

## **TRUSTED RELATIONSHIPS – One to One Work CASE STUDY TEMPLATE**

**NAME of Young Person: Child X**

### **CONTEXT OF THE WORK AND THE KEY ISSUES**

*A summary of the key issues for the YP and the reason for referral*

*X was referred to us for CSE/CE and friendship groups.*

*Concerns around who x was hanging around with and what x was involved with when out with these people.*

### **YOUR APPROACH**

*What did you do to build relationship and address the issues listed above? Think about how you worked with other to create solutions (family, other agencies etc.)*

In order to build a relationship with x, I took a keen interest in X'S hobbies which were football. X was a massive football fan and only wanted to take part if football was involved. I based my sessions around football in the park and after a football game or before a football game we would work through issues that needed to be addressed. I made sure x understood why it was important that we addressed issues that needed to be addressed.

X always had a say in what work we were going to carry out and wishes were respected whilst focusing on key areas required. I often asked X how we can improve sessions and what kind of things X would want to do.

The way I worked with X was very transparent. X knew I had contacts within school and local community centres and clubs X attended. I worked closely with the family and kept mum in the loop at all times. This was done so that mum knew exactly what was going into sessions with X and vice versa for issues at home.

X and I sat down and made a clear plan so we knew exactly how our time was going to be spent. X was happy with this as it meant X had a say and there were no surprises. Incentives were given after a certain amount of sessions and X was allowed to buy a new football to practice new skills in the park after a number of sessions were completed.

### **WHAT WAS THE OUTCOME?**

*What has changed and how things have improved for the young person. What might the next steps be for the young person to continue on a positive journey?*

X was involved with older lads who would often pick him up and ask him to steal things such as car bumpers and bikes. X was offered money for doing this and would get lifts to funfairs and money to go enjoy in the funfairs.

X was spoken to about the dangers of what could happen if he is caught. He was given real life examples of people in his area that are now in prison, some of these people were really good football players and could have got scouted to big football clubs. X's love for football made this story hit home and he soon realised it wasn't worth it and would get him into a lot of trouble potentially ruining his life chances.

X was easily influenced and never really thought of the consequences of his actions. X got involved with some local boys who thought it was funny to light fires not realising the harm that they could cause if they got out of hand. X was involved in setting fire to a cabin at a local school. He claimed he didn't know the fire was still on when they walked away from the fire. X had multiple sessions on fire

safety and the potential outcome of that fire. These sessions hit X hard when he was told that he could have taken the lives of innocent children. X now understands the consequences of his actions and has vowed never to light a fire again. X's mum has been very supportive in this matter and even took X over to the school to apologise to the head teacher for the damage he had caused. X sat down to write an apology letter to the school in a session after football.

As X was in that transitional period of his life moving from primary to secondary, I felt that it was extremely important that X had the right support in place so he wasn't looking to be accepted into bad friendship groups. X was signed up onto the Families against youth crime programme and was given the opportunity to go away on residential to the lake district with other young people who were in this transitional period. X made lots of new friends and learnt lots of new skills. X loved every minute of it and thoroughly enjoyed his time learning new skills that can help him progress in life.

X has since made positive friendships and has joined a few sports clubs after school.

**Refer to specific Project Outcomes -**

*In what way has the young person increased their positivity?*

*What other supports has the YP been linked to?*

*What group work has the YP engaged with?*

X engaged with fayc key worker and went on the fayc residential with around 40 other children

X attends local football club

Mum says x has become much more willing to listen and usually stays away from people x doesn't know.

**DIRECT FEEDBACK**

*Please record any direct feedback received such as quotes, compliments or complaints about the work with this individual*

**X enjoyed being on TR programme and says it has helped him learn new skills that he can use in other parts of his life. X now thinks about the consequences of his actions before doing things and is more cautious of the things he does.**

**Mum says she is grateful for the help and support with X and that X has been given opportunities to take part in a residential which she would have never been able to afford as a single mother. She says it has always been a wish for X to go on residential and learn new skills since primary school but she did not have the funds to pay for it. She also reports X has become more independent and doesn't lie about his whereabouts. He is more open and honest with her which makes their relationship much better.**

**TRUSTED RELATIONSHIPS – One to One Work**

**CASE STUDY TEMPLATE**

**NAME of Young Person: CS**

**CONTEXT OF THE WORK AND THE KEY ISSUES**

*A summary of the key issues for the YP and the reason for referral*

Young person referred to TR due to sexual abuse concerns/ vulnerabilities to exploitation. We received the CE assessment for CS in April 2020 with an 'emerging CE' flag. Concerns were in relation to placement break down, residing in Leeds due to issues with family relationships following sexual abuse disclosure. Young person open to CAMHS in Bradford causing issues in relation to ongoing

support whilst in Leeds. Ongoing concern for young person's emotional wellbeing. Increase in self-harm, suicidal thoughts and eating disorder. Young person's missing episodes increasing and unsafe relationships.

### **YOUR APPROACH**

*What did you do to build relationship and address the issues listed above? Think about how you worked with other to create solutions (family, other agencies etc.)*

Young person supported throughout Covid-19 lockdown with sessions twice a week via WhatsApp video / telephone calls/ text messages. Young person then supported at Barnardo's once lockdown restrictions lifted in July. Weekly face to face session / structured session using therapeutic art sessions to engage in structured exploitation awareness work. Support given to family member who had been caring for CS (Aunt). Practical advice provided to Aunt RE safety planning / missing strategies and procedures. Referrals made to health services in Leeds (CAMHS), referral to Leeds Social Care for additional support after significant missing. Maintaining a positive relationship with CS to continue to build a trusted relationship.

### **WHAT WAS THE OUTCOME?**

*What has changed and how things have improved for the young person. What might the next steps be for the young person to continue on a positive journey?*

Young person in need to access further support to continue with Positive Identities project, referral made for ongoing support. Young person now has a positive relationship with the organisation and feels happy to continue support via Barnardo's. Young person back in Bradford with attempts to build on relationship with parent. Open to Bradford Children's Social Care with an ongoing SC47 / child and family assessment. CS is back in college after a unsettled period following significant missing episode where CS was found in Dorset. Contact has been made with investigating Officer in Leeds who will be support CS with the ongoing Police Investigation. Young person feeling more in control having been provided with updates rather than feeling 'out of the loop'.

### **Refer to specific Project Outcomes -**

*In what way has the young person increased their positivity?*

*What other supports has the YP been linked to?*

*What group work has the YP engaged with?*

Young person feeling listened to and supported. Young person has commented on previous being undetected by family / professionals in her life. Young person feeling protected and listened to. Young person has been referred for ongoing support RE identity, missing support and placement support (via Be Positive Pathways) to support in returning to Mum's care in Bradford.

**DIRECT FEEDBACK**

*Please record any direct feedback received such as quotes, compliments or complaints about the work with this individual*

**Young person has enjoyed completing her scrap book tool to capture her achievements and work she has completed with her worker.**

**Young person able to identify trusted adults / support networks.**

**Young person has shared feeling safe when completing her sessions at Barnardo's and less isolated during Covid-19 lockdown.**

**Young person enjoyed receiving care packages through the post, positive quote cards / letters from the worker.**

**Young person feeling listened to, heard and protected by worker.**

**Trusted Relationships – Group Work (consultancy and support)**

**Name of young person: BG**

**Name of Unit Keyworker: NB**

**Context of the work and the key issues**

*A summary of the key issues for the Young Person and the reason for referral*

A referral was received from the allocated Children's Social Care (CSC) social worker, regarding B as the SW felt that B was vulnerable to exploitation; her risk level stated as at 'emerging risk' of CSE.

Concerns were highlighted around B speaking inappropriately and sending indecent images to unknown older males via social media. B is 13 and lives in children's residential care, she struggles with her peer group and to regulate her behaviours and emotions both around other young people and sometimes when out in public. B uses sexual language and sexual gestures with staff and young people alike and B has and will expose herself in public places and within the unit.

B is described as having no sense of personal boundaries both physical and psychological with staff and young people. B has no family and no friends outside the unit and has low confidence, low self-esteem and attachment difficulties.

BG will go missing for short periods and will often be led by others in the unit.

The Social Worker has asked for work to be done around dangers of social media and risk of meeting older males.

### **Your approach**

*What did you do to build relationship and address the issues listed above? Think about how you worked with other to create solutions (family, other agencies etc.)*

B's referral had been waiting for allocation and so due to additional resource/capacity being put in to one2one work whilst group work cannot be delivered due to Covid-19 I have been able to pick up the case with the intention of supporting both the young person and staff at the residential unit.

B also attends a school in East where group work partnership has been established.

Due to Lock down restrictions face-to-face sessions have not been possible and so I have built up a Trusted Relationship with B and her Keyworker N. N has a positive relationship with B who struggles with new relationships and attachments and so a collaborative approach between N and I was decided. I agreed to be a consultant and support N to deliver direct sessions with B during lockdown while establishing a relationship with B gradually. I would also be available to other staff at the unit to increase their knowledge / understanding of CE upon request.

Work undertaken:

- N introduced TR to B letting her know I would send an activity pack
- Activity Pack 1: TR intro, arts, crafts and wellbeing activities
- Consultation calls with N sending CEOP / online safety activities for completion with B
- Developing links with residential unit / staff
- Activity pack 2: Scrapbook, arts and crafts in line with B's interests
- Consultation calls with N continued, B gaining more interest in TR engagement
- Letter writing set sent - letter writing between TR worker and B
- B final engaging in telephone sessions and looking forward to meeting TR worker

### **What was the outcome?**

*What has changed and how things have improved for the young person. What might the next steps be for the young person to continue on a positive journey?*

Work is on-going, B very much enjoys receiving her TR activity packs, working through them with staff at the unit and writing letters as it's a novelty for her to send and receive things through the post.

N says that B is doing well and seems more settled, she is enjoying support and completing her activities and arts. N says the pace of introducing TR intervention slowly to B has been good and that the information I have shared with her has been useful.

B tells me that she has:

- been working on a good daily routine
- going for walks, cooking, doing her art and keeping her room tidy
- been keeping up with school work
- been looking after herself more
- enjoyed TR work so far and looks forward to meeting me as lockdown restrictions begin to ease.

The next steps are to work more closely with B to develop:

- Trusted Relationship
- Confident and self-esteem

- Positive activities
- Think about my actions
- Know about risks/consequences
- Healthy / unhealthy relationships
- Knowing how to keep safe

### Direct feedback

Please record any direct feedback received such as quotes, compliments or complaints about the work with this individual

'I liked my activity box. I've put picture on my wall in my room and put some feathers on the inside of my wardrobe'.

'To Marianne, I'm thankful for pack, I like colouring and the feathers it was a cute pack [...] it's fun, I wait see you, thanks again and I am happy with what other pack you want to send, everything feels good'. 'P.S you can call the care home now' B.



## CASE STUDY 1 – Breaking the Cycle Project

### Background

Young person AH aged 15 year 11 (referred in through school, school attendance dropped drastically, missing episodes from home and social care involvement, concerns regarding younger siblings.

AH had multiple home visits to the home from unknowns which were drug related, AH had also become more aggressive in school, AH involved in stealing and driving stolen cars, AH was also clearly being criminally groomed and exploited into drug dealing.

### Interventions

- Allocated a Breaking the Cycle worker
- Intervention work around criminal exploitation, county lines, life and career choices, anger management strategies and coping mechanisms with AH
- Regular visits to see AH and also on-going support for the family
- Worker also actively involved in Childrens Social Care Child Protection review meeting
- Worker built up a trusting relationship with Family members including mum and dad
- One to one work in school with AH, AH was also involved with regular bike riding activities

- Ongoing secondary support – text and call every six weeks to make sure there is no further support required.

### **Outcomes**

- Re-engaged at school, attendance improved, AH began to focus more on vocational qualifications and really got his head down
- AH managed to not be tarnished with a criminal record due to his improvement in behaviour and non-offending
- Focus and aspirations increased, AH began to think more positive about himself and more importantly developed self-worth and academic confidence
- AH became more resilient and slowly began to disassociate himself from criminal links
- AH also recorded a one to one session which was used for BTC which illustrated his journey
- AH and the family no longer have any social care involvement
- AH responding to on-going secondary support and remains focused on vocational aspirations

### **Quotes**

- **Dad** “I don’t think this would have been impossible without your intervention in particular. The boys speak very highly of you and really appreciate the work you have done with them. The personal intervention and 1-2-1 interaction you had with the boys has allowed them to express themselves in a neutral environment”
- “The boys have begun to realise that life is about balance and you can work hard and you can have fun along the way and all the while being kind and considerate to those around you”
- “I would like to say thank you very much for the support you have shown the boys and myself during your intervention work through Breaking the Cycle programme. 3 months or so ago we as a family were at crisis point, the two older boys were way out of line, poor performance at school, disrupting family and home life, misuse of cannabis and involvement in criminal behaviour. Your intervention has been a blessing, last month the children were moved from Child protection Plan to Child in Need Plan, today that Child in Need Plan has now been closed”

## **CASE STUDY 2 – Breaking the Cycle**

### **Background**

Young person AQ aged 14 year 10 (referred in through District PRU, school attendance dropped drastically, missing episodes from home and social care involvement, concerns regarding involvement in criminality and being groomed by older males linked to SOC.

AQ recently arrived in UK as an asylum seeker from Syria, with mother and older brother. AQ experienced severe emotional trauma and loss of father in Syrian civil unrest, and family split up as a result of mass migration. Experienced PTSD through bereavement and separation from family members.

AQ has had multiple home visits from unknowns which were drug related, AQ had also become more aggressive towards mum at home to the point where mum has no control over what AQ is doing and when he comes home. AQ has on-going investigations pending of both a drug and sexual nature.

AQ has also been involved in driving unregistered and un-insured cars and stopped by the police, which clearly indicates he is being criminally groomed and exploited into drug dealing.

### Interventions

- Allocated a Breaking the Cycle worker – liaise and share information with PRU; CSC; Police; school
- Intervention work around the grooming cycle and criminal exploitation, county lines, life and career choices, anger management strategies and coping mechanisms with AQ
- Initial visits at school then home visits during Covid-19 isolation restrictions, and in some cases alongside CSC in emergency visits
- Also provided on-going support for older brother and mum who struggles with English as not first language. Interpreter present at case conference meetings.
- Worker also actively involved in Childrens Social Care Child Protection review meeting
- Developed trusting and positive working relationship with AQ and brother quickly and both brothers engaged immediately.
- One to one work in school with AQ and boxing sessions once isolation restrictions relaxed was also involved with regular bike riding activities
- Weekly home visit in line with CSC and other agency rota

### Outcomes

- Adhering to isolation rules following intensive intervention from a multi-agency approach
- Moved boys onto CP with CSC so the family receive the appropriate and needs based intervention and safe guarding measures.

### Quotes

- **'I can be anything I want to!'** (During first face to face contact and whilst exploring choices and consequences)
- During a home visit whilst isolation Covid 19, AQ had been asked to think about what he would like his future to look like during the previous visit. His reply was...**'I want to go to drama school or be a model.'**
- On the next visit I enquired if he had identified any colleges a for drama courses. His reply...**'I have found two...Edinburgh and another...Cambridge?'** He was genuinely excited at the prospect of being able to follow his new found focus.

## CASE STUDY 3 – Breaking the Cycle

### Background

K came to the project with a referral that outlined that his 'behaviour was spiralling out of control'. He was on roll at the local PRU but had been refusing to access his education offer.

At 14 years of age he had older associates, but only by a couple of years and had an extensive police record for anti social behaviour and selling cannabis. He had a violent and angry side that had resulted in threats towards teaching staff, shop security officers and police staff. He would not only threaten but would physically assault people, particularly those in authority. He carried a weapon, and had on one occasion used this to slice open a



security guards shirt in the local shopping centre. He has associations with knives and guns at this point.

K was known to Children's Social Care and the police safer schools officer. Initial concerns were that workers should not attend or meet K alone due to the threats and high levels of violence he had demonstrated. Mum was cooperative, but was not assertive or effective in her parenting or management of K behaviours, and she was really at her wits end in terms of knowing what else to do. Mum had also had visits to the home by others who were looking for K and had threats made against her, she was scared and frightened at the home and not prepared to answer the door to people she did not know. K was ruling the roost, doing what he wanted, when he wanted, unafraid or concerned about the consequences.

K was initially worked with by a female Breaking the Cycle team worker, he was not easy to engage but over a period of 4 months this worker was able to intensively get alongside K and start to lay down foundational work that took K to a position where he was able to participate in activity with other young people, identify the drivers for his violent outbursts, reduce the need to carry a weapon, and had started to realise who were his true friends and who were using him for their own ends. Throughout this engagement K remained on a child protection plan.

Initially the activity that K took part in was 1-1 cycle sessions in the park, this progressed with sessions about county lines and gangs, and critical challenge about K behaviours and how these aligned to a model of county lines, trafficking and selling drugs for others. K was part of a gang that operated in the City Centre, and throughout this time K remained a heavy cannabis user, he continued to see himself as invincible and that no one could touch him as he sat in a position of being also able to manipulate others to sell drugs. But we were making inroads, and had developed a strong relationship.

Gradually over time the youth worker was able to help K see that whilst he was certainly a perpetrator of violent crime, he was also a victim and was exploited by others, who used his addiction and threats of violence and use of weapons to control him.

The VRU allowed us through its funding to bring a drugs specialist worker into the team, this embedding of a drugs specialist has reaped so many rewards for young people on the caseload. For K this meant that in the very small window of opportunity when K began to realise and accept that he needed more support to deal with his own drug misuse and to break away from others who had drug dependency he would need a bit more specialist support.

Our Breaking the Cycle drugs worker was able to buddy up with the youth worker and start to parallel the work alongside the intensive support to chip away at changing his drug habits and to help him see the longer term impacts of his existing lifestyle.

This was not an easy piece of work, there were occasions when we had managed to secure a college place for him and in the first few weeks we helped with transporting him to and from the college, giving valuable time to work and chat to him and prepare him for the college day. There were times when he had already taken drugs, and times when he had been in possession of drugs, and when challenged had become angry and aggressive. But over time what we saw was that whilst the incidents still occurred they were much reduced and he would apologise afterwards.

On one occasion he laid hands on the drugs worker slapping his chest in frustration, but still we continued the work with him, and what we have seen emerge is a really lovely young man, who does have aspiration, who has changed his lifestyle and his friendship group. K is talented and capable working with his hands, he can build things and we are using this interest to continue this journey. K is now fully engaged in drugs treatment services with our workers, and a few short weeks ago decided he was ready for giving up drugs altogether. He has with support maintained this position for some time now.

This milestone is helpful in terms of this being one of the drivers for his violence and his disassociation with his old peer groups means he no longer feels the need to carry a weapon. He has a safety plan that he has created and has been given a range of self help skills that help him maintain a good and healthy wellbeing that he can use when he feels he is not coping.

We continue to work, albeit less intensely with the young man now to ensure we do not see any slippage or return to his old lifestyle. We keep in touch and have regular catch ups to ensure that should at any point he feels his head is turned back to his old lifestyle he can quickly intensify the contact again as we know the journey is long and hard if we are to really **BREAK THE CYCLE**.

#### Trusted Relationship Case Study



Case Study  
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