

## NEW WRITING

### *How can we create and grow 'holistic practitioners'?*

*Shirley Young*



Shirley Young is married and the parent of two adult sons. One son has cerebral palsy and since graduating with a degree in Politics and Social Policy runs the Young Persons' Information and Advocacy Service at SNIP, a parent-led voluntary agency

based in the Royal Hospital for Sick Children in Edinburgh. The other has arthritis and a rare specific learning disability syndrome. He is currently studying Law, planning to specialize in Human Rights. Shirley began working in the field of childhood disability 18 years ago, co-ordinating eleven specialist play schemes. She was the Director of SNIP until two years ago when she left to become a freelance trainer and consultant. Shirley also chairs the Family Fund. She retired as a Guide Leader after 30 years' service and has replaced this with taking up running, ice-skating and playing the cornet!

Shirley wrote the lead article, *When parents are in denial*, for IQJ Issue Number 1 in April last year.

#### **Summary**

In this article Shirley Young affirms the need for integrated support for children and young people with disabilities and their families, and welcomes such initiatives as Early Support, Team Around the Child, Care Co-ordination and Keyworking. But she is disappointed in their

slow implementation. She develops the argument that a large part of the problem is the lack of 'holistic practitioners' and that we should not be surprised to find there are significant challenges in asking non-holistic practitioners to behave as though they were holistic. Shirley shows us what a holistic practitioner looks like and then outlines the need for training to produce them and effective organisational systems to support them in their work.

#### **Introduction**

I have been involved in the support of disabled children/young people and their families for the past 18 years. As the parent of two disabled young men, now in their twenties, I have also been on the other side of the fence. What is really frustrating me – and I am sure many of you – is that, although there is now a great deal of evidence to show that approaches like Early Support, Team Around the Child, Care Co-ordination and Keyworking can be really effective in better supporting families, they are not being implemented as quickly or as fully as I would have hoped.

One of the reasons for this, I believe, is that we are asking people who are not 'holistic practitioners' to practise in a holistic way! When we do have 'holistic practitioners' they are not necessarily managed by 'holistic managers' within holistic systems, and so they too struggle

to provide holistic services. In this piece I therefore ask you to consider the following:

1. What are the features of holistic practitioners?
2. What are the benefits to disabled children/young people and their families in having 'holistic practitioners' working with them?
3. How can recruitment, pre- and post-qualification training, and supervision ensure we create and grow people to be holistic in every aspect of their practice?
4. How might organisation, systems and processes need to change to support this approach?

### 1. The features of holistic practitioners

**In my view, the features will include the following:**

- The practitioner sees the 'bigger picture' or context within which families live, understanding that there are many internal and external influences that impact on how parents care for their disabled child.
- High levels of self-awareness are essential. The practitioner knows what their own coping mechanisms are and understands how to ensure that their behaviour towards families is appropriate and consistent.
- She understands that she is accountable and therefore has a duty to seek out and demand the support needed to do the job well – particularly clinical or practice supervision. Recognising that working with families has an emotional impact she understands that she has to take care of herself and establish and maintain her boundaries.
- She recognises that working in teams enables everyone to use their particular skills more effectively to better support families. This means respecting *everyone's* contribution to the support being given, regardless of people's traditional hierarchical status, job title, grade or salary scale. No-one is treated or described as 'just a...'.
  - Whilst confident about their own specialism she is not 'precious' about some tasks or roles being delegated or shared with someone else.
  - She is always open to looking at better ways of working with families – truly listening to what children, young people and their families say they need and acting on it.
  - She is genuinely interested in people and recognises her own prejudices, stereotypes and judgements, and works through them so that she does not carry them into her work with families.
  - She understands that it is a privilege to work with families and does not need gratitude and praise from them to support her self-worth. Affirmation comes from a job well done, and from family, friends, colleagues and management.
  - She is a lifelong learner, keeping up to date with new developments. It is recognised that the role requires leadership skills and a generous and nurturing approach to other less experienced colleagues.
  - She can 'feel the fear and do it anyway!' Working closely with families puts people in the position of having to face all sorts of potentially difficult and challenging situations. Holistic practitioners acknowledge their fear, work through it and develop strategies to enable them to face whatever comes up.
  - Finally, holistic practitioners working day to day with families are very aware of the inequalities disabled children and their families face. They understand that, if long-term improvements are to be made,

then they need to ensure that their own interests are not a barrier to them acting as advocates for those families. Where there is no way round a conflict of interest they ensure that another agency can advocate and work with parents to put pressure on government to change legislation and policy.

## **2. What are the benefits to families when they have holistic practitioners working with them?**

In my experience the benefits to families will include the following:

- Families feel supported by a team, rather than feeling that there is competition going on between people jostling to be 'the most important person' to the family.
- Parents are more likely to carry out tasks that they have been asked to carry out because they know that everyone has discussed the necessity for the intervention and considered the impact carrying it out will have on the whole family. Parents have been given clear instructions about the required frequency, etc, rather than having a number of different interventions all being put forward as the most important thing that must be done.
- Parents do not feel they have to support the practitioners. (Some families state that practitioners arrive at their homes offloading all their issues about their service, poor management, heavy case-load etc onto them.) Instead, the holistic practitioner has the confidence to challenge those things in management supervision and discuss their feelings about the issues and the impact they are having on them in clinical supervision. She can then focus just on the family when she meets them. The holistic practitioner also tells families about the support and supervision they receive, so that parents can feel free to do the offloading they need to do.

- Parents trust that the practitioner is not just paying lip service when she says she too feels that things are unfair and need to change. They know she will take the issues to her management or put the parents in touch with an agency to support them in lobbying and campaigning for change.

## **3. How can recruitment, training and supervision ensure we create and grow people to be holistic?**

Recruitment information for those entering the professions and jobs working with disabled children and their families would focus on the benefits of working as part of a team to support people. Co-operation and compromise would be seen as key attributes for all those seeking to work with families and candidates would be required to evidence these qualities, as well as openness and flexibility.

Parts of Higher and Further Education courses would be merged so that, for instance, initial teacher, medical, nursing, therapy, social work, etc courses would all have a joint second or third year on '*Working with children and their families*' with part of that devoted to disabled children. In this way everyone would learn together right from the start that they are part of something bigger than their own specialism.

This shared part of the course would cover such contextual issues as understanding the psychology of parenting a disabled child, disability equality, the emotional impact on families, working with fathers, breaking bad news, dealing with sensitive issues, supporting people through grief and loss. In addition there would be topics on how to use practice supervision effectively, how to recognise the symptoms of stress and so on. These are things that everyone working with disabled children and their families should understand and have skills in and this in turn would build people's confidence to do this emotionally demanding work.

All post-qualification training would be multi-disciplinary and multi-agency and would have parents/disabled young people on the courses and delivering them. Other agencies such as police, housing, leisure, play organisations, youth organisations, etc would be welcome to

attend. There could be huge savings in money and resources and reduction in duplication of effort with this approach. The benefits in people really getting to know each other in the community and learning from each other would be immense.

The general public could also be invited to training to broaden out knowledge of the issues beyond those directly affected and the people who work with them. Families would really benefit from neighbours, friends, employers and co-workers having the opportunity to learn how to be more supportive of them.

Holistic organisations would ensure that clinical or practice supervision would be provided for everyone working with disabled children and their families so that there would be a consistency of support being provided. With a truly holistic approach this would, in a hospital setting for instance, apply equally to Ward Clerkesses, porters, etc and those in the professions. There would be shared debriefing and reflective practice opportunities for *all* staff when a child that they had known had died.

#### **4. How might organisations need to change to support this approach?**

If the concept of holistic practitioners were to be adopted in practice then organisations would firstly review their values, ethos and mission statements to see if the approach sits comfortably within them. If this is not the case then an exercise in amending these, involving all stakeholders as described in Marianne Talbot's excellent book *Making your Mission Statement Work*<sup>1</sup> would be carried out.

Whether or not an amendment were necessary it would still be an important exercise to ask people within the organisation to consider how well the current strategic level frameworks within which they work support the development of holistic practitioners.

Organisations would then review their systems and processes to ensure that at every level people are encouraged to take a holistic view of their work with families and to remove bureaucratic barriers.

Working in partnership would be a part of appraisal and performance review for staff so that they are positively encouraged to evidence how they have developed relationships with

others working with the same children and families to *collectively* achieve the best outcomes. Rather than individuals being singled out for awards, those who show the greatest commitment to team development would receive *team* accolades.

Managers, obviously, also have a big role to play in ensuring that they are always considering the external as well as internal context within which practitioners and families are living. As this article is being written the full implications of the collapse of the world economy are not yet clear. Will it mean parents of disabled children in the UK face more difficulties in accessing the support they need? Will their neighbours resent 'tax payers' money being spent in this way? Or, more optimistically, will there be a pulling together of communities all struggling with a common problem leading to opportunities for families to feel less isolated? Will practitioners need more support to work in emotionally demanding roles when their own personal financial situation may be causing them additional stress?

Monitoring of these external contexts would inform the priorities of holistic organisations. We know that families under financial stress will struggle even more to implement interventions or make the necessary adjustments and adaptations required to enable them to come to terms with the reality of their child's impairment. Holistic managers would adjust and adapt the range of support they provide to practitioners to take account of these issues.

#### **In conclusion**

For Early Support, Team Around the Child, Care Co-ordination and Keyworking models to really be embedded, I believe that practitioners need to be supported to develop themselves holistically. This would enable them to feel confident about working within a team of similarly holistically trained people who would work together co-operatively to meet all of the needs of disabled children/young people and their families.

#### **References**

1. Marianne Talbot *Making your Mission Statement Work*, 2003, How to Books, Oxford.