



**GMT**  
MINDSET MATTERS

**Comprehensive Service  
Offerings in Health, Social  
Care & Education**

*Specialists in Neurodiversity and Complex Mental Health*

# Comprehensive Service Offerings in Health, Social Care & Education

Specialists in Neurodiversity and Complex Mental Health

## Packages overview

### LA's, ICB's, Hospitals, Mental Health Units, Childrens Homes

#### Specialist staff

Mental Health Practitioners, Mental Health Nurses, Mental Health Social Workers, Assistant Psychologists, Clinical Psychologists, Psychotherapists

Pg.7

#### Therapy & Assessment

Neurocognitive profile assessments, DBT, Talking therapy, Play therapy, Art & Lego therapy, Psychotherapy, EMDR, Hypnotherapy, Group therapy

Pg.8-12

#### Therapeutic Training

Neurodiversity, Autism, ADHD, Complex Mental Health, Inclusive Practice, PMVA, Children's Home therapeutic packages

Pg.13-14

#### NIMHA Neuroinclusive Mental Health Advocates

Specialist Advocates in Neurodiversity & Mental Health. Specialist mentoring

Pg.18

### Schools, LA's and ICB's

#### 5th Avenue

Outreach support for Neurodivergent families and those with Mental Health needs. Food bank/Uniform Bank, Learning Hub, EOTAS, Mentoring, webinars, Parent/Carer training and 1:1 support

Pg.2

#### Intensive Support Team

Specialist team to support families and professionals to prevent breakdown of the family home, residential placements and prevent wrongful hospitalisation and criminalisation

Pg.2-4

#### LA's

#### Supported Living & Transition Team

Specialist staffing team for Neurodivergent individuals with complex Mental Health needs

Pg.17

#### Respite & Shortbreaks

Specialist staffing team for Neurodivergent families and those with Mental Health needs

Pg.17

### LA's and ICB's

#### Thriving Futures

Tier 3.5 Therapeutic programme specifically for neurodivergent people on Deprivation of Liberty orders in the community, inclusive of wraparound support for their families and professional network

Pg.5-7

#### Statutory Reform

Specialist programme consulting and delivering on re-shaping pathways in line with an all age, needs led approach across Education, Health & Social Care

Pg.15-16

#### Mental Health Crisis Homes for adults

Specialist homes for those on Deprivation of Liberty orders and/or care leavers transitioning into adulthood.

Pg.19

#### Education settings

#### In-house support

Neurodiversity specialist staffing team supporting children struggling to engage in education. SEND Improvement programme

Pg.18



## 5th Avenue

The 5th Avenue Project is an open-access service dedicated to supporting neurodivergent families with mental health needs. With no waiting lists, it provides immediate assistance through a multidisciplinary team of experts who offer direct support and effective signposting to additional resources / local support.

It provides an additional pathway, helping families to navigate the complex support systems available to them.

### Service inclusive of:

- Outreach support
- Mentoring
- Meeting attendances
- Support to engage in education
- Support with housing & benefit applications
- Therapy
- Peer support,
- Online sessions
- EHCP applications
- Employment and further education and training



## Intensive Support Team

The Intensive Support Team (IST) has been developed to support families and residential placements where their child / or young adult, is out of parental control and may be presenting with trauma-based behaviours as a result of unmet/unidentified need or trauma and attachment needs.

This programme is a merging of our Tier 3.5, Psychology and Outreach teams, with a blended clinical and social model of delivery – in order to adopt a true Biopsychosocial approach.

### The aims of the programme are as follows:

- Prevention of children being accommodated by the Local Authority
- *Intensive support for families where their child is on the 'edge of care' as a result of being 'beyond parental control' due to high risk and vulnerable behaviours in the community (CCE / CSE)*
- Prevention of wrongful hospitalisation / admissions under social admission or Section 136 specifically prevention of criminalisation / unnecessary police intervention
- Placement stabilisation

## Intensive Support Team cont'd

- Allocated Specialist Crisis Response team – blended from our Tier 3.5, Outreach and Psychology teams
- Allocated mentor for the young person
- Allocated mentor for parent/carer (and any siblings if required)
- Psychotherapist to deliver dynamic person-centred therapy in a bespoke and flexible way that the young person will engage with (not sessional)
- Attendance at all MDT meetings
- Development of risk management and trigger plans
- Liaise with emergency services
- Prevent police intervention
- Prevent wrongful hospitalisation
- Prevent the young person from being accommodated by the Local Authority
- Crisis response when the young person goes missing from home (including attendance, search, liaising with services and transporting home.) Intensive intervention support for both the young person and parents/carers during and post incident
- Development and progress reports
- Psychological formulation and Neurocognitive profile
- Assessments to establish and understand depression scales and improvements (BI)
- Full wraparound support for the family and professional networks around the young person
- 24 hour on-call crisis support – dedicated allocated on-call professional

The delivery of the Intensive Support Programme is bespoke to the needs of the individual. No one intervention is ever the same, as we operate on a dynamic risk management basis.

**However, there is a baseline framework we work to:**

### Phase One (Pre-involvement)

Developmental history / meet the family and young person / meet the professionals already involved / attend a professionals meeting to gather information.

### Phase Two (Weeks One and Two)

Relationship building / Assessment phase.

## Intensive Support Team cont'd

### Phase Three (Weeks Three and Four)

Escalation of behaviours are likely present in these weeks, after the young person has spent the initial phase navigating boundaries and understanding relationships with the new professionals. Monitor and assess, provide therapeutic direction and support.

### Phase Four (Week Five onwards)

Phase four is usually where we see a baseline and have formulated our assessments and recommendations for the intervention moving forwards. During this week a report will be produced whereby it will advise the required focus of intervention and likely timescale for the intervention.

#### Programme options:

**Green programme** - Intensive outreach support, mentoring, life skills, psychoeducation and therapy exclusive of out of hours support

**Amber programme** - As above, inclusive of out of hours on-call support (virtually)

**Red programme** - As above (Green & Amber), inclusive of specialist 24 hour Mental Health crisis response team

Breakdown:

Specialist mental health crisis intervention team (24 hours on-call support)

- Neurodiversity & Trauma informed Care Specialists
- Learning Disability, Trauma Informed Care Practitioners (LD TIC)
- Mental Health Practitioners
- Mental Health & LD Social Workers
- Trauma Specialist Social Workers
- Psychologists
- Psychotherapist
- Registered Mental Health Nurses

## Thriving Futures

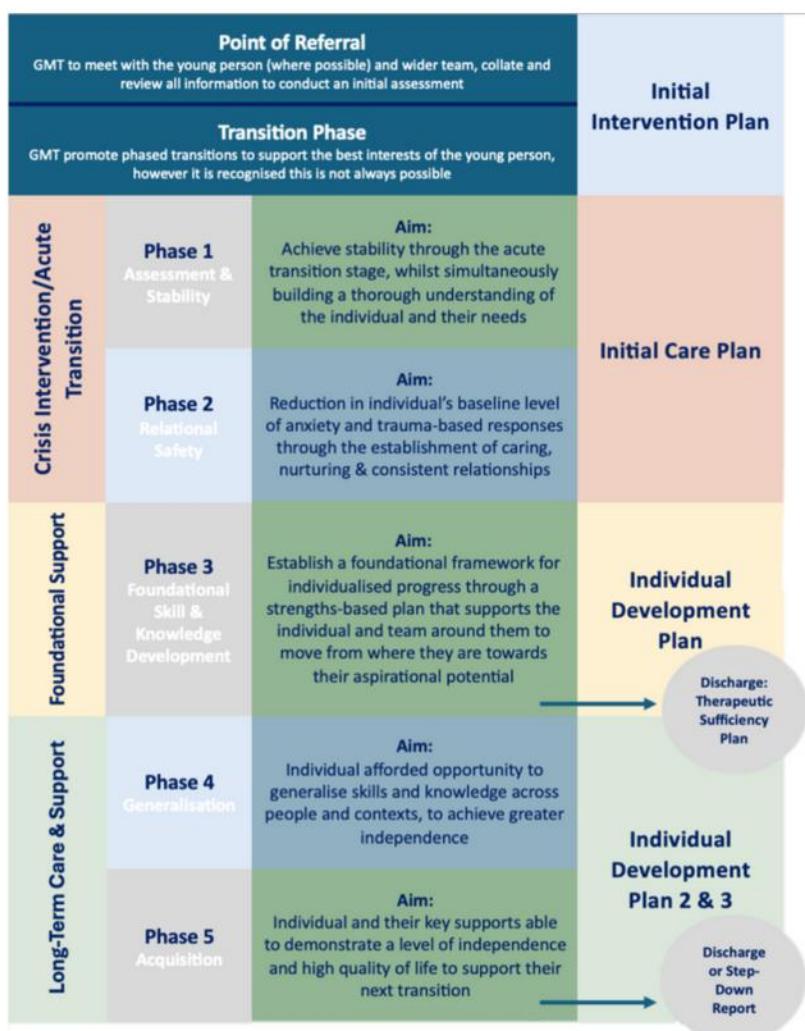
The Thriving Futures (Tier 3.5) Programme is a specialist therapeutic intervention. It aims to prevent wrongful hospitalisation, unnecessary police intervention, and wrongful criminalisation (or Tier 4 step-down). The programme also supports children whose placements are breaking down, helping them transition into registered placements or return home to their families with intensive support.

The evidence based model has 5 phases and is specifically developed for neurodivergent young people with complex mental health / trauma and attachment needs.

The model we have developed is underpinned by psychological theory in order to understand young people with trauma and/or neurodiversity that may be unmet and/or unidentified.

The aim is to understand their needs effectively and then upskill their families and the professionals networks around them to be able to effectively meet their needs.

The outcomes of our Thriving Futures programme have been extremely positive, resulting in support from NHS England. (Case Studies and references available at request).



### Programme inclusive of:

Specialist Mental Health staff with knowledge and experience of neurodiversity, trauma and attachment, trained in PMVA/Positive Handling.

Administration of staffing, safer recruitment processes and HR inclusive.

Thriving Futures (GMT) clinical supervision, consultancy, and training of staff team, up-skilling of professionals and family members around the YP, specifically on any identified need / trauma based behaviours.

Thriving Futures wraparound support for the individuals family and professional network is included where required, as well as service co-ordination, and mentor allocation.

Support with ensuring the relevant policies and procedures required specific to the setting are in place.

### Also included within the co-ordination fees:

- 24 hour on-call support for the team from our specialist multidisciplinary team.
- Life story work (where / if required)
- Neurocognitive assessment screening and Neurocognitive profile
- Collation of full developmental history from parent/carer/professionals
- Detailed ongoing recording of all behaviours to ensure a bespoke intervention and individualised approach
- Daily handover summaries
- Detailed incident reports
- Psychological oversight and direct support for the family, staff team and wider MDT
- Individual Development Plan formulated after initial assessment period, updated monthly with therapeutic targets
- Ongoing clinical supervision for the staff team
- Weekly reflective and clinical supervision for the staff team (out of shift hours and so the staff are paid for this additional and more intensive supervision)
- Portion of costs towards activities for the young person including some transport costs
- Direct 1:1 sessions with the young people from our Mental Health Practitioners and Social Workers
- Direct 1:1 sessions with our Psychologist or Psychotherapist (where appropriate)

## Thriving Futures cont'd

- Attendance at all MDT and care planning meetings
- Direct sessions at our learning hub bespoke to their needs / interests and educational stage
- Up-skilling of all professionals involved to understand the needs of the young person
- Detailed reports as and when requested by local authority / court of protection and/or NHSE stakeholders
- Parent/Family Up-skilling
- Hospital Passport/Visuals/Timetables/Comic Strips/and any other communication resources needed to suit the individual
- Co-ordination of transitions
- Enhanced induction training
- SDQ/Honos



## Specialist Staff

Specialist staff are available to book for Mental Health hospitals, Secure units and Children's Residential homes.

### Our staff are all fully trained in:

Therapeutic support | Trauma informed practice | Attachment | Neurodiversity | Mental Health

Staff team: Mental Health Nurses and Practitioners | Mental Health Social Workers | Psychotherapists | Counsellors | Assistant Psychologists | Therapists (Art, Lego, Play, Talking) | Teachers | Teaching Assistants

## **Therapy and Assessment**

GMT is a specialist Neurodiversity (inclusive of Learning Disabilities), and Mental Health Therapeutic Intervention provider

We will work in a truly collaborative, multiagency way to ensure the best outcomes

The intervention will be delivered in a trauma informed way, in line with the individual's needs

GMT's Psychology department offer a breadth of services spanning Neurocognitive assessments and multiple forms of therapy and therapeutic support tailored to the individual's needs

Work can be delivered by our Clinical Psychologist; Consultant Psychotherapist; Senior Assistant Psychologists or Assistant Psychologists. All Assistant Psychologist's work is supervised clinically by our in-house Clinical Psychologist

Costings may differ depending on complexity of cases, expected duration of support needed and travel costs

**A comprehensive cognitive assessment (Wechsler Adult Intelligence Scale – WAIS) will be conducted to explore the individual's cognitive functioning and inform future planning and support needs**

The assessment will aim to gain insight into the individual's current cognitive profile, including areas such as attention, memory, executive functioning, processing speed, and problem-solving abilities

A comprehensive report will be provided which will include recommendations and next steps

The assessment is between 1.5 hours to 2 hours

Cost includes the report, travel, co-ordination charges and formulation

Administered by:

Assistant Psychologist or Senior Assistant Psychologist/ Consultant Psychotherapist, MBACP/  
Clinical Psychologist

**Page 8**



## Therapy and Assessment Cont'd

### Standard Capacity Assessment

Under the Mental Capacity Act 2005, capacity is always decision-specific, and assessors must apply the Act's two-stage test:

1. Diagnostic stage
2. Functional stage

A comprehensive CPR35-compliant capacity report will be provided.

### Assessment will incur a one-off cost

Cost includes the meeting of the individual to carry out the assessment, report writing time, travel and co-ordination charges.

Administered by:  
Clinical Psychologist

### Therapy Packages (tailored to individual need)

- Great Minds Together's Psychology department can offer a package of talking therapy, comprised of multiple modalities if required, tailored to meet the individual's need.
- Sessions are typically offered on an 8-weekly basis initially, with the option to extend the commission if required.
- The body of work may incorporate multiple modalities of talking therapy, such as Dialectical Behavioural Therapy (DBT), Cognitive Behavioural Therapy (CBT) and Trauma Focused CBT, Counselling, Behavioural Activation, Interpersonal Therapy (IPT) and Compassion Focused Therapy (CFT).
- Sessions will be provided by either an Assistant Psychologist/Senior Assistant Psychologist, Consultant Psychotherapist or Clinical Psychologist.

## Therapy and Assessment Cont'd

### Sessions are charged per hour for:

- Assistant Psychologist/Senior Assistant Psychologist
- Consultant Psychotherapist
- Clinical Psychologist

**Hourly rate applies to the session time, formulation time and report writing time.  
Travel costing will be determined at point of referral.**

Administered by:

Assistant Psychologist or Senior Assistant Psychologist/  
Consultant Psychotherapist, MBACP/  
Clinical Psychologist.

A report will be written at the end of the therapy.

---

### Dialectical Behaviour Therapy for Adolescents (DBT-A)

Our DBT-A package can be accessed on an individual, 1-1 basis, consisting of:

- DBT assessment (one off)
- Pre-assessment 50-minute sessions
- Individual weekly 50-minute sessions

Some individuals may benefit from 2 sessions per week dependent on need.  
Coverage of all 4 modules spans approximately 24 sessions.

Group sessions can also be facilitated (wait periods may apply here):

- DBT assessment (one off)
- Pre-assessment 50-minute sessions
- Individual weekly 50-minute sessions
- Weekly skills group

Coverage of all 4 modules spans approximately 24 sessions.

## Therapy and Assessment Cont'd

### DBT consists of 4 modules:

- Mindfulness: addresses confusion about self; those times when you don't always know what you are thinking or feeling, or why you get upset.
- Distress Tolerance: skills to help you manage crisis situations; managing impulsivity – acting without thinking it all through.
- Emotion Regulation: helps you gain a better understanding and management of the fast and intense mood changes you experience, that feeling of your emotions 'all over the place'.
- Interpersonal Effectiveness: skills to manage patterns of difficulties in your relationships.

### Sessions Offered:

#### Individual Therapy:

DBT assessment (one off)

Pre-assessment 50-minute sessions (1-3 sessions dependent on need)

Individual weekly 50-minute sessions

#### Group Therapy:

DBT assessment (one off)

Pre-assessment 50-minute sessions (1-3 sessions dependent on need)

Individual weekly 50-minute sessions

Skills group 70–90-minute sessions

### 24-week package

Hourly rate applies to the session time, formulation time and report writing time  
Travel costing will be determined at point of referral

#### Administered by:

Consultant Psychotherapist, MBACP/ Assistant Psychologist or Senior Assistant Psychologist

A report will be provided at the end of the therapy

## Hypnotherapy

Our Hypnotherapy package specialises in working with people wanting to break the cycle of maladaptive coping strategies (e.g., substance misuse and negative eating patterns), as well as individuals struggling with anxiety, overwhelm, stress, negative thinking, phobias and grief.



CPD  
The CPD Certification Service

NHS  
Hampshire and Isle of Wight

Regulated by  
Care Quality Commission

AQA  
Questions matter



## Therapy and Assessment Cont'd

Sessions are low-pressure, allowing a therapeutic relationship to form, and encouraging openness from the individual.

Hypnotherapy can be offered in tandem with counselling. (a blended approach)

Sessions are typically offered on an 8-weekly basis initially, with the option to extend the commission if required.

### Session Information:

Hourly rate applies to the session time, formulation time and report writing time if required.

Travel costing will be determined at point of referral.

Administered by:

Certified Hypnotherapist

*A report can be provided at the end of the therapy if required.*

## Play Therapy

Our Play Therapy package uses play as a medium to allow children to express themselves and their experiences in a way that makes sense to them.

- Sessions are low-pressure, allowing a therapeutic relationship to form, and encouraging children to understand their emotions through play.
- Sessions are most appropriate for children up to the age of 10.
- Sessions are typically offered on an 12-weekly basis initially, with the option to extend the commission if required. This is to allow the young person adequate time to form a trusting relationship with their therapist.

### Session Information:

45-minute rate applies to the session time, formulation time and report writing time if required

Administered by:

Consultant Psychotherapist, MBACP/ Play Therapist

*A report will be provided at the end of the therapy*



CPD  
The CTD Certification Service

NHS  
Hampshire and Isle of Wight



## Therapy and Assessment Cont'd

Travel costing will be determined at point of referral

Administered by:

Consultant Psychotherapist, MBACP/ Play Therapist

A report will be provided at the end of the therapy

### Other packages of support

We offer a variety of bespoke services for children and young people who are presenting with mental health differences as a result of unmet and/or unidentified need as well as for their families and the professional networks around them.

Please contact [commissioning@gmt.team](mailto:commissioning@gmt.team)

Please see [www.greatmindstogether.co.uk](http://www.greatmindstogether.co.uk) for more information.

## Therapeutic Training

We offer a variety of bespoke training programmes for professionals and families, specifically focussed on:

- ARFID
- Attachment
- Autism for women and girls
- Autism Training – Challenging stereotypes and promoting understanding
- Autistic burnout
- Barriers to attendance
- Behaviour as a form of communication (What are they trying to tell us / unpicking the behaviour)
- Communication and how we can help (including visuals / social stories / comic strips, etc.)
- Creating a neuro-affirming classroom / environment
- Declarative Language and how this can help with behaviours that indicate distress
- Demand avoidance and anxiety
- DSR (Dynamic Support Register) Training
- DSL (Designated Safeguarding Lead) Training
- Education Health Care Plans (EHCP)
- Emotional regulation
- Friendships and peer pressure
- How the environment impacts an individual
- How unmet needs can impact an individual

Page 13



## Therapeutic Training Cont'd

- Inclusive practice
- Interoception
- Low Arousal Approach
- Masking and the impact this can have
- Meeting need and Reasonable Adjustments
- Neurodiversity
- Neurodiversity and co-occurrence
- Neurodiversity and positive self-identity
- PACE
- Parental burnout
- Rejection Sensitive Dysphoria
- Sensory needs and food
- Sensory Processing & implementing sensory / movement breaks and the benefits of this
- Situational Mutism
- Therapeutic Approaches
- Trauma informed practice

**We can also provide bespoke content on request so please reach out to us for more information.**

### Programme Options:

- 1 Topic Delivered Virtually via Teams.  
(A session is between 1 hour to 1.5 hours)
- $\frac{1}{2}$  day training includes an overall introduction to Neurodiversity, and you can choose 2 of the content subjects above. Can be delivered in person or virtually.  
( $\frac{1}{2}$  day training is between 3 hours to 3.5 hours.)
- 1-day training includes an overall introduction to Neurodiversity, and you can choose 4 of the content subjects. Can be delivered in person or virtually.  
(1 day training is between 6 hours to 6.5 hours.)

**We advise providing our 'Training Self-Assessment' to your staff to identify gaps in training when selecting your topics.**

## Statutory Reform

The Statutory Reform Programme is both strategic consultancy and practical support to make things better for all individuals including the professionals that work across all sectors.

We are very used to a system with fixed pathways, tick box approaches and rigid regulatory frameworks.

The overall aim of this programme is to encourage new ways of thinking, in order to best meet the needs of our population, as well as to reduce pressures on our emergency services and ensure best use of public spend cross-sector.

Looking at what isn't working well, but rather than issuing a rating and then moving onto the next. Providing a practical solution and hands on support to make things better, whilst modelling this and up-skilling existing workforces. Only moving on once this has been fully established, at which point each ICB / Local Authority will receive a Neurodiversity & Mental Health Quality Mark.

Working in partnership with the ICB, Local Authority, CAMHS, Youth Justice, Parents and Carers,

The key outcomes will include:

- Reduction in wrongful hospital admissions
- Reduction in wrongful criminalisation
- Reduction of children being accommodated by the Local Authority

This programme was initially piloted in schools as a 'School Improvement Programme' and due to the evidenced success, we are now implementing the same theory system wide, currently across a number of ICBs and in Partnership with their Health and Local Authority Stakeholders.

The concept is to review each area individually, meeting with all operational staff as well as strategic leaders, parents, carers and most importantly, the young people at the centre. Assessing what is working well, where the challenges lie and then bringing everyone together to achieve better outcomes by reforming pathways, processes and providing a team of people who have experience and can help them achieve their improvement goals.

## Statutory Reform Cont'd

This programme aims to evidence how radical and creative changes to system operations can have a positive impact on the people it serves. It focuses on improving outcomes while ensuring the most effective use of public resources. By reducing the need for high-cost care packages and alleviating financial pressures on the NHS, the programme builds a strong evidence base for sustainable change.

We are also demonstrably ensuring best use of public spend across health and social care through reduced need for high-cost packages of care, intensive and inpatient NHS care and S117 spend.

This evidence is also being used to develop national recommendations and specifically focussing on neurodiversity and mental health in education and residential settings.

The Consultation Team consists of a Multidisciplinary team of people with a variety of experience across the Public, Private and Third Sectors in-keeping with our vision to unite these sectors in order to support creative reform across the current Education, Health and Social Care systems.

The aim and goal is to achieve systemic change that meets the needs of all individuals on a needs-led basis.

The core purpose of this programme is to reduce the need for wrongful hospital admissions for neurodivergent people, which subsequently result in high cost packages of care.

An innovative evidence-based pathway for system change.

### Programme information:

The programme is bespoke to each locality and dependant on need, budget and population. For an initial **free** consultation please email Emma Mander directly: [emmamander@gmt.team](mailto:emmamander@gmt.team)

## ***Supported Living & Transition Team***

Specialist staffing team for neurodivergent individuals with complex mental health needs.

Bespoke packages of support for care leavers transitioning from children's homes to supported or independent living.

Minimum 6 month contract to begin 3 months prior to the young persons 18<sup>th</sup> birthday.

### **Transition programme covers support with:**

- Life Skills
- Locating the right home for transition
- Employment
- Benefits
- Further education
- Co-ordinating services
- Mentoring
- Moving home
- Support post move to settle in, set up utilities and benefits if required

## ***Respite and Shortbreaks***

Specialist staffing team for neurodivergent individuals with complex mental health needs.

Set rates for support and individual care plans available on request.

Specialist staffing team for neurodivergent individuals with complex mental health needs.

Minimum 6 month contract.

### ***Educational Settings***

#### **In-house support**

Specialist staffing team for neurodivergent individuals with complex mental health (Diagnosis not required).

Set rates for support and individual support plans available on request.

#### **Support Packages:**

- Weekly in-school / college sessions for young people facing barriers to education; Sessions delivered per half term for educational settings or per hour if EOTAS. *(Delivered in school / at home or at one of our learning hubs in Stockport)*
- Group Therapeutic Intervention (Up to 8 children): service provided per term - inclusive of 6 weeks programme for parents and carers

#### **SEND Improvement Programme Options:**

- Full evaluation of SEND support and improvement requirements, along with a specialist operational team to implement and embed new inclusive practices school wide.
- Initial consultation and recommendation report.
- Operational team to support with implementation of improvement plan for 3 terms.
- Specialist teaching assistants: *set rate per hour*
- Neurodiversity specialist higher level TA: *set rate per hour*

## **Mental Health Crisis Homes for Adults**

Specialist homes for those on Deprivation of Liberty orders and transition homes for care leavers.

We have two homes that have been developed specifically for neurodivergent individuals experiencing complex mental health. Newly refurbished and completely anti-ligature, the homes can be a safe but homely space for those needing a single placement for intensive treatment and support. Includes full transition package to integrate into independent living.

**Oldham**



**Ashton**



### **Inclusions:**

Single placement inclusive of Therapeutic support packages, activities, overheads and Psychological formulation and transition programme to supported or independent living:

- Set rate per hour, per staff member
- Weekly co-ordination fee

# A Suggested Framework for Social Care:

*Supporting children who present as a risk to their caregivers*

## **Core principles:**

Supporting social care departments to implement a parallel framework for young people who are not at risk from their caregivers, but where there are risk concerns due to trauma based behaviours or unmet/unidentified need

### **Child-Centered**

Prioritise the child's safety, well-being, and developmental needs. Starting point should always be the Child's developmental history in order to identify any disruptions to the developmental pathway.

### **Safeguarding First**

Ensure safety for both the child and the parent, minimising risk to either.

### **Family-Focused**

Support the entire family, fostering resilience and strength.

### **Holistic Assessment**

Consider biological, psychological, social, and environmental factors.

### **Collaborative Approach**

Work alongside families, relevant professionals, and the community.

### **Strength-Based**

Identify and build upon existing strengths with the child and family.

## Multi-Agency Collaboration

Ensure ongoing communication and coordination across health, education, social care, and community services.

Establish clear roles, responsibilities, and escalation pathways.

Involve the child in decision-making appropriate to their age and understanding.

## Monitoring and Review

Regularly review intervention effectiveness, safety measures, and the child's progressing needs.

Adapt plans as circumstances change, ensuring flexibility and responsiveness.

Engage the family in review processes to promote transparency and trust.

## Transition Planning

Prepare for transitions (e.g., moving from intensive support to less restrictive services).

Ensure continuity of care and support for the child's ongoing development.

## Special Considerations

**Respect** and uphold the child's rights, dignity, and voice throughout all processes.

**Recognise** the importance of cultural, linguistic, and socioeconomic factors.

**Prioritise** trauma-informed and neurodiversity-affirming practices.

## Conclusion

This child-focused framework aims to promote safety, understanding, and growth for children who, due to their complex needs, pose risks to their parents/carers. By combining thorough assessment, targeted intervention, and collaborative support, social care professionals, and the wider MDT in partnership with universal services can foster a safer, more supportive environment where both children and parents can thrive.

Page 2

**For bespoke costs please email [emmamander@gmt.team](mailto:emmamander@gmt.team)**

Page 21

