

Parent Network Meetings – October 2015

Parent Feedback on Communication with Social Care

Overview

The topic for these parent network meetings was Communication, with an aim to gather parents' views on ways to improve communication with health, social care and education services. Parents worked in groups with providers from each service to answer three questions on communication. After the group work, each service fed back the key points which had been captured on flip chart paper. Then parents had a chance to talk individually with each other and service providers over refreshments.

56 parents attended across the five meetings in Cambridgeshire's five districts. We also received feedback from 10 parents online. Each meeting was well attended by service providers from health, education and social care. Notes from the individual meetings have been recorded and can reviewed separately on the Pinpoint website under http://www.pinpoint-cambs.org.uk/get-involved/the-pinpoint-network/for-parents-of-disabled-children . This is a summary of parents' comments on communication with social care from all five meetings and the online feedback.

Parent Feedback

In groups and with service providers, parents were asked to answer the following three questions on communication with social care:

- 1. Stop What communication methods with social care do not work?
- 2. Keep What current ways and forms of communication work well with social care?
- 3. Start What new methods would like social care to use when communicating with you?

The feedback has been collated and grouped into categories as shown below. Numbers in brackets indicate that a similar comment has been made more than once.

Method of communication

Stop:

- Communicating amongst professionals without involving parents
- Do not leave messages late in the day
- Ensure the message is clear and there is a timely way to contact you back (named person)
- Not calling back
- Simplify the language on the website too 'professional-language heavy'
- Paperwork can be too impersonal
- Do not assume emails are regularly checked
- Overwhelming families with too frequent visits

Keep:

Keep sharing information and have a system to check parents have received meeting minutes





- Emails are good establish preferences. Opt in/out & letter confirmation
- Emails, texts (x2)
- Texting / using mobile telephones
- I like getting a text rather than a voicemail as I often cannot make out what the message is
- Face to face communication
- Just keep communicating!
- Social Care comes to me, in an environment I feel comfortable in
- Face to face meeting makes it easy to pick up phone
- Short Break's face-to-face contact
- Are reliable, on time and regular
- Ringing to remind when things are outstanding
- Letter with contact numbers and leaflet when service changed useful
- Consistent person know who to go to, contact numbers
- Always get a response team approach, everyone knows you, unit model works, consistent, know your 'story'
- Annual forms for direct payments
- Short Break's face-to-face contact

Start:

- Ensure parents are aware they can access records
- Early stage communication / explanation to be clearer
- Send out meeting minutes in draft for comments
- Sharing draft minutes of meetings before they are finalised. Keep these factual and up to date
- Ask what the preferred method of communication is
- When parents call in, ensure they are called back
- Phone calls. Sometimes conversations are better
- Giving adequate notice for changes or what will be happening. More helpful for ASD children
- Being aware of the effect of comments
- Ccing parents into emails about the child
- Being aware about good and bad days for families. Families may need to off load and this could be because they were asked how they were and it is part of your role to listen.
- Text reminders of meetings
- I would like them to call or text back when a message is left for them
- Access to information outside of 9am 5pm
- Include both parents in letters etc. and especially emails. For there to be a contact number for each service on the local offer that is for general information rather than having to use the contact centre for everything.
- More via email

Information Sharing

Stop:

 Assuming that schools and health know all about the social care services that child receives or their needs

Keep:

• Sharing information – leads to smoother handovers if staff changes





Start:

- Communicating between different parts of social care •
- Clarify and publicise information sharing •
- Social care to contact agencies to raise awareness of our roles
- Coordinating between services •
- Connect with START and SENDIASS to promote social care and other services, handout • leaflets
- Better sharing of information between services, but particularly health facts, not • opinions
- Improve communication between the agencies
- Communicate better transfers between teams

What Information?

Stop:

- Don't assume parents older children have all the information •
- Be more transparent and honest about social care's level of involvement and what level of • need is covered by locality, etc.
- Assuming parents know timings of processes
- Use a lot of acronyms. There is an assumption sometimes that parents know about services and processes and we don't always

Keep:

- Local offer information •
- Signposting to alternative services •
- Re-starting Early Help (Short Breaks) leaflet distribution
- Knowing who to call, consistent help and continuity •

Start:

- Be clear about who to contact, how to contact and how often you will be contacted •
- Mainstream schools less good at knowing availability via social care, etc.
- Be clear in what budget is
- Better communication / signposting when people do not meet eligibility •
- Social care could make the signposting referral •
- Siblings need signposting •

Access to services

Stop:

Wasted appointments due to a lack of information being delivered •

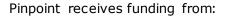
Keep:

Ensure families know about the reasons for referrals •

Start:

- Family intervention services are needed at crisis point. Make them available.
- Dealing with emergency situations to do with the child rather than leave it all up to the parent
- Appreciate crisis calls are a last resort response from emergency duty team needed •
- Provision where needed e.g. Fenland









Specific Services

Keep:

- Parent and family support groups
- Family support workers. IF trained. They need credibility.
- Unit clinicians
- Short Breaks

General

Stop:

- Prevention is better than cure too much firefighting
- Stop parents feeling like they are constantly at war with professionals and that everything is a fight
- Changing names e.g. Early Help
- Multiple changes of social workers
- Scare mongering re: budgets (better wait until have a plan, ask for parents' views)
- Feeling of 'starting again' with new worker
- Raising expectations that aren't going to be met, gap for those children who will fall between services
- Making assumptions
- With children in Years 7 and 8 for whom we have been seeking assistance for years (they have attachment disorder), the patronising attitude that 'the parents' behaviour is to blame' must be halted

Keep:

- Having a consistent social worker
- The service as people do use it
- Continuity of social workers
- Good move from children to adults social work, good things to do for daughter, personal assistance 5 hours per week
- One size doesn't fit all
- Not always problem focused makes it more positive, easier to sort out things when needed
- Providing support in work
- "SW always listens and talks to us. Clear about timescales and eligibility. We may not like it or agree with it but they are clear about it! The leaflets are good"

Start:

- Include families more in the understanding the process
- Ask for parents' views, they have ideas on how to be more efficient
- Listen to parents
- Talk to parents about gaps in services so this can be addressed
- Focus on the needs of the family as a whole
- More flexibility be listened to rather than having to write complaining letters
- · Guest speakers from social care to attend school events and reduce stigma
- Reduce stigma of social care
- Training for professionals on improved communication, the experiences of parents in attending meetings / receiving information and coming prepared to discuss options / alternatives





- Be aware of the demands of having children, school runs / school holidays
- Better services for children with Aspergers / High Functioning Autism
- Social worker for children who don't have complex needs
- Employ more social workers
- Arrangement if social worker not available for some reason, someone who knows family, the basics
- Attending meetings such as TAC. Make sure parents know the process and their rights

Summary

Some specific themes that can be highlighted include:

- Emails, texts and face-to-face meetings are appreciated, check parent's preference. Named person with contact details is important.
- Share draft minutes of meetings with parents
- Improve coordination and information sharing within and between services
- Clearer and more transparent information for parents
- Review emergency / crisis process to meet family needs
- Make no assumptions!
- Continuity of social worker is important
- Involve and listen to parents

It is recommended that this feedback is shared with service providers and commissioners within Cambridgeshire County Council. And that any changes made to services as a result is shared with parents via Pinpoint.



