



## REPARATIVE CARE TEAM 2021 ANNUAL REPORT

### Contents:

1. Introduction
2. Reparative Care Team Composition
3. Vision and Mission Statement
4. Our Aims and Objectives
5. Our Standard of Care
6. Overall Service Provision
7. Training
8. Therapeutic Interventions
9. Post Adoption Services
10. Child Sexual Abuse Therapy
11. Monitoring and Evaluation of the Service
12. Service User Feedback

### 1. Introduction to our service

The Children & Young People's Plan 2017- 2022 outlines the way in which the Children & Family Community Services will meet the requirements of 'the Children Law' (2008). The Reparative Care Team forms part of the Corporate Parenting Strategy and Children & Young People's Plan in line with the 2020 vision. Additionally, the Adoption Reform Law will require a legal framework around adoption support services provided to adopters, adopted children, their siblings and close birth family members

The Reparative Care Team provide direct therapeutic services to Looked After and Adopted children and their families. We also provide services for children whose carers are in receipt of a Residence Order allowance. Additionally, The NSPCC 'Letting the Future In' therapeutic programme is provided through the Reparative Care Team for any child in Guernsey who has experienced child sexual abuse.

In 2021 the Reparative Care Team were joined by a further two members of staff. Penny was appointed as an Occupational Therapist and Laura joined the team as a Child Psychologist and both are providing additional knowledge and experience from their respective fields.

New key service developments during 2021 included the implementation of an occupational therapy service to support children, young people, parents, carers and schools using a sensory, attachment, and trauma-informed approach. This can help the network around the child to develop an understanding of sensory regulation strategies to improve overall well-being.

In 2021 the Islands Safeguarding Children Partnership Board (ISCP) commissioned jointly with Jersey a review of multi-agency services approach to managing harmful sexual behaviour in children and young people. This has been a collective audit across Education, Police, Probation, Children's Services and third sector agencies and highlighted the need for increased service provision. Since the recommendations and action plan have been released and steps are being taken to ensure services are aligned with good practice. The Reparative Care Team will be taking a lead role in providing an NSPCC evidenced based therapeutic intervention called Change for Good to those children and young people displaying harmful and problematic sexual behaviour.



Team Manager, Reparative Care Team

## 2. Reparative Care Team Composition

In the year of 2021, the Reparative Care Team comprised of:

- Jo Ogier                      Team Manager
- Nigel Humphrey          Clinical Psychologist
- Claire Hennessy          Principle Therapeutic Practitioner
- Laura Taylor                Child Psychologist
- Rosy Corbin                Therapeutic Practitioner (part time)
- Alison van Heerden      Therapeutic Practitioner (part time)
- Penny Williams          Occupational Therapist (part time)
- Favienne Drew            Therapeutic Support Worker
- Philippa Cordall          Therapeutic Support Worker
- Martin Whitwam          Senior Social Work Practitioner
- Jenny-Rae Merritt        Senior Social Work Practitioner
- Julie Bowditch            Senior Social Work Practitioner (part time)
- Sharon Le Galloudec      Social Work Practitioner
- Vicky Leadbeater        Senior Social Work Practitioner and Adoption Support Services Advisor (part time)

### 3. Mission Statement and Vision Statement

**Our Mission Statement:** We recognise that children traumatised within family relationships require exceptional re-parenting to heal and recover and this is best achieved when they experience safety. Our work with children and young people living away from their birth parents supports the parent/carers and networks around each traumatised child to help them feel more secure in order to improve their emotional well-being.

**Our Vision Statement:** To create healthier family environments by addressing early childhood trauma. The Reparative Care Team aims to fully consider and embrace the following concepts:

- That every child is unique.
- That the child, family and the systems around the child are experts on their own experience and crucial to our understanding.
- That relationships are central – children have the right to have a contextual and developmental understanding of their distress explored through building therapeutic relationships.
- That it is often far more effective to work with the adults proximal to the child, than direct one to one therapy. Growth and change happens through relationships.

### 4. Aims and Objectives

The Reparative Care Team aims to provide the following:

- To offer a response to children and their carers where placements are in crisis or where a placement is in jeopardy of disruption. Generally, this will initially include an assessment of therapeutic support needs to determine the most appropriate course of intervention.
- Where applicable attendance at relevant meetings with the aim to provide a therapeutic perspective to support children and their families/carers.
- The Team provides consultations to social workers, residential workers, adopters, foster carers and Residence Order carers regarding emotional and social well-being of children who meet the criteria of intervention.
- Training is provided and facilitated by the team to eligible professionals, families and carers to promote required re-parenting.
- A post adoption support service is provided for adopted children, adopters, birth parents and adult adoptees. Additional information is outlined in latter parts of this report.
- The team provides the specialist NSPCC Letting the Future In Programme for any child in the community who has experienced sexual abuse.

The Reparative Care Team's primary objectives are:

- To promote a greater understanding for carers of the impact of developmental trauma.
- To assist in the care planning processes for looked after and adopted children, with a particular emphasis upon assessment, planning and reviewing of therapeutic care needs.
- To provide evidenced-based therapeutic interventions as outlined in the latter sections of this report.

- To provide training and reflective practice workshops for foster carers, adopters, Residence Order carers, residential staff and social workers.
- To promote stability of placement for looked after, adopted children, Residence Order children by providing relevant consultations and training to carers to equip them in caring for this cohort of children.

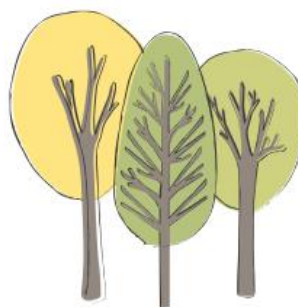
## 5. Our Standard of Care

We ensure that our practice has a safe equitable governance structure. The Reparative Care Team aims to be fully compliant with all legislation governing the provision of services. We have robust quality assurance mechanisms in place and seek regular feedback from those accessing the services, including children, carers, birth families, social workers and the professional network. Observation of direct therapeutic interventions take place; regular clinical supervision internally and externally is undertaken; staff receive supervision and appraisals. Review of service delivery takes place on a regular basis to ensure current and future practice is identified and adhered to.

## 6. Overall Service Provision

The Reparative Care Team has implemented evidenced-based interventions to improve the overall emotional, mental health and well-being of looked after and adopted children and children on a Residence Order with an aim to reduce instability within placement. Training, consultation and support will also be provided to carers of this vulnerable group of children.

The team also provides all children in Guernsey with a specialised intervention programme, 'NSPCC Letting the Future In' for those who have experienced sexual abuse. Additionally, the team are able to provide a bespoke therapeutic programme for this cohort of children who do not meet the eligibility criteria for 'Letting the Future In'.



## 7. Training

The Reparative Care Team believe that children deserve the best possible care and this is achieved by having well supported and well-trained carers and professionals around them. The Team aims to provide training to carers of Looked After and Adopted Children and those children on a Residence Order as well as professionals working with children and young people in the course of their employment.

### 2021 Reparative Care Team Training

**ACE's:** Adverse Childhood Experiences (ACE's) can significantly affect both physical and mental health across the lifespan. Research has shown that ACEs are relatively common and far more prevalent than we thought a decade ago. The seminar will explore the long-term effect of Adverse Childhood Experiences as well as explore as the Neurosequential model of brain development as outlined by Bruce Perry.

**Developmental Trauma:** When children experience early loss, separation, abuse or neglect their brain development is affected in significant ways. They often experience what is known as Developmental Trauma, which means their development has gone off track and they cannot behave, feel, relate and learn like other children their age. In this seminar we will take a deeper look at Developmental Trauma and how it can be repaired with a holistic, 'bottom up' approach; with safe and sensitive relationships.

**Trauma & Behaviour:** Often children who have experienced trauma can exhibit behaviours that can be frustrating and confusing for the adults caring for them. It can be helpful to think about these behaviours as symptoms of trauma and consider the ways in which the adults can

THE  
*Reparative Care Team*  
2021 IN REVIEW

*Here's what what we did...*

**SUPPORTING THE CHILD'S NETWORK**

**39**  
NMTS WERE IN PROGRESS WITH 13 COMPLETED BEFORE THE END OF THE YEAR

**1**  
SYSTEMIC REFLECTIVE MEETING

**monthly**  
PEER SUPERVISION TO MASH AND THE CHILDREN'S SAFEGUARDING TEAM

*And... from October 2021 we provided monthly consultations to 7 residential care teams*

work with the child to reduce these symptoms, to enable the child to engage in life and relationships and be their best selves. This workshop provides a space to think about some of those behaviours in the context of trauma and explore some potentially helpful ways to respond as the adults caring for that child.

**Therapeutic Parenting:** Therapeutic parenting is a deeply nurturing parenting style, and is especially effective for children with attachment difficulties, or who have experienced childhood trauma. Therapeutic parenting has an enhanced level of therapeutic responses and empathy within the parenting style, underpinned by nurture, clear routines, boundaries, and natural consequences. This seminar will look at various therapeutic parenting techniques and how it differs to standard parenting.

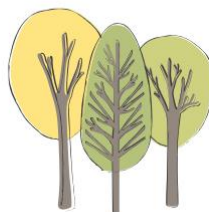
**Lunchtime Talk: Letting the Future In and Harmful Sexual Behaviour** – a one hour overview of the sexual abuse programme provided by the Reparative Care Team and plans for future service provision in this area.

**Shame: Parenting children who have experienced toxic shame** - Shame is a complex emotion that is part of normal development. Many children in care have experienced toxic shame that has impaired their emotional development and led to a sense of self as bad, worthless, or stupid. This course explores the importance of regulating the shame the child experiences in order to build attachments and improve a child's sense of safety thus increasing development of empathy.

**Specialist Fostering Reflective Practice Groups** provide support and guidance to specialist foster carers within a closed group format which includes some theoretical content with the aim of increasing understanding of emotional and behavioural needs and explore ways of applying this using P.A.C.E.

The group also aims to:

- Focus upon reflecting on the day-to-day experiences of parenting these children.
- Encourage therapeutic parenting by developing a culture of safety and care for group members, enabling self-reflection.
- Increase skills and confidence of foster carers.
- To provide a collaborative atmosphere that builds trust between members to encourage peer support.



## 8. Our Therapeutic Interventions

These evidence-based models of intervention aim to help children, young people and their carers overcome the impact of abuse, trauma, and or/neglect.

**Art Psychotherapy** is a form of psychotherapy that uses art media as its primary mode of expression and communication. Within this context, art is not used as diagnostic tool but as a medium to address emotional issues which may be confusing and distressing for children and young people.

**Eye Movement Desensitisation and Reprocessing Therapy (EMDR)** is a specialised procedure for resolving trauma and is a well-researched psychotherapy treatment for trauma related treatment. The therapist guides the client in concentrating on a troubling memory or emotion whilst applying bilateral stimulation through either eye movement or tapping. It is used to treat post-traumatic stress in addition to attachment difficulties, depression, anxiety, and phobias. It can also be used to enhance emotional resources such as confidence and self-esteem.

**Psychological Assessments** including Neurosequential Assessments, Cognitive Assessments, Trauma and PTSD Assessments also form part of the services provided within the Reparative Care Team where required which are completed by the Clinical Psychologist.

**Neurosequential Assessment of Therapeutics - As** directed by Bruce Perry's Neurosequential Model of Therapeutics™ (NMT) which highlights the need for child therapeutic intervention to be matched at their functioning level. The NMT assessment



### Therapeutic Work...

**57**

BETWEEN JANUARY TO DECEMBER 2021  
RCT RECEIVED 57 NEW REFERRALS

*We have worked with the families or support networks of:*

**34**

**ADOPTIVE FAMILIES**

**7**

**CARE LEAVERS**

**16**

**CHILDREN IN RESIDENTIAL CARE**

**1**

**CHILD IN A KINSHIP PLACEMENT**

**26**

**CHILDREN IN FOSTER CARE**

**13**

**CHILDREN ON RESIDENCE ORDERS**

**TOTAL CHILDREN SUPPORTED**

**97**

*Other types of referrals:*

**2**

*Plus...* **28** Professional Consultations on cases which are not open to an RCT worker or do not meet service criteria.

has been designed by the Child Trauma Academy as a developmentally sensitive, neurobiology informed approach to clinical problem solving while complementing other clinical assessment models. An NMT trained clinician will collect a complete developmental history as well as assess a client's current functioning to inform the NMT Metric Report (including a "Functional Brain Map"). The NMT Assessment process helps identify domains of functioning that are either undeveloped or dysfunctional, which in turn, helps guide the selection and sequencing of developmentally sensitive, neurobiologically guided interventions.

**Therapeutic Life Story Work** can help children and adolescents not living with their birth parents who are struggling with the impact of their past. It is an intervention designed to strengthen the relationship between the child and their carer through exploring together the child's history. It aims to help the child make meaning of their lived experience by exploring, questioning, and understanding the past events of their lives, giving them a deeper understanding and acceptance of their life history and more positive and healthy self-identity.

**Non-Directive Creative and Play-Based Work** – Many children may find it difficult to talk about their experiences but play and the creative arts are usually a comfortable way for them to express themselves. This intervention uses the relationship to create safety between the child and the worker in order to create a therapeutic space for healing work to occur.

**Dyadic Developmental Practice (DDP)-informed Consultations** - The Reparative Care Team have been providing consultations to those carers and professionals who are part of a child's network of support. DDP specifically aims to help carers and professionals make deeper emotional connections which can be particularly hard for children and young people who have difficulties trusting and relying on adults due to their past experiences. Understanding developmental trauma is a key factor during consultations to assist with exploring how a child's development has been affected. In consultations we think together about the child or young person's psychological, emotional and developmental needs, and how these can be met.

**Systemic Reflection Meetings** - The aim of these meetings is to assist the network in thinking and developing a multi-services approach to weave together a helpful network of care provisions, focused on understanding and caring for a child in an integrated context. These offer a Therapeutic space for a group of professionals whose aim is to enhance psychological understanding and knowledge of a particular child. It will offer the opportunity for therapeutic insight into a child's history and ideas on possible structures of a child's inner world. New insight and change can emerge, supporting planning and actions but also enhancing relationships between members of the network.

**Theraplay®** is an interactive child and family therapy, designed to enhance attachment, self-esteem, trust in others, and joyful engagement. Parents or care providers are central to the therapy. Theraplay promotes the kind of play between children and their caregivers that nurtures a lifelong capacity to relate to others. Theraplay activities are geared to the child's emotional needs and capacity to self-regulate. Because attachment is formed during the early months when the right brain is dominant and co-regulation is essential, efforts to change negative patterns must be interactive, direct and emotionally focused. Theraplay uses the nonverbal language of

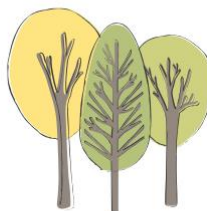


the right brain to provide appropriate responses of stimulation to the areas of the brain that are involved in affect regulation.

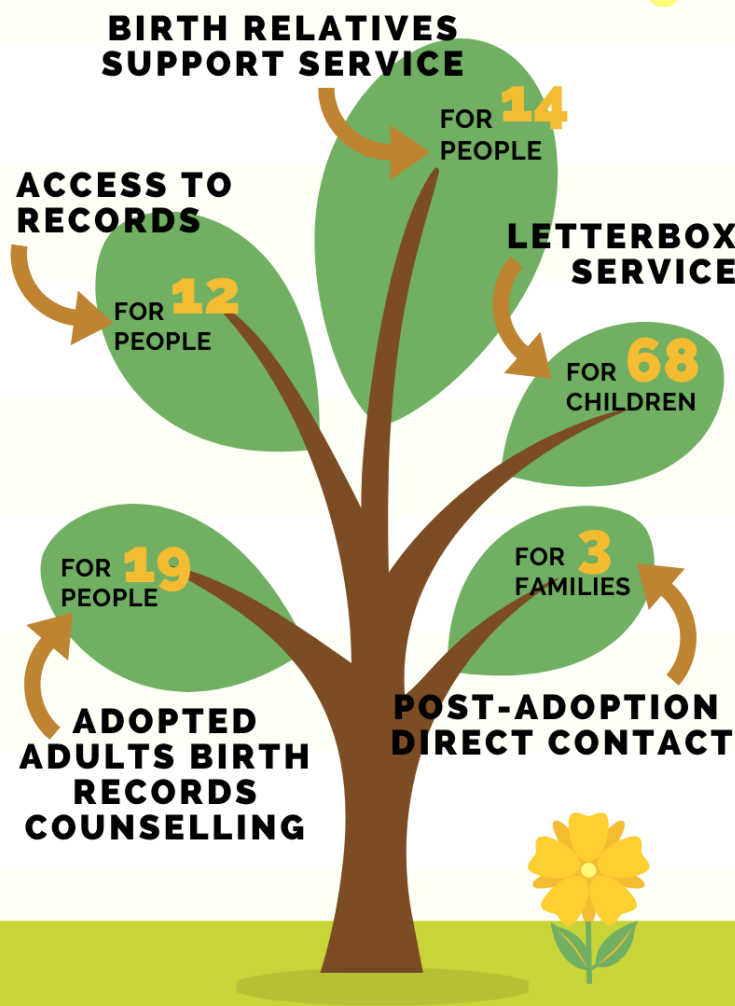
**Play therapy** is a psychotherapeutic approach primarily used to help children explore their lives and freely express repressed thoughts and emotions through play. Therapeutic play normally takes place in a safe, comfortable playroom, where very few rules or limits are imposed on the child, encouraging free expression, and allowing the therapist to observe the child's choices, decisions, and play style. The goal is to help children learn to express themselves in healthier ways, become more respectful and empathetic, and discover new and more positive ways to solve problems.

**Occupational Therapy** - The occupational therapy service within the Reparative Care Team provides support to children, young people, parents, carers and schools using a sensory, attachment, and trauma-informed approach, to help the network around the child to develop an understanding of sensory regulation strategies, in order to support the health and well-being of the child. Through assessment and observation within the home and school, the occupational therapy service can provide realistic and manageable therapeutic strategies for the parents, carers and teachers of children who have experienced disruptions in their attachments and sensory system development. The support provided will assist parents, carers, and teachers in identifying realistic and meaningful goals, which promote co-regulation with the child, and aim to support the child in learning self-regulation. This sensory and emotional regulation focused support can then, in turn, enhance the child's capacity to form meaningful relationships, participate in daily activities, play, interact and learn.

**Emotion Coaching** - Emotion coaching emphasises emotional regulation rather than behaviour modification. It views all behaviour as a form of communication, making an important distinction between children's behaviour and the feelings that underlie their actions. It is about helping children to understand their varying emotions as they experience them, why they occur, and how to handle them.



# Post-Adoption Services...



## Life Story books for adopted children...

We worked on 14 Life Story Books and 7 of these were completed before the end of 2021

## 9. Post Adoption Support Services

The provision of a range of adoption support services is provided by the Reparative Care Team in conjunction with other agencies and forms part of the Adoption Reform Law requirements. This Service requirement is based on the recognition that pre and post adopted children and their families are likely to require support at different stages of parenting. Adoption Support includes any support likely to be required for an adoptive placement to endure through to adulthood. This is applicable to existing and new situations both pre and post Adoption Order.

### Who is eligible?

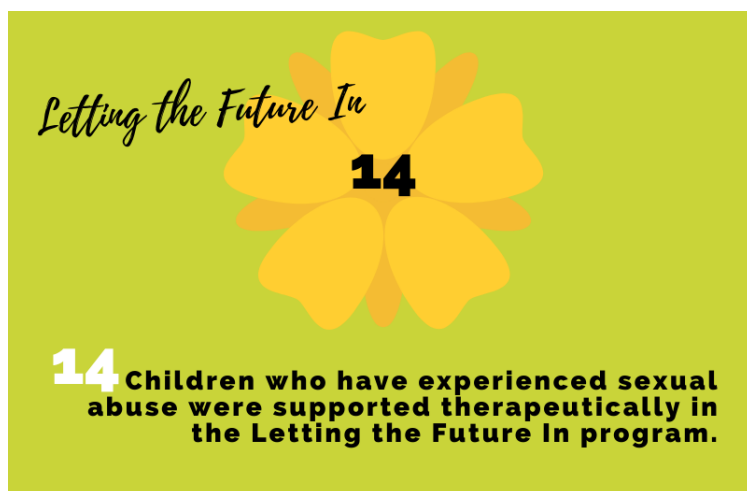
Adopted children, adopters and birth parents and close relatives who have been affected by adoption are eligible to access adoption support services as requested.

### How does it work?

Delivery of service will be formulated through an Adoption Support Plan. Adopted adults are also entitled to an assessment of need and this service is provided via the Access to Records Service.

## 10. Child Sexual Abuse Therapy

'Letting the Future In' is a service designed by the NSPCC for children aged 4 to 17 years who have been sexually abused. Letting the Future In helps children come to understand and move on from their past experiences through activities such as play, drawing and painting and storytelling. Parents and carers are also offered support to move on from the impact of finding out about the sexual abuse and to help their children feel safe.



Letting the Future In is a structured therapeutic intervention with children affected by sexual abuse and is grounded in an understanding of trauma, attachment and resilience. It is largely psychodynamic in nature and emphasises the therapeutic relationship of the practitioner to the child's emotional responses to abuse, which typically include betrayal, powerlessness, shame and traumatic sexualisation. It sees the therapeutic relationship between child and practitioner as 'core' and employs creative therapies with work on the awareness and management of feelings. It also draws on other methods including counselling and socio-educative approaches.

Children receive up to four therapeutic assessment sessions followed by up to 20 intervention sessions, extended up to 30 if necessary. At the same time, their safe carer is offered up to eight sessions to help them process the impact of discovering that their child was sexually abused, and to support the child in their recovery.

## 11. Monitoring and Evaluation of the Service

The service will be regularly monitored by an Annual Service Report being provided to the Committee for Health & Social Care and Head of Service for Children & Family Community Services.

In addition, the quality of the work will be monitored by regular file and electronic audits, service user feedback, regular clinical and staff supervision, staff appraisals and direct observation of practice.

Evaluation of therapeutic work and group interventions will be conducted by the Reparative Care Team Clinical Psychologist and Principle Therapeutic Practitioner.



## 12. Feedback about RCT Services

The sessions with RCT helped a lot to “help me with my feelings.”  
- Child, Letting the Future In

“[Residential Consultations] have been so beneficial to the team and myself working with you...” House Manager, Residential Services

“We wanted to thank you for all the support you have provided us. It meant a lot to us to know that you and your team were there.”

– Foster Carer

“Just wanted to pass on that Foster Carers have said how fantastic you’ve been in the support you’ve given them, and wanted to thank you.”

- Team Manager

“I wanted to say thank you for the session last week. I found it really valuable.” - Professional

“Thank you so much for your great support. It would be so difficult to deal with all of the situations without you.” – Residence Order Carer

“Everyone who attended the meeting was very complimentary about the work that (RCT) is doing with (Child) and her foster carer. Significant differences have been noticed in (Child’s) emotional literacy, attunement and capacity to express a broader range of emotions.”

- Professional