children's Centre on a regular basis to use the parents' room computer and to buy clothes for Joseph from the "Baby Boutique". She arranges to see the counsellor but at the end of the assessment session, it is agreed that Helen would benefit from a more specialist service. The counsellor says that Helen is suffering from post traumatic stress disorder and will help her to refer herself to Solace, a specialist service for asylum seekers.

Children's Centre staff report that Joseph seems to be developmentally delayed and shows little interest in playing or socialising in any way whilst at the centre.

Outcome of Initial Targeted Response

The Nursery Nurse begins to visit Joseph and Helen to help them to play together, and to contribute to a fuller assessment of Joseph's skills and development. Joseph is seen by a paediatrician at the local health centre and his overall development is assessed. In addition to observing Joseph who's physical developmental is felt to be good but his speech and motor skills are delayed. She feels that there is no organic reason why Joseph should not respond to some targeted help and introduces Helen and Joseph to the Speech and Language Therapist who works at the clinic. The Family Support Worker and the Health Visitor together talk to Helen about Joseph's development and about the Family Support Worker completing a Common Assessment as a way of helping Helen to work out the best way of getting the help that Joseph needs.

Further actions leading to coordinated Targeted Response

The Common Assessment records that Joseph has begun to play with the toys at home and has begun to make some speech sounds since attending the Children's Centre. Helen is finding his care less stressful since she began attending the groups at the Children's Centre. However, the damp home conditions are affecting Joseph's physical health and his cot is now covered in mould. Her own bed mattress is also mouldy. Helen says that she sometimes feels so down that she cannot help crying in front of Joseph, which makes him distressed. The Family Support Worker suggests to Helen that a multi agency meeting is arranged to bring people together to agree how they can all work together with Helen to help Joseph.

The meeting is chaired by the Family Support Worker, who agrees to be the Lead Professional, at Helen's request. It is attended by Helen, the Health Visitor, the Housing Officer, a representative from NAS, the Nursery Nurse and the Speech and Language Therapist. The representative from NAS recommends that Helen remains on the waiting list for Solace. The housing association agree to repairs in the accommodation for Helen and Joseph as a matter of urgency. It is agreed that Joseph will be offered two sessions a week at the Children's Centre. Helen will spend some time with Joseph at the Children Centre and the Speech and Language Therapist will work with Helen and the Children's Centre staff. Helen will continue to attend groups at the Children's Centre and the Nursery Nurse will call once a fortnight to continue to support Helen and Joseph. It is agreed that Helen will contact her health visitor at the Children's Centre if she needs to speak to her. The Family Support Worker and the representative from NAS agree to look into ways of securing a new cot and bedding for Joseph and a new bed for Helen.

Outcomes of Coordinated Targeted Response

Joseph begins to make good developmental progress. He settles well at the Children's Centre and begins to socialise and to verbalise more. Helen uses the toy library regularly and says that she enjoys playing with Joseph. She learns songs and games when she attends the CC sessions with her son, which she tells the Nursery Nurse about when she visits. The Nursery Nurse talks to Helen about behaviour management and sleep routines.

Helen finds her session with the counsellor helpful, but she still feels frightened and depressed particularly at night when Joseph is asleep and she has nothing else to occupy her.

The Family Support Worker gets a cot and bedding for Joseph, and also manages to get a mattress for Helen that has been donated to them. Helen continues to buy clothes and other items for Joseph from the Baby Boutique at the CC

Appropriate Maintenance Within Universal Provision

After a 3 month wait, Helen receives an appointment to see a counsellor at Solace. She finds the sessions very helpful, but also traumatic. The Family Support Worker visits Helen at home on a regular basis at this time and ensures that she brings Joseph to the CC and attends the asylum seekers group for extra support. Joseph continues to make good progress in all areas. Helen's depression starts to lift although she remains on medication. She relies on the Children's Centre, both for emotional support and for help with clothing and equipment for Joseph, which she otherwise could not afford.