

Collaborative Casework: Adults, Children & Families & Mental Health Services

Collaborative Casework describes the way we expect everyone across our services to work collaboratively to get the best outcomes for the adults and children we work with.

We must all change the way we think about what we do and the way we do it, so the County Council, Health and other partners have been looking at how we work together. All parties recognise that the current system in Suffolk is disjointed, not preventative enough and sometimes doesn't work best for the customer.

This guidance applies to all casework and collaborative working across service boundaries at every level, to support a child, young person, adult and their whole family. The aim is:

- To ensure our systems and processes do not create barriers to people getting the right support at the right time, from the right people.
- To promote safety, wellbeing and the best outcomes through services working collaboratively.

This requires a shift from procedural, process and policy driven working to collective debate and assessment with families about what needs to change and who will do what. It is about multi agency, holistic working with families. The Signs of Safety principles and disciplines, which are relevant to whatever context/service you work in, provide a useful guide to collaborative casework.

Principles for collaborative casework:

- ***Working relationships are fundamental, both with families and other professionals*** – We all have our roles, responsibilities, assessments, processes and procedures and our historical positions. Families don't see that, they see us as people who are there to help. Collaborative casework is not a policy, it is not about who pays for what, it is about collaborative assessment and planning. It is a way of thinking that encourages us to create joint assessments and plans with families and agreeing who can do what. Building strong local relationships is vital to support this.
- ***Thinking critically, fostering a stance of critical enquiry, always being prepared to admit you may have it wrong*** – Collaborative casework means respecting that the family and all the professionals involved have an important contribution to make. No one individual or service has a monopoly on the truth, so it is through working collaboratively that the most sustainable solutions can be built

- **Families and frontline practitioners know whether practice works. Celebrate and build on what works** – Collaborative casework means focusing on joint understanding of what is needed, creating plans that the family influence, agree with and own. It means that we as groups of professionals with an interest in helping the family change, all understand the plan and work together towards it.

Disciplines for collaborative casework:

- **Use plain language that the families understand** – Our acronyms and professional language can act as a barrier, so use language the family use
- **Be clear about the outcomes** – Ask questions about what is needed and agree what can be offered and by whom. Collaborative casework means sharing expertise and knowledge, even when a request does not meet your service threshold. Sometimes your knowledge can inform other workers in ways that can transform the outcomes for families
- **Use authority skilfully, giving families choices about how to work with authorities and finding ways that work for them** – Families come together, they don't come as separate individuals. Collaborative casework means using our existing systems creatively and flexibly to achieve the desired outcomes. Being collaborative is about using our individual resources, including funding, in the best possible ways to achieve positive outcomes. For example; sometimes it will not need all the services to lead the work, one worker can lead on behalf of others, using and sharing each other's information.
- **Assessment is an ongoing process, not a set piece** – Collaborative casework means sharing what you know with families and colleagues in a timely way, recording those involved and outcomes achieved.

In the rare cases where a solution is not found, the Suffolk LSCB and SAB policies for Working Together to Resolve Professional Disputes must be used. Interprofessional differences of view must not compromise the outcomes for the person, child or family.

[LSCB Quick Guide to Working Together to Resolve Professional Disputes](#)

Information sharing must be according to the LSCB and SAB Information Sharing Policy, (the SAB information sharing policy is under development as part of the Transformation Programme work, as at July 2018). The Data Protection Act must not be used as a barrier to sharing information appropriately.

[LSCB Information Sharing Guidelines](#)