

Children Communities Connections  
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 Conference Breakout Session

## 'Really, truly' ensuring a Partnership Approach

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## We talk about working in Partnership

When we talk about it what do we really mean – what is the experience we are looking for?

Ideas from audience

But how do we really ensure it happens?

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## Characteristics of an Effective Partnership

- > Working closely together with active participation and involvement
- > Sharing decision making power
- > Recognition of complementary expertise and roles
- > Sharing and agreeing aims and process of helping/ supervising/ managing
- > Negotiation of disagreement
- > Mutual trust and respect
- > Openness and honesty
- > Clear communication

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## But how do we really ensure it happens?

We need to focus on **how** we do things

- > Not only when we are setting up services
- > And through initial training
- > But also in an ongoing way

**Process, not just Content**

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## What is needed?

A clearly stated expectation of how all workers in the agency will interact

- > Not only workers who interact with clients, but all the way through the service. This means team leaders and managers.

It requires a **culture of partnership** throughout the agency(ies).


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## What is needed?

- > Vignette 3

Questions:  
 What did the manager do here?  
 What was driving that decision by her?

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**Its not easy!**

We all intend to act well towards our clients and our colleagues and those we manage.

What else gets in the way of real partnership?

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**What gets in the way?**

Vignette 2

Questions:  
 What drove the response of Worker 2?  
 What did she offer?  
 What was the effect on Worker 1


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**What gets in the way of a Culture of Partnership?**

- > Our own life experience? If we have not been generally respected, valued and responded to in relationships, especially in our early years, it is more difficult for us to do this with others
- > Our training? The underlying assumptions/attitudes/approaches of different professions?


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**Different professional stereotypes?**

Medical model = an **expert model**  
 In emergencies you need to be in authority and give directions.  
 Doctors and nurses have traditionally been trained for these kind of situations.  
 In non-emergency psychological situations most people are not going to do what you say unless they have come to that conclusion **with you**.


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**Different professional stereotypes**

- > Social workers have been trained to give great worth to the opinion of the client/person and look at the impact of the social forces on the individual.
- > The extreme version of this is a social worker who never goes against anything the client says and blames everything on "the system"; never asks the client to take responsibility.

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**Where do you fit?  
 More stereotypes..**

- > Psychologists – Assessment can put you in judgement of others. How is it done?
- > Speech Pathologists, Physiotherapists-trained within the medical model?
- > Teachers – Teaching in classrooms has historically been about transferring the teacher's knowledge to someone who does not have it. **A transfer model.**
- > Parents, Non-professionals – often much more open to working in partnership.

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### What else gets in the way?

**Feedback!**

- > Not getting feedback, not even knowing we do the things we do
- > No training or practice in how to give it?
- > No permission from team leaders and management safe place to give and get feedback?
- > No structure to build in feedback as well as support in an ongoing way

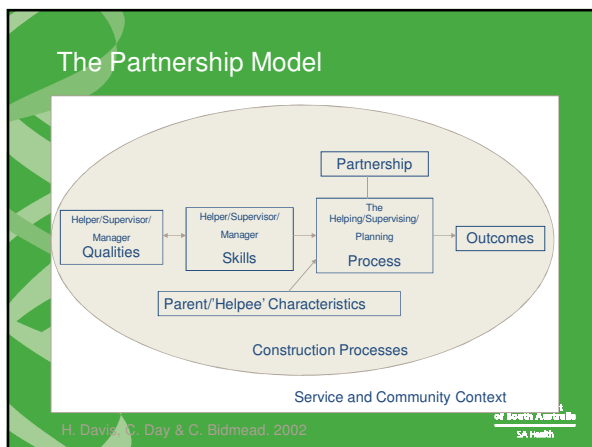
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### The Family Partnership Model

- > a model for anyone, working with anyone else, to practice working in partnership.
- > The 10 x 3hr modules provide a group discussion of the issue, the emergence of answers and then practice in applying the answers.
- > The training can be the beginning or part of a change process of how we relate to others at work and beyond leading to more effective relationships and services with clients and staff.

**Core belief:**  
 the group will have the answers to these questions. They are about human interactions and we all know about those.

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### What are the benefits of a work group going through this together?

- > You have a shared simple language and model that you can all refer to in working and planning, and use to give feedback. You understand your colleagues and their perspective better
- > You are more effective with your clients, you are empowering them
- > Your management makes decisions in partnership, you feel valued and involved
- > You have skills to work with blocked situations whether in agency or with clients
- > You have set up ongoing support and feedback structures with a model of how to interact within these.

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### Evaluation of the Model

- > The Family Partnership Training model has been evaluated in a number of research projects and is being implemented in a variety of settings in the United Kingdom and Europe. See [www.cpcs.org.uk](http://www.cpcs.org.uk) for copies of relevant research papers.
- > Research demonstrates that the training enables participants to feel more confident and competent in relating to parents. Participants increase their knowledge and understanding of the processes and skills of helping and show significant improvements in their actual helping skills. Studies have also shown that the psychosocial functioning of both parents and children experiencing childhood disability and mental health problems improves when they work with practitioners who have completed Family Partnership Training.
- > WA research in 2003, and again 2009 to determine the effectiveness of the training in the longer term.

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