

Q7

WHAT THINKING IS NEEDED ABOUT THE SPECIALIST TEAM?

“It is so much easier when FDAC is involved – everyone is at meetings, there is a clear plan, you don’t have to scabble around for experts or argue about resources. And a small point, I know, but they make sure the appointments don’t clash. This sort of joining up between services doesn’t happen in other cases.”
[Family lawyer]

“Instead of fibbing we’re encouraged to be honest and if we relapse, or lapse even, we’re told it wouldn’t be the end of it, because they would work with us about that. They were being honest with us and making it easier for us to be honest with them.”
[parent]

“I do more because of having to be at court for all the reviews but what’s less is that I don’t have to spend time liaising with everyone involved. FDAC does that and that makes it all feel more streamlined.”
[social worker]

“The assessments of the specialist substance misuse worker were brilliant. I learnt a lot from him and it’s helped my practice, too.”
[social worker]

APPROACH

The evidence shows that the team’s way of working is an essential part of the process. The independent evaluation of FDAC found that the team’s approach helped to ensure that parents are fully engaged in the process, are more inclined to take responsibility for their actions, and understand and accept decisions made, even if children are not returned to their care. The FDAC team provides an early assessment to the court and the parties, does direct work with parents, co-ordinates the provision of services by other agencies, and gives the court and the parties’ regular feedback about how parents are doing. The team needs to be committed to working well with other local services on the delivery of treatment and support for parents, as specified in their individual intervention plan.

COMPOSITION

The composition of the team will vary, depending on local conditions, but it should include child and family social workers and substance misuse workers, with regular access to a child and adolescent psychiatrist or clinical psychologist and occasional access to an adult psychiatrist. A parent mentor co-ordinator should also be part of the team. It is also advised where possible to recruit team members with mental health and domestic abuse specialisms. The Gloucestershire team, working mainly with mothers of young children, have health visitor and speech and language input.

Below is the proposed staff model for the FDAC specialist team based on current practice for an approximate caseload of 35 families (depending on variables such as geographical spread of the team). Research from the current nine FDACs has shown that on average FDACs will see 1.5 parents per family. For a caseload of 35 families, this team structure means that on average keyworkers will be working with 8-9 parents at a time. 10 parents at a time is the maximum caseload deemed safe by the Tavistock and Portman Trust given the intensity of the work with each parent.

Given the complexity of the FDAC work and the level of risk in the families that are referred, it is necessary to recruit experienced, qualified practitioners with extensive relevant work experience. It is vital that the team manager and preferably both social workers have previous experience working in safeguarding vulnerable children and adults and court based work.

Post	Full Time Equivalent	Notes
Team Manager	1FTE	Team manager should have a social work or clinical psychology qualification and should be experienced in court assessment work
Senior Social Worker	1 FTE	The senior social worker may be employed as a deputy team manager
Social worker	1 FTE	One of the social workers should have a Domestic Abuse specialism if possible
Specialist Substance Misuse Worker / Parent mentor Coordinator	1 FTE	The Parent Mentor Role is a vital component of the teams work / offer to parents and will require dedicated time
Specialist Substance Misuse Worker or Clinical Nurse (SM and MH specialisms)	1 FTE	Clinical nurse not essential but helpful to have member of team with specialism in adult mental health, trained in evidenced based interventions
Post proceedings worker: (any of these professions could be suitable: MH, SM, SW, FS (family support))	1 FTE	Research has demonstrated the positive impact on long term outcomes one additional worker would make. [See <i>the FDAC Post Proceedings proposal paper</i> in the members section of the website via the NU or an FDAC advocate for more information about this additional role and suggested programme of activities.]

Administrator	1 FTE	This is a sophisticated administration role with varied tasks. The administrator needs to be confident writing minutes that will be sent to legal colleagues; able to manage an access database and be competent using Microsoft excel.
Clinical Lead	0.1 FTE (increased to 0.2 FTE after 6 months)	Can be a Clinical Psychologist or Child and Adolescent Psychiatrist. Will lead formulations and planning, will chair meetings, will advise the team and support them to use relevant evidenced based interventions, and in some cases will assess children and provide short term interventions for parents and children.
Adult Psychiatrist	1 session/ month	Necessary if the Local Authority or local court requires this, otherwise a Clinical Psychologist with substance misuse and court experience could fill this roll. They will provide advice to the team and on occasions carry out assessments.

Draft Job descriptions for each post are available in the members section of the website, which can be accessed by established FDAC teams and [FDAC advocates/consultants](#).

SPECIALIST TEAM ACTIVITIES

- Members of the team are present at court at the first hearing to meet parents who are being offered the FDAC route through care proceedings
- If the parents agree, the team carry out an assessment within two weeks and formulate a plan
- The team hold an Intervention Planning Meeting involving parents, social workers, guardian and adult treatment providers to discuss and agree the plan
- The plan and assessment are presented to the court at the second hearing, having been circulated to all the parties in advance
- Once the parent has signed the agreement at court to have their case heard in FDAC, a member of the team is appointed as key worker for the parent
- The team co-ordinate all the services and activities identified in the plan and meet the parents at least once a week
- The team carry out drug and/or alcohol testing
- The team prepare a short (2 sides of A4) update on each parents' progress every fortnight – for the court and all the parties
- The keyworker attends regular non lawyer reviews held by the judge, together with the parent, the child's social worker and the guardian

- The team brief the judge on all FDAC cases before the hearings and discuss strategies
- There is regular communication between the team and the judge, and between the team and relevant adult and children's services as well as with housing services and DV services and with legal representatives
- Subsequent Intervention Planning Meetings are called during the course of the case to review and amend the plan as necessary
- The team recruit and supervise parent mentors
- The team produce a final report
- They also carry out some direct work with parents, often to fill in gaps in local provision, for example running anxiety groups for parents.

TEAM LINKS WITH THE LOCAL AUTHORITY

It is important for the team to be seen as independent of Children's Services – the evaluation of the London FDAC found that this was felt keenly by parents, lawyers and guardians in particular. But this does not mean that the team cannot be commissioned by the local authority. If the team is managed by the Local Authority it is strongly recommended the team works out of a non-local authority building such as a charity or treatment centre. If there is already a multi-disciplinary team in your area that provides court assessments, this might be developed to operate as an FDAC team, as in East Sussex and Coventry.

THREE OPTIONS FOR SETTING UP AN FDAC TEAM

Option 1: Commission a new, local, independent FDAC team

You can develop a service specification for an FDAC team that the local authority then commissions via a tendering process. The advantage of this option is that the team will help clearly be independent of the local authority. Who commissions the service will need to be decided; preferably it should be jointly commissioned by health and children's services. You might also have a number of local authorities coming together to commission the team jointly. This is the model in London and Kent and Medway.

Option 2: Build an independent FDAC team from an existing local service

You can create an FDAC team from another multi-disciplinary service already established in your area as in East Sussex and Coventry. This is likely to involve getting agreement from the relevant commissioners of that service to change the existing Service Level Agreement (SLA).

Option 3: Use a local authority in-house team to deliver FDAC

A variation of the standard FDAC model is where the local authority provides an in-house specialist team to work with families and report to the court. This model is being used in Gloucestershire, Southampton and Milton Keynes/Buckinghamshire.

PARENT MENTORS

Setting up a parent mentor scheme has proved the most difficult aspect of work to establish and sustain. This aspect of the service tends to be started in the second year of operation once the core team and processes are established. Experience shows the importance of ensuring the team member employed in this role part time has sufficient capacity for it, allowing sufficient time and resources to ensure that the recruitment and selection process for mentors is robust, with good systems in place for subsequent supervision and training.

One option is to join forces with a relevant established scheme, such as mentoring provided to people who are using local substance misuse services. Some of those mentors might be parents who have had contact with children's services in the past because of concerns about their parenting.

See the *Parent Mentor Handbook* for more information and guidance about setting up an FDAC Parent Mentor Programme. This is available in the members section of the website which can be accessed by established FDAC teams and [FDAC advocates/consultants](#).