

The Common Elements Approach: Embedding Evidence-informed Practice in the Victorian Child and Family Service System

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Roadmap to Reform – the policy context

The child and family service system is being redesigned to be more effective in improving outcomes for children, young people and families.

The aim is for a more person-centred and connected service system, delivering evidence-informed models of care that can be flexed up or flexed down according to need.

The Common Elements Approach was developed in response to some of the challenges of the reform. These include the need for:

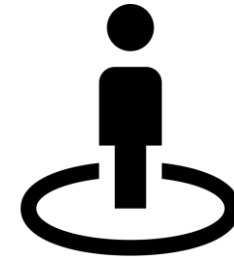
- a consistent and evidence-informed approach to practice that can be delivered across the system
- an approach that can support practitioners with different levels of skills, qualifications and experience
- an approach that builds capability ‘on the ground’ and supports services to embed implementation science infrastructure and ways of working.

Building on the Common Elements Approach

- This is one of a range of evidence-informed models that we are testing in the children and families services sector.
- The Common Elements Approach is complementary to a range of evidence-informed approaches and builds on and supports good practice across the sector.
- The project will feed into the review of the Best Interests Case Practice Model and provides an opportunity to effectively implement practice approaches to support the delivery of the model.
- There may be opportunities to build the Common Elements Approach methodology into existing learning and development activities.
- Trialling the approach has built knowledge and interest in practice elements and implementation science across the sector.

Common elements are:

- Discrete techniques or strategies
- Evidence-informed
 - found across programs or interventions that have been shown to be effective (thus “common”)
- Used flexibly in response to client needs and desired outcomes



Project overview

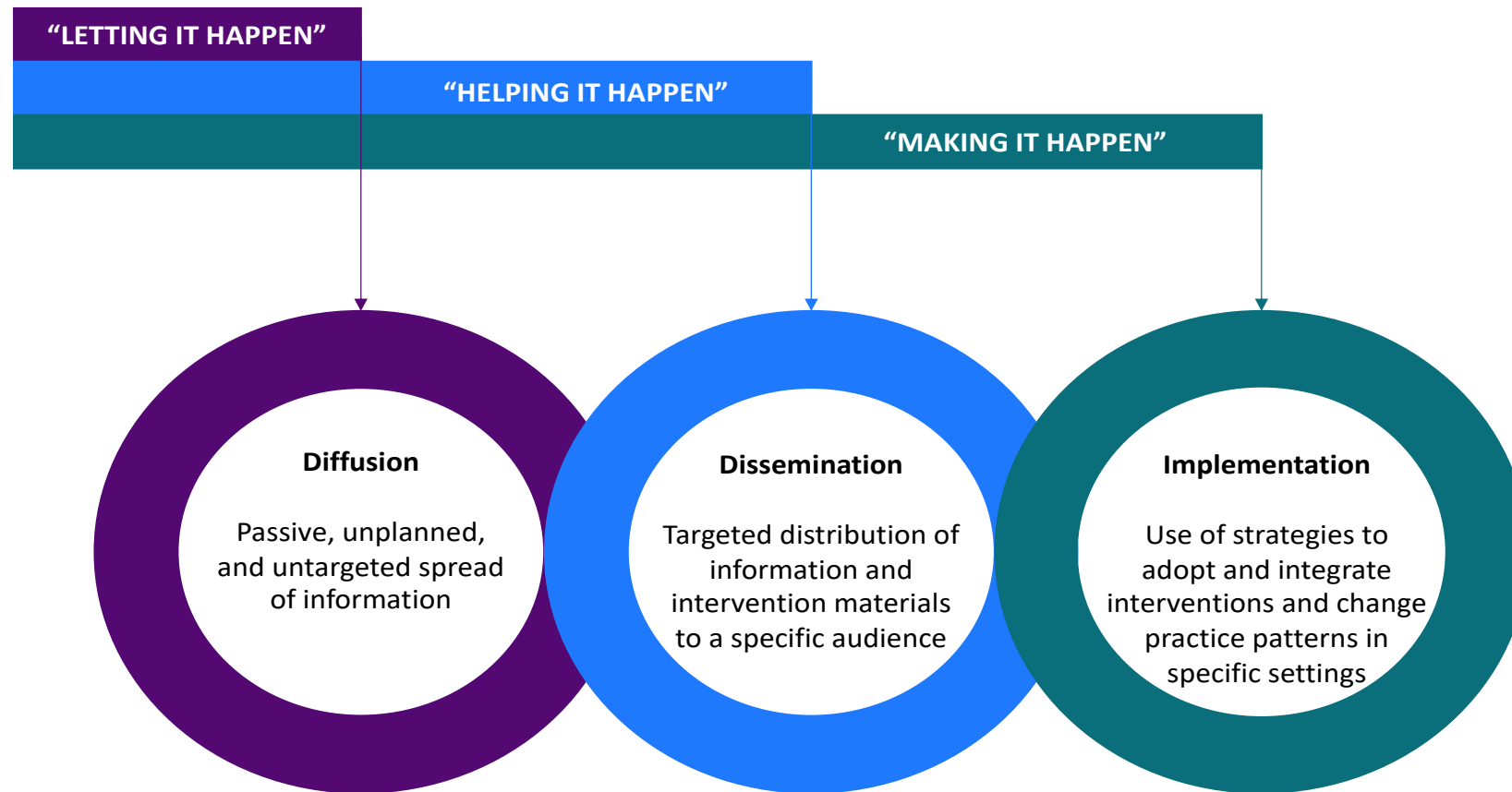
- Common Elements Approach implementation ‘trial’
 - ‘Giving it a go’ in 5 different sites within Victorian human service setting
- Purpose is to understand:
 - What it takes to implement Common Elements Approach
 - How acceptable and feasible the Common Elements Approach is
 - Potential benefits of Common Elements Approach
- Original 20-week trial:
 - 5 trial sites
 - 3 child and family services (including 1 ACCO), 1 Child Protection, 1 specialist family violence

The Opportunity

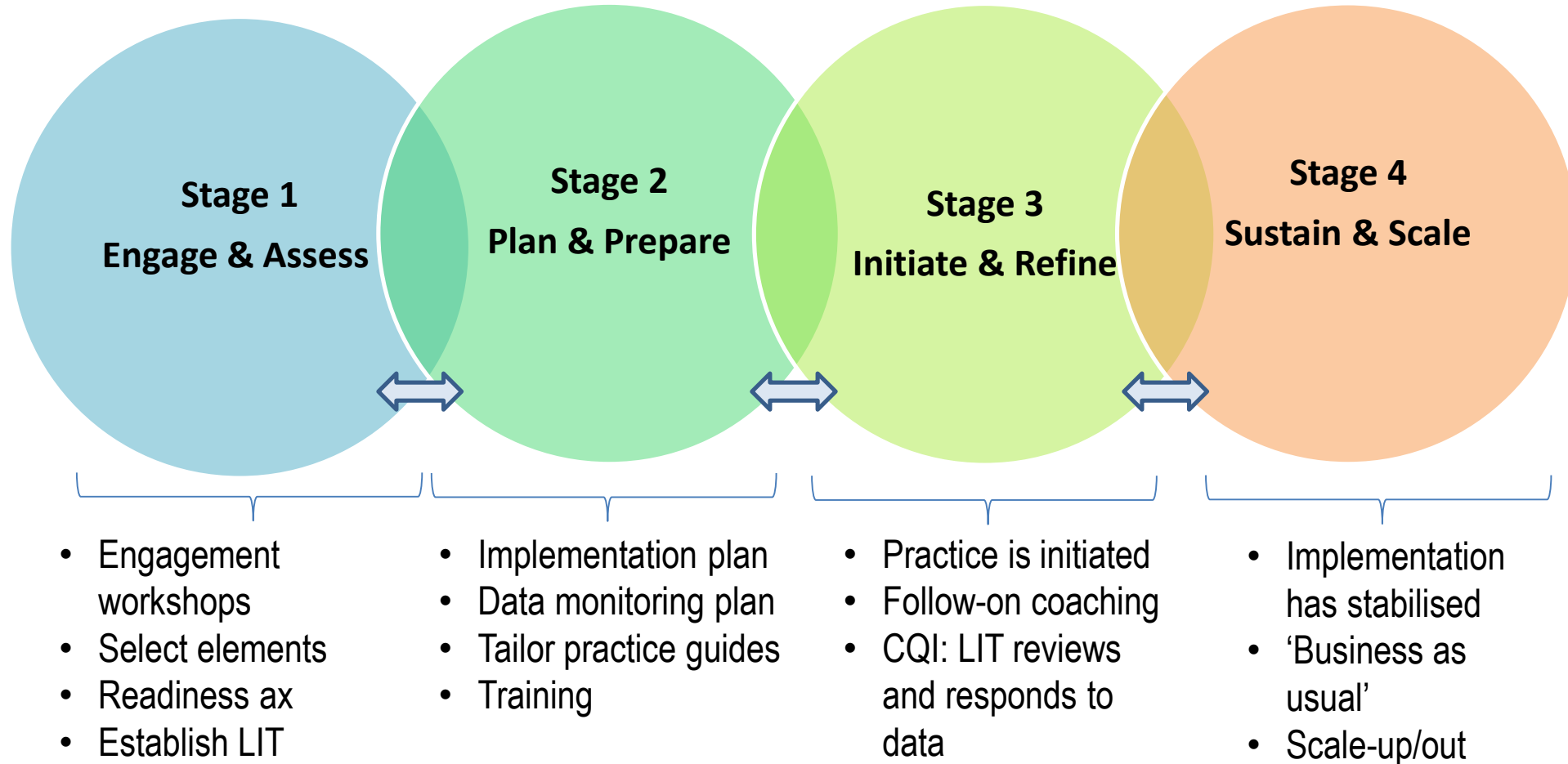
- First government-funded foray into common elements in Australia
- Opportunity for system-level learning
- Facilitate and support embedding of evidence-informed practice in a range of sectors
- Bring implementation science to bear in authentic, real-world settings
- Contribute to the implementation evidence base for common elements across a range of settings
- Possible identification of ‘common’ common elements

Implementing the Common Elements Approach

- Evidence from implementation science tells us that active implementation support is crucial



Four-stage implementation process model



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Family Services and Early Years coming together for shared goals in Community

The common elements selected:

1. Partnership Relationship
2. Strength-Based Practice
3. Motivational Interviewing

With ideas that Cultural Responsiveness and Trauma Informed Care provision will surround ALL MDAS training and interactions rather than be separate topics.

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Considering Context

Having the Common Elements (CE) approach **gave permission** for two teams who have a lot of shared commitment to their families in Community to collaborate more intentionally. It also meant tasks for coming together HAD to be prioritized. The support from the Executives made many staff feel more comfortable booking in CE – oriented activities.

It highlighted how different even the most COMMON aspects of our roles are... but also how SIMILAR our values are regarding investment in families, our work and hopes for Community.

The training in the 3 practice elements was a **good foundation for building shared perspectives.**

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The Application of Elements into Practice

Both teams approached this differently given their actual working environments, team dynamics and culture is quite different. Our Family Service participants are very accomplished with task-oriented, strengths-based approaches and operationalized the elements into hand outs, visual prompts and tangible resources. They surrounded their environments with reminder and supports for learning and practice.

Our Early Years participants have been supported over the past few years to ensure attachment-rich and relational frameworks wrap around babies and their adults, so their operationalization looked more like unpacking elements as part of reflection via their peer reviews and supervision with their line manager. Their conversations changed to include active reflections on how a CE approach might have been used and considered.

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The Application of Elements into Practice

Differences between the teams still meant the entire CE crew were not really in the process together, which was one of the big incentives for CE being trialed locally.

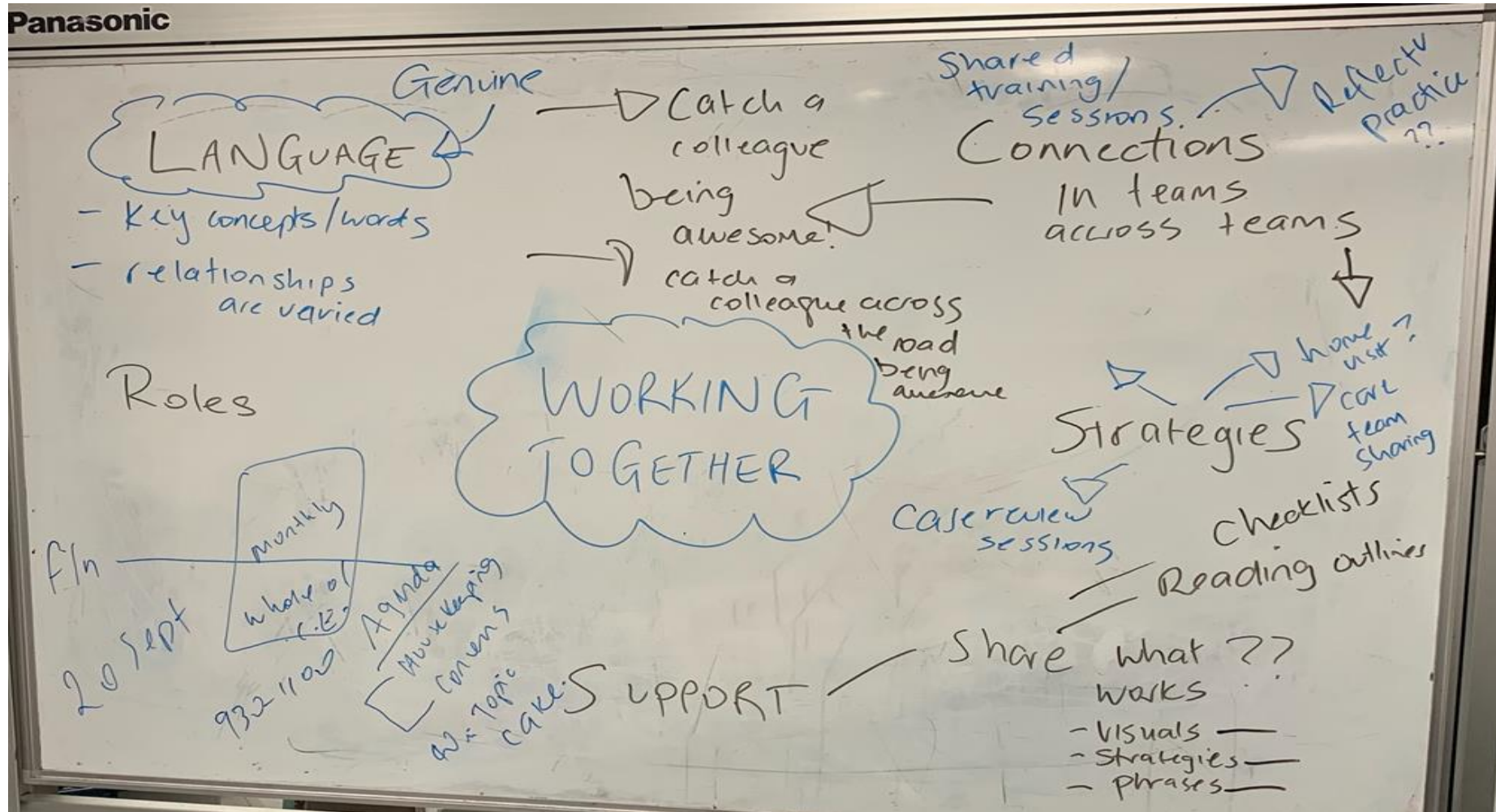
Despite the Champions sharing ideas and maintaining the passion, some disconnect between staff on the ground, from one team to another, was being expressed. So internal strategies to bring the collective together were introduced. **Locally driven, locally facilitated and locally endorsed, a sense of power and voice emerged. A true sharing of local culture, wisdom and perspective from both teams wrapping around the goal of collaboration.**

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The Application of Elements into Practice



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Team Reflective Session: What happened?

Shared goal was to be working together... not two separate teams but one extended support around each other and the community... using each other as colleagues, supports, resources and a safe cohesive base within MDAS.

Ideas to reach goal:

- Sharing internal wisdom and training together. Having group training tutorials together being hosted by our staff and running once a month as determined by the group. Topics might be around specific skills from CE, maybe case reviews and/or team challenges.
- More around trauma and healing and how we use the concepts familiar to parts of the team to expand everyone's confidence and safety
- 'Catch a colleague' using CE skills and strengths... not just within a team, but from across the road.

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Team Reflective Session: What happened?

The concept of language was raised... that if we stick to the language in Practice Guides, we might be too limited. Relationships between staff and their families are really varied and language needs to be safe and genuine and comfortable for the families. To get safer, we might need an internal focus session of how we would use more familiar, healing-rich language with our clients... which means being more comfortable with the elements and less reliant on specific terminology. We have to capture the essence of CE, not get overly focused on the terms.

In saying this, key concepts and words might need some verbal examples in different statements – this could be a future activity for the shared space to consider.

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Team Reflective Session: What happened?

Reminders and sharing are key!

Visual resources to be shared across sites

Phrases and strategies from practice to be shared together in session and on posters

‘Doing the business’ with a colleague from the other team... share care teams, home visits, training and possibly reflective practice.

Early Years to offer internal training tutorials to Family Services and Family Services to provide updates from training and learnings from statutory bodies to Early Years

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Ideal?

The collective desired monthly internal tutorial sessions to cover all of this and more. It was identified that 2.5 hours per month should be the target.

Topics for each tutorial sent out 2 weeks in advance.

Tutorial initially hosted/facilitated by the Lead Practitioner, but as confidence and topics shift, different members of the collective to become the presenters.

Complex cases to be shared between teams as needed

Cake to be available for tutorials

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Some Aspects Still to Consider:

- At some champion reflections, concerns about data collection have been raised. There has been anxiety that collecting daily data on whether or not elements have been used makes staff feel they are auditing themselves rather than being present for their clients. Culturally respectful practice would suggest that conversations via reflection and in peer review opportunities is a better way to capture the use of specific practice elements. Staff suggest already maintained systems for improving practice (like supervision) could be better utilized to report on data.

This is now for the Champions to consider: how do we revise the supervision space to ensure it enables conversation about CE and generates a monthly snapshot of progress?

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Some Aspects Still to Consider:

- Some concern about how the broader organization can support CE to be ongoing if it is only a known experience for two teams?

This is a fluid space where it is early days in the embedding of the CE approach. The collective teams are really pleased about being able to work together and share wisdom and heart.

The internal training tutorials are eagerly be anticipated following the first reflective session.

It is hoped that as tutorials progress and confidence and familiarity between teams and skills sets increase, every member will be a champion across the organisation.

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Commitment:

- More time for the teams to come together and share practice wisdom and how CE relates to the other core theories and fundamentals of their team dynamic
- Internal shared tutorials which honour the skills resources of the people on the ground: this has been a lovely push following CE introduction
- Openness to share, revise and support each other's development: whilst not all of this is about the practice elements, having a formal operational project has shone light on the importance of listening, story telling and building safe relationships amongst staff and this is incredibly important.

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Common Elements for engagement		Description
1	Authentic engagement	Engagement that is sincerely felt and meant. This constitutes building and maintaining a relationship with a carer/individual that they experience as supportive and genuine - by becoming attuned and responsive to the family's circumstances, values and priorities.
2	Partnership relationship	Explicitly seeking a collaborative relationship with carer/individual based on mutual sharing of information, decision-making, and responsibilities. The partnership relationship is about the practitioner and carer/individual working together as equal partners in a mutually agreed upon and respected way.
3	Strength-based practice	Focusing on the strengths of a carer/individual and seeking to identify and openly acknowledge what they do well or are able to do for themselves.
4	Responding to family priorities	Understanding what the carer/individual values most and what issues are most important to them, and then using these as a basis for providing services to help address priorities and other needs that have been identified.
5	Cultural responsiveness - Aboriginal and Torres Strait Islander	Focusing on culturally respectful engagement with Aboriginal children/young people/families to ensure they feel their culture is respected and that they are able to engage effectively with practitioners.
	Cultural responsiveness - CALD	Focusing on culturally respectful engagement with children/young people/families from Culturally and Linguistically Diverse (CALD), refugee and newly arrived communities to ensure they feel their culture is respected and that they are able to engage effectively with practitioners.
6	Seeking feedback	Regularly checking how carers/individuals have experienced the service and whether the practitioner who is delivering the service is meeting their expectations and needs.
Common Elements for behaviour change		Description
7	Goal setting	This practice guide focuses on how to facilitate identification and development of realistic goals that help motivate and guide behaviour change.
8	Problem solving	Modelling and demonstrating techniques designed to problem solve which are generalisable and used throughout life. These include defining a problem, brainstorming, choosing a solution, evaluating results.
9	Family communication skills	Training for the carer/individual in skills and behaviours to facilitate more positive interpersonal communication between family members.
10	Motivational interviewing	Set of techniques to build motivation, readiness and commitment for change.