

How to Help Families in Trouble

BRIEFING SHEET

THE ART OF MAKING GOOD REFERRALS

This briefing sheet is part of a series designed to work alongside the book *How to Help Families in Trouble* – a short guide (by Honor Rhodes, published by the Family and Parenting Institute). The book is available from the Institute website: www.familyandparenting.org/publications

When we ask workers in any setting about the frustrations of their job, “referrals, getting somebody else to take this family’s needs seriously and get working with them” seems to be in everybody’s top five problem areas.

This briefing sheet is designed to give you an overview about how the problems start and how you can overcome them, with some clever planning and a bit of ‘systems’ understanding.

Involve the family from the start and avoid ‘hot potato’ or ‘pass the parcel’ practice

A successful referral can only be so if the family being referred are engaged in the process and are enabled, by you, to want the referral onwards to happen because you have been able to explain to their satisfaction (even if they are not very pleased about it) why you think that they need more help than you can give or a different sort of help. This includes an honest discussion even when you are referring them without their explicit agreement because you have decided that their family life raises child welfare/protection/safeguarding concerns.

What families don’t want is to feel ‘shunted’ about, abandoned by you with whom they have a relationship and they can believe from this experience that their problems are so overwhelming that no one can help.

You are most likely to gain their agreement and cooperation if you can explain why you can’t do more, why another agency can offer them help for the issues they are struggling with and the process you and they are going to undertake to find them the help they need.

This will involve you in some good preliminary research before you start such a conversation with the family: who is the most appropriate agency? What are their referral criteria? What do they really 'do'? Will you be able to remain involved to some degree to support the family if it is appropriate?

Timing is crucial. You will find it very hard to get help for a family when they are in crisis, or they have become a 'hot potato', too hot for you to handle. This is the time when most other agencies are likely to resist you; they don't want your 'hot potato' family either. Even though you may be very worried it helps to take the heat out of the situation if you talk through the issues with a colleague and are able to distil them into coherent issues that someone else can see as their agency's role. (See 'Working With Families Who Trouble Us' guide for a view of agency roles).

Interestingly other agencies seem to be readier to take families on if the referrer states that they will also remain involved, perhaps this feels fairer in sharing the 'heat' and avoids the feeling that they are going to 'cop the lot'. Think about your continuing involvement and deliver it if you have agreed to it as this makes you a reliable referrer and more likely to be successful in future referrals.

The family's needs – define them clearly and describe them well

One of the issues when making a referral to another agency is that we, as workers, are not able to describe the family's problems clearly enough for the other agency's workers to understand their level and complexity. One of the unwitting consequences of this is that we ratchet the problems up a bit in an attempt to secure their interest and activity.

This is most likely to occur when we are trying to refer a family for help to our colleagues in Children's Services for social work interventions; because we sense that child protection is an area that they have to take seriously we often find ourselves 'framing' a referral in that sort of way. Because Intake/Assessment workers do a great deal of this sort of work they will quickly spot that your family's needs do not meet their threshold criteria and refuse you 'access' to their resources unless the family's problems are genuinely ones that warrant their involvement.

Whether you are making a written or telephone referral, have available all the details you need to be successful: a brief explanation of the problem; some family information (who is in the family, dates of birth, schools); other agencies involved; your involvement; and be able to answer the three 'magic' questions, 'Why refer now? What is the referral for – what do you and the family think needs to be done? Why worry – what are the risks of non-intervention?

The role of agency gatekeepers – why aren't you getting through?

Staff who stand 'at the door' of other agencies have a job to do that can frustrate you (but remember that someone in your own agency is probably doing it too!), their role is to keep the 'flood' of referrals to a manageable minimum by refusing, diverting and referring on themselves. The gatekeeper has an important role which we need to understand if we are going to be successful.

One helpful way of understanding this is to see for ourselves. Why not ask to sit in on a Duty Desk or service for a morning so that you can hear and see what goes on, what work is getting through the gatekeepers and what they can actually do with families within their agency role? Offer a reciprocal swap so that colleagues from other agencies can see what you do.

Even when an agency says 'no', secure their help

One very good Duty Social Worker enabled potential referrers to feel helped by her even when she was refusing help by listening intently to what the referrer was saying and both explaining why her service could not offer help and suggesting other, more appropriate sources of support for families. Her diagnosis of problems and help sources was usually spot on; she made it her business to know a good deal about other agencies, how they worked and how to make referrals to them.

If your referral is not accepted then make it your business to clarify why the help was not forthcoming, this will help you in future when you want to refer another family as you will be clearer about how the referral criteria are applied. Then ask for help in where else to refer the family for the help you think they need,

Not satisfied by the response? You can escalate, but take care

If you continue to believe that the referral you are making does meet the criteria of the agency you are seeking to refer them to, then you can express your concern and clarify the reasons why. This allows the other party to think again and see if they have been too stringent or explain to you why you have misunderstood.

It is very important to do this without becoming heated and keep your cool even if the other person is getting cross. Once we are on the verge of losing our tempers we also lose the ability to think flexibly and find compromises, which may be the best you can do in some circumstances.

If you remain unconvinced about the reasons for rejection of your referral talk this through with your manager. It may be that she or he will want to take this up at a higher level and this maybe the most appropriate outcome in the circumstances. This may resolve a policy conflict between your agencies that you don't know about or, if you do, it will locate it at the place where it can be hammered out. It does not help the process go smoothly if you appear to threaten this when you aren't getting anywhere, as the other worker will alert their manager and you might find yourself being identified as a 'stropmy customer', which will increase your difficulties with that agency in future. Remain cool and re-introduce the family back into the conversation with something like, "I am still so very concerned about the XXX family that I need to go away and have a think about what I need to do next. Do you have any ideas?" Again, you are asking for help and being honest, and, again it gives the other person time to reflect and to see if there is more they can do.

Some families we just can't help

It is simply a sad fact that some families live in circumstances that we would all consider far from ideal but no statutory agency (the Council's departments or health services provided by the local PCT) has the power or authority to help them.

You may well be seeking a place to refer them to because really you have no role; you can see that they are sad or angry and not working well as a family but the Welfare State's resources are not going to be made available to them in their present circumstances. One of two things can happen.

Either you can find a good voluntary sector agency who can work with them (and it is important that you find out about your local ones) or things inside the family will get worse and a crisis will erupt – in which case the agencies you may have tried before when they were unhappy but just about managing will have to get involved now that they are not.

It can make us angry and upset knowing that, with an earlier intervention, the family could have been helped in a timely and perhaps more effective way. We have to accept that 'rationing' of services does produce some very odd, and, in our minds, unkind results. What we can do is to be alert to things going wrong and try again to secure the help the family needs.

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