

## **Report for FPSA**

The funding I received from the Foundation for Professionals in Services for Adolescents (FPSA) supported an exciting innovation in the systemic (family therapy) field. This involved the development and delivery of systemic training for Police officers, lawyers and other professionals to help them engage children who come into Police custody in a way that coheres with a “child first” approach.

FPSA’s grant funding allowed me to access external clinical consultancy from Alan Jenkins, who is well-known in the field of systemic practice and has supported the development of projects in Australia and the UK, particularly in the areas of offending and violence. The provision of clinical consultancy enabled me to refine my training offer, clarify its theoretical underpinnings, and explore ways of translating systemic practice in a new professional context.

The journey from concept to delivery was long, winding and at times unpredictable. I was once advised that anyone hoping to introduce innovation needs to be prepared to “fail fast” – a concept originally developed in business management, which highlights the importance of experimentation, testing, and iteration, so that ideas fail early (and therefore “fast”) to improve learning and development over the long haul. This project proved to me the enduring relevance of this idea, and the value of perseverance and tenacity in the face of obstacles.

In this brief report, I wish to describe some of the contours of this journey and showcase how FPSA’s funding enabled me to move from the germ of an idea to its development and eventual implementation.

From this project’s initial conception, my aim had been to upskill the existing professional economy to ensure appropriate action is taken at “critical moments” for children and families. As a Social Worker and Systemic Psychotherapist specialising in work with children at risk of care/custody and extra-familial harm, I have seen first-hand how professionals, institutions and systems do not always harness key opportunities to intervene, and often create and maintain systemic barriers to engagement through the racialised adultification of children. Whilst these vulnerable children and families were invariably described as “hard to reach”, I ultimately came to regard professionals and the systems in which they operate as the ones hard to reach.

These practice experiences came into confluence with the findings of the Child Safeguarding Practice Review Panel’s report, *It was hard to escape*, published in 2020, which identified “critical moments”, such as Police custody, as opportunities for diversion, though largely overlooked and underutilised. Wishing to explore this in further depth, I reached out to Police officers on the frontline and in senior management as well as Heads of Service in Youth Justice, social workers, and specialist practitioners in the criminal exploitation and youth justice fields. What emerged was an interest in improving (what I would call) the *conversational practices* of professionals – this refers to what professionals say and do in the micro-context of conversations that has the capacity to open up or indeed shut down opportunities to build trusting relationships with children and families. This led me to wonder: If we view systems and professionals as themselves “hard to reach” for families (as well as hard to trust and understand), what do we need to do differently to establish safe passage for children caught up in crime? And how in particular might we redirect a child’s contact with the Police into opportunities for diversion?

With these questions in mind, I used clinical consultations with Alan Jenkins to explore how key ideas and techniques in systemic practice could be adapted to help Police officers build rapport and credibility with children, increase opportunities for diversion, and do so within an anti-discriminatory framework. From the outset, several sites had been willing to host the pilot and offer the training to other practitioners, but as time went on, for various reasons outside my control, they were no longer able to accommodate the training. Then I became aware of another pilot project to deliver legal training to Police custody sergeants and lawyers. Through further discussion, a training collaboration was established in which we sought not only to increase professionals' knowledge and confidence to give appropriate advice in custody and make better decisions in that context, but also to improve professionals' communication and engagement with children. The target audience was now broader than I had originally conceived, consisting of custody sergeants, PACE inspectors, solicitors carrying out duty work in custody suites, as well as other professionals who are likely to become involved when a child enters Police custody, such as Project Engage Youth Workers, Liaison and Diversion Workers, Appropriate Adults, Youth Justice Workers and Local Authority Emergency Duty Workers.

What followed was several months of discussion and planning at fortnightly Advisory Groups and a visit to Brixton custody suite to see the challenges faced by children, officers and lawyers working in that setting. The training for the Child First Custody Training and Research Pilot (ChiRP), as it came to be known, took place over three separate days between September and November 2024. My contributions to ChiRP were co-developed and co-delivered with a colleague, Jennifer Summer, with whom I had collaborated on other trainings (mainly in social work contexts). We were part of a consortium of trainers from various organisations, including Youth Justice Legal Centre, Youth Practitioners Association, London Criminal Court Solicitors Association and Child Rights Youth Justice CIC. The pilot runs from 13 November 2024 to 12 March 2025 in two custody suites in London (Wood Green and Brixton) and is subject to an independent evaluation. The aim of the evaluation is to establish whether the provision of training changes the behaviours of custody staff and lawyers at the police station, and whether these changes achieve a reduction in the length of detention of children and an increase in the number of children diverted away from formal court processes.

In closing, I would like to express my thanks once again to FPSA for supporting the provision of clinical consultancy, which was instrumental in shaping and enhancing my training contributions in ChiRP. I particularly appreciate FPSA's commitment to innovation and promoting (through this project and others) creative and flexible ways of improving outcomes for adolescents.

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