

Different approaches to promoting wellbeing and resilience

[Experience](#), [Human Nature](#)



Unit 512 Lead practice in promoting the well-being and resilience of children and young people Understand how different approaches to promoting positive well-being and resilience in children and young people. Explain the importance of well-being for children and young people. " Child well-being and deprivation represent different sides of the same coin. From a child rights perspective well-being can be defined as the realisation of children's rights and the fulfilment of the opportunity for every child to be all she or he can be.

The degree to which this is achieved can be measured in terms of positive child outcomes, whereas negative outcomes and deprivation point to the denial of children's rights. " Bradshaw et al. Young people's social and emotional well-being is important in its own right but also because it affects their physical health and can determine how well they will do at school.

Good social, emotional and psychological health helps protect young people against emotional and behavioural problems, violence and crime, teenage pregnancy and the misuse of drugs and alcohol (' Systematic review of the effectiveness of interventions to promote mental well-being in children in primary education' Adi et al. 2007) If young people don't have positive outcomes of well being then some young people who have low levels of happiness are much less likely to enjoy being at home with their family or carer, feel safe when with their friends, like the way they look and feel positive about their future.

Children unhappy in this way are also more likely to be victimised, have eating disorders or be depressed. Explain the importance of resilience

for children and young people. Resilience is important because young people who are resilient have the ability to adapt despite experiences of significant risk or trauma. If young people are resilient they will be able to cope better with problems, they will have better health and they will be happier and more fulfilled. They will also be less likely to develop emotional problems like depression or anxiety. Resilience: qualities which cushion a vulnerable child from the worst effects of adversity in whatever form it takes and which may help a child or young person to cope, survive and even thrive in the face of great hurt and disadvantage". *Adoption and Fostering*, 21, 1997, pp. 12-20

Critically analyse different approaches to promoting well-being and resilience of children and young people. I researched that ideas about resilience are increasingly being applied to practice from a professor at Brighton University suggest a framework based on four 'noble truths'; accepting, conserving, commitment and enlisting.

They continue to explore how resilience can be built in five 'compartments'; basics, belonging, learning, coping and core self. These ideas, and the very pragmatic approach that accompanies them, can be helpful in working with young people from even the most difficult environments and offer a hopeful context for practice. Strongly based on the research evidence, resilient therapy involves a partnership between Child and Adolescent Mental Health Services (CAMHS), academics, social workers, youth workers, nurses, teachers, learning support assistants, the parents and carers young people themselves.

As such, it is ideally suited to a whole school, whole system approach that promotes well-being for all and addresses the needs of young people with behavioural, emotional or social difficulties. This appears like a good framework to work with and breaking it down into steps when working with a young person. In 2009 I went on Resiliency training in Cambridge. I was trained by top psychologist professors from America. We realised that a lot of what we researched or learnt is already what we were putting into practice but didn't label it. We learnt how to put some of what we learnt into practice when supporting young people.

There were 5 levels of an iceberg which is called the ABC module. One part taught you skills into showing a young person not to over think situations that might not of actually happened or that has been over exaggerated or blown up. You teach the young person to think differently and break it down to simplify it and help the young person understand it and to support them to overcome it. Every Child Matters promotes the 5 outcomes, which all sync with meeting the needs a young person well-being and resiliency especially around achieve economic well-being and promote positive contribution.

Promoting and supporting young people in regards to their health, self esteem, attachment issues, emotional security and relationships is very important to help the young person develop to their full potential into adulthood. At the home young people have a keyworker and work very closely with them. Young people are registered with nearest doctors, dentist, opticians to ensure they are getting all the necessary check ups and health needs required.

Young people if they they suffer from anger management issues, emotional issues can speak with their keyworker and discuss incident occurrences and put in strategies to help the young person over come this. Also the young person maybe referred to CAHMS worker if needed. A young person will have a routine and weekly planner of school, activities and other social events will be on this calender. This helps that young person develop their self -esteem and confidence, learn social skills, gain an education and remain in good physical health. Be able to lead practice in supporting children and young people's well being and resiliency . 1Lead practice that supports others to engage with children and young people to build their self esteem. I supervise and support a member of staff who keyworks a young person who suffers low self-esteem after growing up in a family dynamic of abuse. This young person suffers from attachment issues and has been known to be sexually exploited by older males. The young person also find it difficult to maintain positive relationship and after a short time will break down the relationship. The keyworker was advised to ask the social worker to do a referral to CAHMS to help support the young person in terms of their emotional needs.

Myself and the keyworker had a consultation with a psychologist to discuss the case and what strategies we could use to help build the self-esteem and confidence of young the young person that was clearly showing signs that they needed support in this area. I also sent the keyworker on training on supporting young people manage their emotional needs. The strategies that myself and the keyworker put in place for the keyworker to work with the young person was: *weekly keyworker sessions to for keyworker/keychild bonding * Identify yp's strengths.

Get the yp to list thier strengths and always work from your their strengths when trying to deal with less successful events. *create situations where they can make decisions and choices. *Help the set realisticgoalsand targets. Helping to set realistic targets ensures success and can be built on. Encourage charts to help measure progress. And so on. 2. 2Support others to work with children or young people in manner that is open, trustworthy, respectable and reliable In a supervision with a new staff member A was asked how his relationship with the young people is.

A said it is ok. Sheryl gave A some guidance on how to build his relationships with the young people and how to earn theirrespectand trusts such as spending time with a young person, asking how their days has been, asking what is wrong when they appear upset, praise them when they have something well or better, helping them tidy their room or cook and talk about stuff in general and encourage them how to achieve their goals in life.

Challenge the young people when they are displaying negative or inappropriate behaviour and be honest and clear with them on what they consequences of thebehaviour couldbe if they don't take onresponsibilityfor their actions. Also that if A puts something in place for a young person he needs to ensure this is followed through as this will not only maintain consistency, but also gain a young person respect, trust and show that he cares. A was honest about this and said he is finding it hard coming from adult services to children services.

A advised that if he takes on board and listens to the advice that he is been given then he will be fine and will finish the placement on a good note. A told

of Sheryl's experiences of working with yp's and building her relationship with the young people and eventually A will also feel confident with his relationship with the young people. A told that he needs to monitor the other staff and reflect on how he manages situations with the young people. This can also be discussed in staff debriefs and this is a good tool for reflection work for A to gain skills. 2. Demonstrate through own practice ways to encourage and support children and young people to express their feeling, views and hopes. Observation with tutor with young person may also cover this. Through my experience with working with many challenging young people who do find it hard to engage and talk about their feelings etc. I feel that the most important thing is to have a relationship with the young person which is built on trust and respect. As a staff member you must be approachable and be non judgemental towards a young person for them to be able to open up to you.

Also as a young person young people like to have attention from people they like or find approachable and it is important that you give them some of your time or if they want to discuss something with you then you listen. Young people are obviously after your opinion or what you to know something for a reason whatever that reason maybe. Also its important for them to find their own answers for them to connect with it and take control of it. This supports a young person to feel empowered in regards to their own lives and will help them accept responsibility. 2. Explain how to challenge practices that act as barriers to children and young people's well being and resilience. Young people often have limited ability to recognise and identify own emotions, limited receptive , not knowing it's OK to have emotions. Carers expectations

can be too high when trying to engage the young person and getting them to discuss their emotions and feeling. This can be difficult situation if the carer becomes frustrated with the young person and can have an effect on the young persons development in regards to their well- being and resiliency.

This would be challenged by myself and 2. 2 and 2. 3 explains challenges of practice. 3. Be able to lead practice in work with carers who are supporting children and young people. Develop strategies to support carers understanding and involvement with the well-being and resilience needs of a child or young person. Please see 2. 1 and 2. 2 Also training is important in this area in regards to self esteem building, motivating positive behaviours, self-harm, resiliency, keyworking skills.

CAHMS intervention and consultation takes place at the home with keyworkers to give them the opportunity to discuss their keychild and support the keyworker to support their young person in regards to thinking of strategies to put in place to support them with their well-being and development. Team meetings and Team days are also put in place for the staff team to communicate ideas on strategies to use with individual young people and what will help support them with group living. Also see attached development plan. Lead practice that supports carers to engage with children and young people to build their self esteem.

Please see 2. 1 and supervision observation with JM by tutor. Monitor the involvement of carers in supporting children and young people's well-being and resilience. Managers and myself are assigned to a staff member and the young person they are keyworking and known as case managers. On a daily

basis the young person is discussed with the keyworker and monthly case planning meetings will take place with the case manager and keyworker. In this the case manager monitors all the 5 outcomes from Every Child Matters and goes through what has been done and what still needs to be done to meet the young persons needs.

Also the young persons goals are looked at to see if they are achieving them and to see if they need amending. Also all recordings are monitored that takes place through the daily log book, contact sheets, incident reports, bullyingreports, 1-1 sheets, yp's meetings, Mfh logs, meeting are in place that needs to take place, incentive plans put in place. Keyworkers also need to complete risk assessments and updated when required and residential placement plans. We also monitor through reg 34's completed by team manager and the reg 33's completed by the counsellors every month.

Evaluate strategies used to engage with carers who are supporting a child or young person. Please see 2. 1, 2. 2, 3. 3 Feedback and monitoring is evaluated at the case planning meeting and if a strategy appears to be working with the young person and needs continuing at that level then this will continue. If a strategy is not working with the young person not developing in a certain area then this needs discussion and new strategy put in place. 4. Be able to lead practice in responding to health needs of children and young people. Lead practice that supports children and young people to make positive choices about their health needs.

Young people when admitted to the home need to be registered to the a doctors, dentist and opticians asap. A Lac medical will also need to take

place and this take place every 12 months. This will monitor any medical issues outstanding and monitor weight, height, diet and immunisations. We also have drop in sessions from the sexual health nurse every month and she does drop in sessions for the young people to teach them the importance of safe sex. This is confidential for the young person. The young persons RPP is updated monthly by the keyworker and used as a monitoring process. Also it evidences on what has been actioned and completed.

A young person interests and hobbies are also taken on board and if a young person is interested in football then we will encourage the young person to attend a football club and help find the young person a good club to play for. If young person is struggling emotionally with anger, mental health issues then the young person will be supported by being referred to a health professional (CAHMS, psychiatrist, psychologist). An assessment may need completing and strategies put in place from there. The keyworker will liaise with the professional in regards into how support the young person. .

2Assess any risks to or concerns about the health of children and young people A young person when admitted to the home was suffering badly from toothache who came from his family home and had suffered neglect. I delegated a staff member to call NHS direct who advised us to give the young person paracetomal for the pain and to book an emergency appointment to the dentist. The young person went the next day and had dental treatment and prescribed anti biotics. This was then put on his risk assessment and RPP in regards to his treatment and being prescribed medication. . 3Support others to recognise and record concerns about a child or young person's health following agreed procedures. If staff are not trained

in recording and report writing then this is training course they will go on. This also gives guidelines in regards to the services policies and procedures when recording on legal documents. If a staff member raises concerns re a young persons health then this needs to be addressed with keyworker and case manager to action. If it is an urgent matter staff are advised to call for medical advice or attention and inform a manager.

These guidelines are in place for staff and part of a staff members inductions when starting the job and where any medical contact should be recorded and followed up. If a young person return under the influence of alcohol or other illegal substance and is due medication there are clear guidelines in the medication policy that NHS direct should be called to see whether the medication can still be prescribed or not. This will also be on a young persons risk assessment if this is an ongoing concern. If a young person come back injured and has hurt their leg after playing a sport.

The young person must be offered medical treatment and action required completed. This must be recorded on an accident book and there a clear guidelines for staff. Work with others to take action to address concerns identified about the health of children and young people. If young person is struggling emotionally with anger, mental health issues then the young person will be supported by being referred to a health professional (CAHMS, psychiatrist, psychologist). An assessment may need completing and strategies put in place from there. The keyworker will liaise with the professional in regards into how support the young person. CAHMS ntervention and consultation takes place at the home with keyworkers to

give them the opportunity to discuss their keychild and support the keyworker to support their young person in regards to thinking of strategies to put in place to support them with their well-being and development. Be able to lead the development of practice with children or young people to promote their well-being and resilience. 5. 1 Develop methods of evaluating own practice in promoting children or young people's well-being and resilience. In my supervision my own practice is evaluated and monitored. Me and my line manager discuss the young people I case manage .

We discuss what the issues are, the young persons goals and what the keyworker is currently working on to support the young person on their development. Constructive criticism is given to help myself develop or a fresh idea on how to manage a young person through their own experiences. We also have a development plan for the home that we have ideas and goals to work towards to promote and develop our own practice in our responsibilities. It is also beneficial to have feedback of the young person and the staff member of how they feel they are being managed and if they have any suggestions on how I could further support them.

Develop methods of evaluating organisational practice in promoting children and young people's well-being and resilience. As a management team we evaluate our methods in Managers meeting and discuss any developments or changes that maybe needed to enhance the running of the home for the purpose of the well-being of the young people. We also hold meetings with other homes managers to discuss the services developments, policy

amendments from new legislation, paperwork developments for recording purposes, Ofsted framework.

We have monthly meetings with the police re intervention and restorative justice strategies for the young people to promote preventatives for young people causing anti social behaviour. We also having education meetings with a strategic lead from education to discuss any issues we have with school or what resources are on offer. We also have health leads meeting to support us on how to promote young peopole with a health diet and any policy changes that need to be implemented into the home. This is also an opportunity to discuss individual cases in regards to hygiene and dietary issues.

Lead others in practice that supports solution focus approaches for supporting children and young people's well-being and resilience. RPP are put in place for all young people when admitted and a lot of work is done with the young people around their present behaviours. Young people are asked about the future goals and the things they would like to change in their current life with looking into the future. Young people are supported in this by being giving clear routines and realistic goals are set for them through their own choice. These goals will be recorded on the yp's RPP.

To help encourage young people a goal chart will be put in place along side an incentive plan so they see rewards when they achieve their individual goals. The keyworker goes over this weekly to see how they are getting on. If this is not working, new goals will need to be set and incentive plan re looked at so the young person doesnt lose their focus on what they are trying to

achieve for themselves. 5. 4 Lead others in developing areas of practice that promote children and young people's well-being and resilience. Please see above.