Safeguarding Early Adopters programme
Learning example

> **Early Adopter:** Devon/South West – A health perspective
>
> Learning theme: Multi-agency outcomes framework; Local reviews.

Introduction

The learning examples are used to demonstrate how using a questioning technique based on the Appreciative Inquiry model can be used in health to have positive conversations, with the overall aim to develop individual and team practice to improve multi-agency working and the safeguarding of children and families.

Background, aims and objectives

The Devon Early Adopter programme's aim is to develop a 'Devon' approach using the Appreciative Inquiry methodology to be used across the partnership to build on existing good and excellent practice, and create a solution focused positive environment within and across agencies. This new approach has the overall objective to improve outcomes for children and families and will be used in practitioner led audit processes and learning events.

It is recognized that for too long the focus has been on what has gone wrong with cases, or on poor practice, with repeated findings from reviews and audits generating recommendations which are continually circulated. This programme is about re-framing learning into a more positive context with the true engagement of managers, practitioners, children and families with real-time learning through the generation of ideas.

It has been important to remain focused on developing an approach which can be understood by all agencies, children and families so the use of simple language, free from organizational jargon has been a key element. The ability to easily transfer the methodology to all types of situations has been a focus for the programme team so its application within the police and health services was an important step in 'testing' the versatility of the approach to learning.

Approach

As the programme developed it was necessary to find 'safe environments' within each agency to test out the approach based on the Appreciative Inquiry (AI) methodology. The programme team devised the name of 'appreciative conversations' but each of the practice leads developed their own style of questions. The programme team had the support of an AI trainer, provided by Research in Practice, to assist with feedback on question design and interpretation of the AI model.

Planning stage:

For the Health practice lead the first stage was to identify suitable ways in which to test out the appreciative conversation technique. The practice lead identified a Safeguarding Team within an acute hospital as a team who would be open to participating in an appreciate conversation. The outcome of the session was to investigate 'what works well in multi-agency working'.

Facilitating the session:

The Health practice lead facilitated the session and began by explaining the aim of the session and some background information about the programme. The practice lead had some pre-arranged set questions which were based on the 'Appreciative Enquiry Model', however the practice lead enabled the conversation to flow rather sticking to a script. By having a thorough knowledge of the model this allowed much more flexibility and allowed the facilitator to make comments to ensure that that the conversation remained positive. Key information was recorded on a flip chart in front of the team.

Following the session:

The Health practice lead gained feedback after the session from the participants and the information was also typed up and shared with the team a few days later.

Challenges

The Health practice lead found that the biggest challenge was keeping the conversation positive and steering the team from slipping into problem focused discussion. This meant reframing the question by asking how previous problems have been addressed by using a more solution focused approach.

Successes

The team engaged in the conversation really well. There was a free flowing conversation and all team members participated equally. Despite the team at times discussing problems they have faced with multi-agency working the conversation was steered by the practice lead to a more positive outcome. The team reported valuing a focus on what is working well as they feel overwhelmed by the huge amount of learning disseminated from recent Serious Case Reviews and a focus on 'what has gone wrong'. They recognized the value of the 'Appreciate Inquiry' approach as a methodology and suggested it be used more in supervision.

Conclusion

Whilst there was a set of questions used, it was only used as a reference as the session progressed. It was important to allow the conversation to flow, but also for the facilitator to have knowledge of the Appreciate Inquiry model to understand when it was becoming deficit based or slightly negative and then to ask a different question to change the focus to being more positive.

As identified by the team involved in this conversation, most learning within agencies usually focus on what has gone wrong or something that is not working well in a deficit approach. This particular style of learning allows reflection in an appreciate way, giving opportunity to focus on what's working well and how to strengthen relationships.

Importantly the style of conversation allowed for problems to be discussed but demonstrated that these problems could be reframed and considered in a more positive light with solution focused ideas being generated.

There are lots of opportunities within Health that this approach could be used but at a very early stage it has become clear that using this approach in a multi-agency forum could lead to improved relationships and partnership working, which in turn would improve outcomes for children.

Knowing how our appreciative conversations are having an impact on outcomes and experiences for children and their families is anticipated in different ways. Firstly, appreciative conversations will identify 'what works' and what positive difference multi-agency work is having on improving outcomes for children. By identifying best practice this can be shared, providing consistency of practice, across the county. Consistently having appreciative conversations will lead to regular identification of good practice, innovation and ideas about how to achieve better and best practice. Secondly, appreciative conversations will lead to practitioners adopting this way of working with children and families and this will mean that families strengths will be identified and enabled to find their own solutions to presenting problems. By working this way outcomes for sustained positive change are expected to be improved as the family are following their own plan rather than a plan that has been developed for them.