

## Core Principles – Outreach Principles Standard & Skills

### Response Form

The information you provide in your response will be subject to the Freedom of Information Act 2000 and Environmental Information Regulations, which allow public access to information held by the Department. This does not necessarily mean that your response can be made available to the public as there are exemptions relating to information provided in confidence and information to which the Data Protection Act 1998 applies. You may request confidentiality by ticking the box provided, but you should note that neither this, nor an automatically-generated e-mail confidentiality statement, will necessarily exclude the public right of access.

Name Anne Pinney, Assistant Director, Policy and Research  
Wendy Johnson, Strategic Children's Centre Manager (Devon)

Barnardo's

Organisation (if applicable) [Barnardo's runs 89 Children's Centres in England. This response draws on their experience, with particular thanks to Wendy Johnson for the detailed comments she provided.]

Address: Tanners Lane  
Barkingside  
Ilford  
Essex IG6 1QG

**Completed questionnaires and other responses should be sent by email to the address shown below by 12<sup>th</sup> April 2010.**

coreprinciples.CONULTATION@dcsf.gsi.gov.uk

**Alternatively they can be sent by post<sup>1</sup> to:**

Christophe Gutierrez, Level 1, Department for Children, Schools and Families,  
Sanctuary Buildings, Great Smith Street, London, SW1P 3BT.

**If you have an enquiry about the consultation you can contact Christophe Gutierrez:**

Email: Christophe.Gutierrez@dcsf.gsi.gov.uk  
Tel: 020 7783 8502

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<sup>1</sup> If sending responses by post, please ensure that your response is sent in time to **arrive by 12<sup>th</sup> April**

See pages 4 - 7: Core Principles and Standards

1 Do you agree with the principles and standards?

Agree

Disagree

Somewhat/Not sure

Is there anything missing? Is there anything you would say differently, or additionally? Do you have any other comments?

#### Introduction

paragraph 2, first sentence: outreach and home-visiting is also essential in rural areas.

paras 3-4: need to recognise role of other health professionals e.g. GPs and maternity departments. As well as telling parents about children's centre services, they should hand out literature, and where necessary, refer families to the children's centre (with their consent) if they think they would benefit from home-visiting or other children's centre services.

para 7: need to recognise that health & social care professionals may be employed by the children's centre, and may be key members of their outreach team.

#### Core principles and standards

para 1: We support a clear focus on outcomes, particularly outcomes for the child. These should be reviewed regularly. It would be valuable to refer to the importance of safeguarding (e.g. last sentence refers to early intervention, we suggest making explicit reference to safeguarding here).

para 2: as well as knowing the local community, outreach workers need to know about local services and support groups within the community (beyond those provided by the children's centre).

para 3: outreach is sometimes needed for an extended period of time, but in most cases, it's more appropriate to offer outreach for a fixed period, then if necessary supporting families to access children's centre and other services themselves. As well as setting outcomes, it is important to be clear about the expected duration of home visits (e.g. 6-8 weeks) after which progress and approaches used should be reviewed.

This paragraph emphasises the need to build relationships parents and carers, engaging them in planning etc. Absolutely, but at the same time there must always be a clear focus on improving outcomes for the child.

para 5: workers should always discuss safeguarding concerns with their

supervisor as well.

para 7: we strongly agree with the need to work in partnership with other agencies but, as highlighted in the recent select committee report, those agencies need to be committed to working with children's centres and appropriately resourced to do so. Engagement with health remains problematic in some areas – it is still not the case that all GPs and health visitors work closely with their local children's centres.

para 8: here and elsewhere, need to refer to involving parents in considering referrals to other agencies – seeking their agreement and explaining protocols around information-sharing.

para 9: volunteers and inexperienced practitioners should be supervised regularly (i.e. more than just 'regular contact': effective supervision is essential). You cover safeguarding elsewhere, but it might be worth highlighting the need for safeguarding training here, to ensure less experienced outreach workers have sound knowledge of safeguarding procedures.

para 10: helpful to refer here to notion of informed consent by parents/carers.

para 12: again, need to refer to supervision here e.g. add final sentence: they should receive regular supervision to support them when they are dealing with challenging family circumstances. Home visits can at times be stressful and distressing and staff may need support to help them deal with such situations.

para 13: review should include reflecting on progress towards outcomes and length of engagement/strategies used.

See pages 8 - 9: Skills and Knowledge

2 Do you agree with the skills and knowledge required for outreach practitioners engaged in **raising awareness AND HOME VISITING**?

Y Agree

Disagree

Somewhat/Not sure

Is there anything missing? Is there anything you would say differently, or additionally? Do you have any other comments?

We welcome the way you have divided the skills and knowledge into two sections, reflecting different staff roles.

Skills needed for home-visiting:

Would be strengthened by making reference to having the skills and confidence to maintain a clear focus on the needs of the child & promoting their welfare (at times, this may not align with parents' views).

We have some concerns around expectations of counselling skills: while such skills are valuable in this role, it would not be appropriate to expect outreach workers to fulfil the role of trained counsellors (unless that is their profession) – clarity is needed about at what point a referral to a specialist colleague would be appropriate.

Sound knowledge of child development is essential to enable early identification of emerging difficulties / additional needs, so that workers know when a referral is appropriate.

See page 10: CPD

4. Do you agree with our summary of the CPD that practitioners should be undertaking to improve their practice?

Agree

Disagree

Somewhat/Not sure

Is there anything missing? Is there anything you would say differently, or additionally? Do you have any other comments?

It's not realistic to expect all practitioners to have extensive and up-to-date knowledge on all these areas; but it is essential for them to know how to find such information and have quick access to expert advice where necessary.

5. Do you have any other general comments about the core principles, standards and skills for effective outreach?

Is there anything missing? Is there anything you would say differently, or additionally? Do you have any other comments?

Need to recognise that many outreach (home-visiting) workers encounter complex and at times challenging family situations, working with families who for one reason or another have fallen below the radar of statutory services.

This reinforces the need for the proposed standards, skills and professional development – which we welcome - as well as for appropriate supervision, swift access to specialist advice and support and clear protocols and procedures for information-sharing and referrals.

**Thank you for taking the time to respond to this consultation.**