

Role of Lead Practitioner Guidance

Introduction

We know from practice that children and families who require support from a range of professionals can potentially receive fragmented and uncoordinated services, which can cause confusion and delays in receiving the correct support.

By appointing a Lead Practitioner, it aims to ensure the provision of holistic support to meet the individual needs of all children, young people and adults within a family. It also

provides coordination between the family and the services/practitioners working alongside them and supports the achievement of desired outcomes.

The Lead Practitioner is for the whole family when a range of services are involved and a targeted or specialist response is required. They will act as a single point of contact for the family, which makes it easier for them to know who to communicate with.

Key principles

- ▶ Build a trusting relationship with the child/ren and the family.
- ▶ Be the single point of contact for the family.
- ▶ Ensure the child/ren and family understand what is happening at every point and are encouraged to contribute.
- ▶ Ensure the child/ren and family's needs are identified by completing an assessment of need (Early Help Assessment).
- ▶ Be the single point of contact for all practitioners working with the family.
- ▶ Ensure the family's plan is implemented and reviewed frequently (every 6-8 weeks) via a Team Around the Family (TAF) meeting.
- ▶ Coordinate practitioners working with the family to reduce any overlap and inconsistency in the services received.
- ▶ Do not take responsibility or accountability for the actions/services delivered by other practitioners.

Who can be a Lead Practitioner?

Any practitioner supporting the family can take on the Lead Practitioner role. For example, GPs, Health Visitor's, Family Support Worker's, School Nurses, Teachers, or Special Educational Needs Coordinators.

The practitioner who takes on the role of Lead Practitioner will vary according to the specific needs of the child/ren and family. It is also important that the family have a good relationship with the Lead Practitioner and are in agreement.

How is a Lead Practitioner identified?

The Lead Practitioner is identified from the group of practitioners working with the child, young person and family. They are chosen through a process of discussion and agreement, which normally takes place at the initial Team Around the Family meeting.

Decisions about who should be the Lead Practitioner should be taken on a case-by-case basis and should be informed by the child, young person and their family.

Supporting the Lead Practitioner

It is essential that the other practitioners working with the child, young person and family, support the Lead Practitioner in the exercise of this role. This means agreeing to take and disseminate minutes of meetings, ensuring that they attend meetings as required and providing information and following through on actions as agreed.

It is expected that in the absence of the Lead Practitioner (annual leave / short-term

Changing the Lead Practitioner

The Lead Professional can change over time, typically at times of transition or when a child/family's circumstances change significantly. While the Lead Practitioner can change over time, this should be kept to a minimum, as this would be unsettling for the child and family.

In some settings and services, a practitioner linked to a child or adult is known as a keyworker or caseworker. This means that they are the designated practitioner from that service for the named individual, but it does not mean that they are necessarily the Lead Practitioner for the whole family.

Once a referral has been accepted by the Children and Families Hub, a social worker or Family Wellbeing practitioner will be the Lead Practitioner depending on the family's identified needs and threshold.

sickness / exceptional circumstances) other supporting practitioners should continue to support the functions of the Lead Practitioner where possible to ensure children, young people and family members receive seamless support.

Regardless of their substantive practitioner role, the Lead Practitioner must be given appropriate recognition and cooperation in this role by other practitioners and agencies.

Examples where changes may occur are:

- ▶ At the initial Team Around the Family meeting.
- ▶ The family no longer meets the threshold for Child In Need / Child Protection / Family Wellbeing Services or the family's needs escalate.
- ▶ Child transitions from primary to secondary school.
- ▶ The appointed Lead Practitioner is leaving or changing employment.



Training available

- **Effective Support for Families in Merton**

To understand Merton's Effective Support Model and how it's used to support the assessment of needs and to be familiar with the range of tools available to aid effective work with families.

- **Relationship-based Practice in Merton**

To reflect on how relationship-based practice can be applied when supporting children and families individually and as part of a multiagency network.

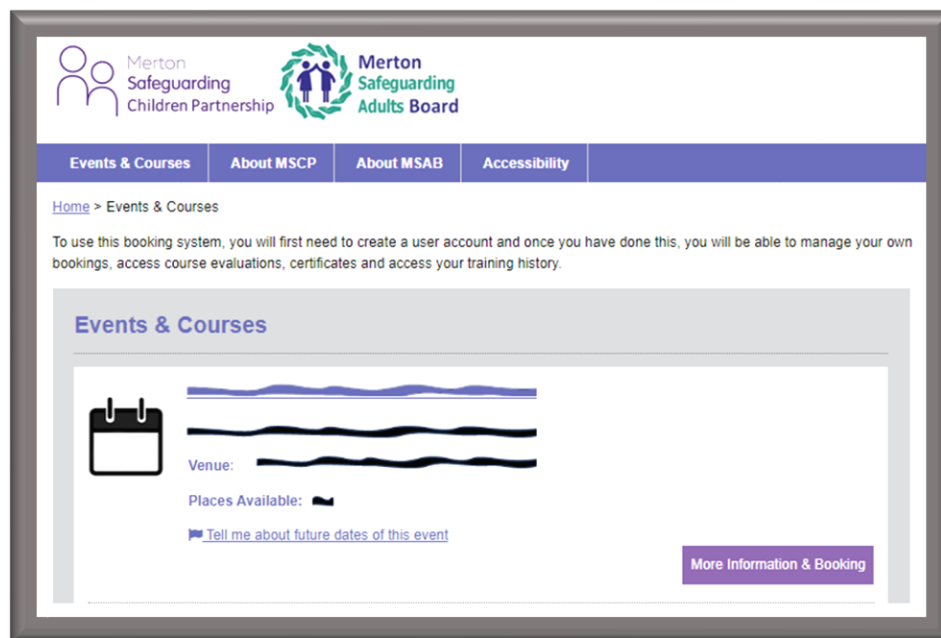
- **Multi-Agency Safeguarding Training**

To develop an awareness of what to do if there are concerns about the safety and welfare of children and young people.

- **Evidence-Based Interventions to support Parents experiencing conflict in their relationships**

To introduce the three online programmes available for parents who are experiencing conflict in their relationship and to equip practitioners with the skills, confidence, and tools required to support parents to access these interventions.

All training can be booked via the [Merton Safeguarding Children Partnership training.safeguardinginmerton.org.uk](https://training.safeguardinginmerton.org.uk)



Further Support

For further information, support and guidance on the role of a Lead Practitioner, please contact the **Early Help Support Coordinators** by emailing FSD@merton.gov.uk