The proposal was to give greater participation and control to service users and their families regarding decision making and improve the quality of professional judgements through the use of the Family Group Conferencing (FGC) Model in Adult Safeguarding services.

Why project was undertaken

The focus of the pilot was to give greater participation and control to service users and their families regarding decision making and improve the quality of professional judgements through the use of the Family Group Conferencing in adult safeguarding services. As Family Group Conference is a family led, solution focused, decision making process, it seemed timely to pilot this at a time when we move towards realising the potential of the personalisation agenda.

What we have done

- Developed alongside current FGC service—shared learning ensures greater consistency, accountability and quality. Can also share expertise, learning and resources
- Staff were enthusiastic
- Leadership yields better results
- Independent service and co-ordinator
- Information sharing with families to inform decision making
- Broadening family involvement
- Providing a bridge between the informal and formal systems

Being flexible to respond to the needs of individual families—warrants further work to establish a variety of responses along a continuum of family led decision making processes. Using advocacy to ensure the voice of the vulnerable adult was central to the decision making process.

FGC in adult services is being considered more broadly by a number of organisations thus links across the region were and continue to be vital and reinforced the value of ‘joined up thinking’ and collaborative working enabling and empowering individuals and families to find solutions.

Outcomes & Impact

A number of families engaged in the FGC process and showed the potential for better outcomes when they were given information and opportunity to make plans to support and protect those they care for.

Opportunities & Challenges

- Introducing FGC as a different way of working at a time when resources were stretched and staff time was limited
- Underestimating the support needed for staff to adapt to change
- Changing hearts and minds in order to promote referrals
- A number of referrals tended to involve fraught and/or fractured family relationships
- Referrals tended to be more complex - trying FGC as other methods haven’t worked
- Widening the circle – enabling family to come together