



The Neurodevelopment Service, Mindworks Surrey

Background

Dr Ana Draper, Mindworks Clinical Programme Outcomes Lead, Eleanor Osman, Highly Specialist Family and Systemic Psychotherapist and Adam Curtis, Clinical Nurse Specialist, shared how the work they did with a young person and their family aligns with the THRIVE Framework (Wolpert et al. 2019) and some of its principles.

Applying some THRIVE principles in practice:

Introducing Angel

Angel is a 15-year-old girl who lives with her Mum, she has episodes of self-harm, has struggled socially, and describes finding it difficult to understand the social interactions and communications in the school context. Angel has been calling the crisis line several times a day when in high levels of distress. Her Mum is struggling, as their relationship has become conflictual, and Angel can become violent towards her.

“Since seeing you, the change in our understanding of Angel’s needs has flipped. The teamwork with Angel as a whole person, including her family and she is now taking ownership and is quicker to self-regulate. I am much more aware of her needs and using clear and concise instructions and language to respond to her. Frankly, most of the time I am enjoying being with Angel – I say most of the time because she is a teenager after all!” – Mum

Shared decision making: Shared Decision Making (SDM) refers to ensuring children, young people, and their families (CYPF) voices are central to decision making about the care they receive. In Angel’s case we provided psychoeducation around her Autism Spectrum Condition (ASC) and discussed together available support resources, for her to decide what would be most useful going forward. Including Angel in the decision making about her care plan and support, put the focus and value on her voice and empowered her to assert what she thought would be helpful for her. This ensured Angel was able to meaningfully engage with the help provided. We used Goal Based Outcomes to support the shared decision making process and it was something we could review together to ensure that shared decision making was part of the ongoing process of being together.

Needs-led: The THRIVE Framework is based on understanding the presenting needs of children and young people. Angel had a long history of working with several professionals, who the family expressed had a tendency to focus on her severity. This meant that they could not access the right support when they needed it and what they could access did not meet their needs. Rather than thinking about severity and criteria, this work involved thinking about who could meet which need and how we could collaborate and participate in supporting Angel together.

“I have found that by not focusing on severity or the problem, we can discover what the needs of the young person are, rather than us as clinicians defining the problem.” – Eleanor Osman

A couple of goals Angel identified related to her peer relationship and understanding her ASC; she struggled with social cues from others and felt ‘too different from everyone else’. We were able to support Angel to create a new narrative around her ASC by engaging with the artist, Banksy’s work. Angel viewed his street art in London and was fascinated by his ability to showcase different perspectives others did not see, through art. This creative lens supported her to recognise the unique quality of viewing the world from a different perspective and the opportunities this could create. As a result, she started to develop an identity that related



to herself as skilful, someone who has something unique to contribute and would attend sessions in a way that expressed her individuality.

Another identified need Angel shared were her sensory difficulties during exams. When faced with lots of questions on a page, she was overwhelmed and would try to answer them all at once. This was fed back to school, and they are supporting Angel to have just one question at a time. Consequently, she was able to sit her mock exams with her year group after months of being out of school which was another validation to her about her abilities.

Partnership Working: Strengthening our existing relationships to manage risk, has been another way in which our work has aligned with the THRIVE Framework. Angel heavily relied on crisis support, with multiple calls a day/week in addition to our work with her. What has helped manage risk is understanding that we are working together with our colleagues in Angel's network to support her needs. We worked in partnership with the crisis team who would be managing and responding to risk at different times and ensured that the anxiety around risk and keeping Angel safe was continued in our sessions. Our collaboration as professionals across different services was a key indicator to change and hugely beneficial to the family. Overtime we have observed a reduced need for crisis support in times of distress or when the families' anxiety escalates.

Through developing a culture of partnership working, we are more resource-efficient in how we as a service respond to the needs of children and families. In Angel's case, we observed first-hand how the right supervision and support that comes from partnership working results in more positive experiences of services for families and real progress can be made from existing relations rather than being passed from service to another. We consulted with the crisis team, were able to formulate together around managing moments of crisis and our work became better coordinated in managing Angel's needs.

“Working within the THRIVE Framework (Wolpert et al., 2019), has felt more like the whole system has an intention to support young people and their families, which really gives me confidence in our ability to increase the quality of service we provide.” – Adam Curtis

Outcome Informed: Being outcomes informed is a core principle of the THRIVE Framework. By Angel identifying goals from the start of intervention, we were able to track and measure her progress, which will help decide together when it was time to move on. We used the Goals that were based on her needs, to support us to formulate together what we needed to do next and how far we had travelled in achieving those goals. Angel was able to share moments of success and we were able to expand her abilities from the learning taking place for her and her mother. Outcomes became a dynamic part of the process and informed every aspect of what we did together.

Ambitions: What being a more THRIVE-like service would look like?

Improving accessibility through Early Intervention and Capacity building in community services

Within the Neurodevelopmental (ND) service, we are working to develop and implement novel ND profiles to ensure schools can identify neuro-diverse needs and support children and young people without need for a formal diagnosis.

The use of profiles and provision of consultation to schools from the ND service will ensure a more needs led approach. This will also support capacity building for staff in schools, increasing their confidence in supporting children with neurodiversity.

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