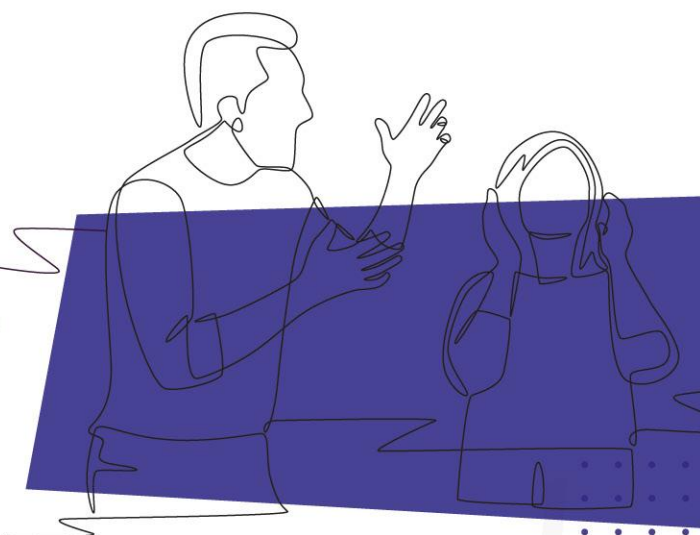
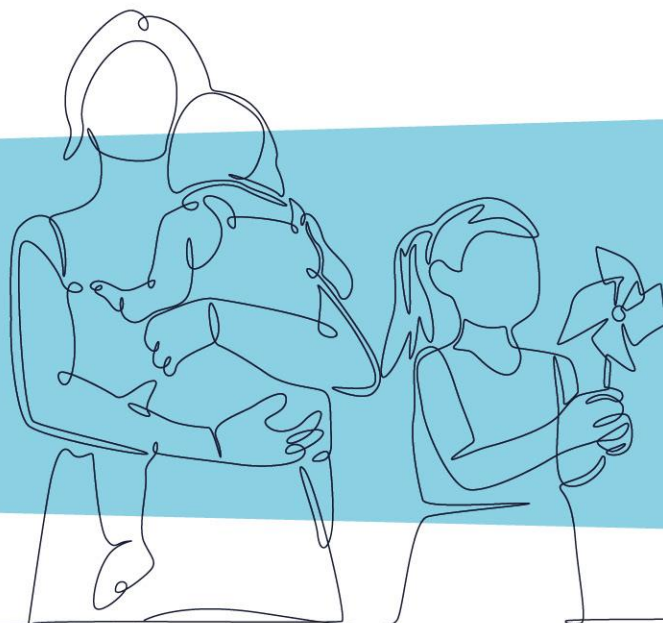




**Whole family  
approaches to:**



# **Responding to parents and children in families affected by domestic abuse**

**Implementation Toolkit**



## **About this toolkit**

This toolkit was co-developed as part of an applied research study that undertook an examination of key factors that impacted on the implementation of Whole family approaches responding to families affected by domestic abuse. When we use the term whole family approaches, we are referring to practitioners from both adult and child focused health and care services working to support families where the parent and the child(ren) are victims/survivors, and a parent/other adult is a perpetrator of domestic abuse. This includes family-led approaches and Co-ordinated Community Responses (CCRs).

We focused on three regions of England, each delivering whole family approaches inclusive of a locally developed system wide model, a family safeguarding centre's model and the Safe and Together model. Data was collected from 53 individuals, including frontline practitioners, managers and senior leaders across the three sites. We found that professionals having a shared understanding of the practice approach, why they were working in this way, and how this differed from what came before it was important to enact and embed the new approaches. Regular structured opportunities to come together in multi-agency networks supported reciprocal learning and the implementation of new innovative approaches was further supported by practitioners from different services thinking together and acting together. The full paper can be accessed [here](#)

These approaches typically involve multiple agencies, each with a focus upon different members of the family, and therefore different skills and practices, which can lead to whole family approaches being difficult to implement. This toolkit provides a step-by-step guide for implementing whole family approaches to respond to both parents and children in families affected by domestic abuse.

## **Aim of toolkit**

The toolkit aims to support the implementation of whole family approaches when responding to both parents and children in families affected by domestic abuse. However, the principles, activities and tools can be adapted for use when implementing most new approaches within a multi-agency/partnership setting. It provides advice about each stage in the process (how to plan for, embed and sustain the approach), and tools which have been designed to support users in this task. This toolkit has been designed so that it can be used as a standalone document or could be used in a complimentary way alongside already established documentation and models of practice, such as Family Group Connections.

**Funder acknowledgement**

This work was funded by the National Institute for Health and Care Research Applied Research Collaboration (NIHR ARC) National Priorities Programme for Adult Social Care and Social Work, led by the ARC Kent, Surrey and Sussex (ARC KSS) and University of Kent, award reference NIHR 201892.

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How to cite: McGovern, R. Alderson, H. Smiles, C. Sarma, K. Mayrhofer, A. Toma, M. Mansuri, N. Akeju, D. Forder, J. Gabbay, M. Jackson, C Miller, R. Kaner, E. (2025) Whole family approaches to responding to parents and children in families affected by domestic abuse. Implementation Toolkit.

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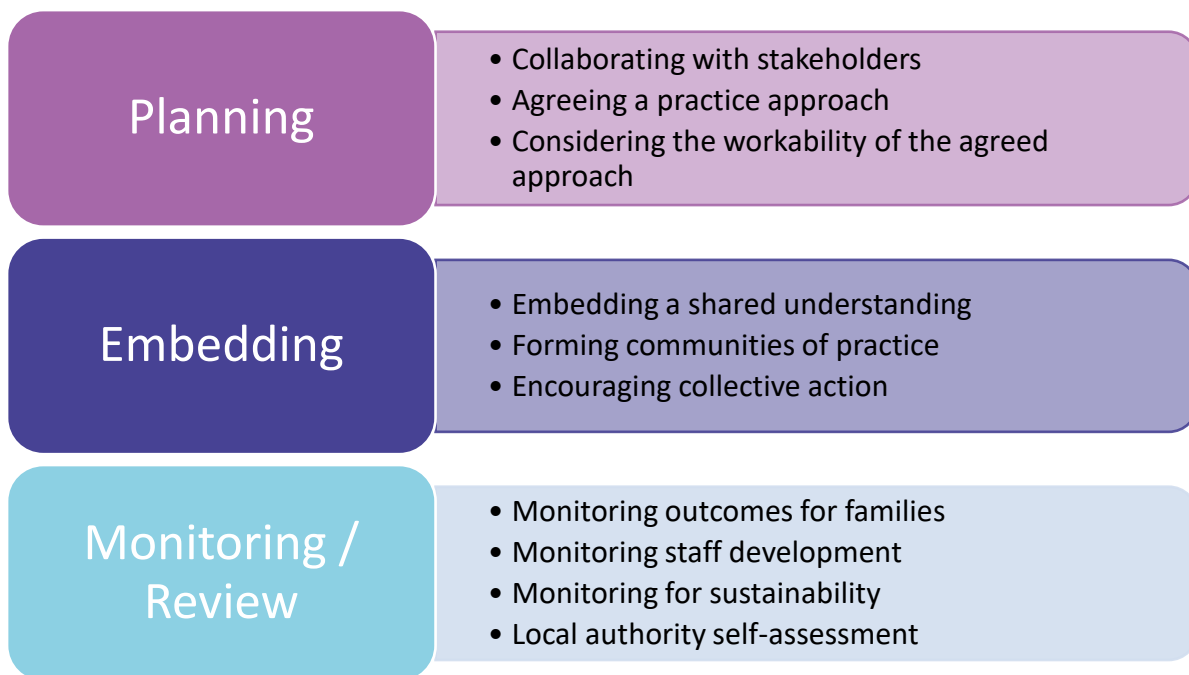
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# Implementing whole family approaches

## Who is the toolkit for?

The toolkit is primarily designed to support strategic leads (individuals responsible for shaping public services and overseeing the best use of public funding). There are however tools for operational managers (individuals responsible for overseeing the day-to-day operations of services) to support the delivery of the approach. The toolkit provides step-by-step guidance for planning, embedding and reviewing stages of implementation. Additionally, it includes specific content which may be helpful to managers and practitioners involved in the delivery of multi-agency whole family approaches.

The diagram below outlines the main topics discussed in this toolkit to guide the different phases of implementation.



The different phases of implementation have all been colour coded to aid accessibility throughout the document. Furthermore, it has been identified on each tool, who is the intended recipient.



# Planning

## for implementation

### Aim of the planning phase

When implementing a whole family approach for families affected by domestic abuse it is important that there is sufficient planning to prepare the local context and maximise successful implementation. This includes identifying stakeholders, agreeing a shared strategic vision for the approach, and agreeing the role of each partner. Within this stage, anticipated barriers and facilitators for each partner in achieving the strategic vision can be considered and responded to.



Stakeholders are those individuals, groups or organisations with an interest, or stake, in the whole family approach to responding to parents and children in families affected by domestic abuse. Stakeholders are likely to include strategic leads, commissioners, service providers, and families themselves. It is important to identify and involve all relevant stakeholders as early as possible within the process of planning the whole family approach. Similar to the Coordinated Community Response, which may be in operation in local areas, this will include organisations which provide specialist domestic abuse services, social care and other key partners such as health, the criminal justice system, housing and the voluntary and community sector. This will enable all stakeholders to contribute to the development of an approach which is workable for all partners or negotiate workarounds where barriers to implementation may be present.

#### Things to consider:

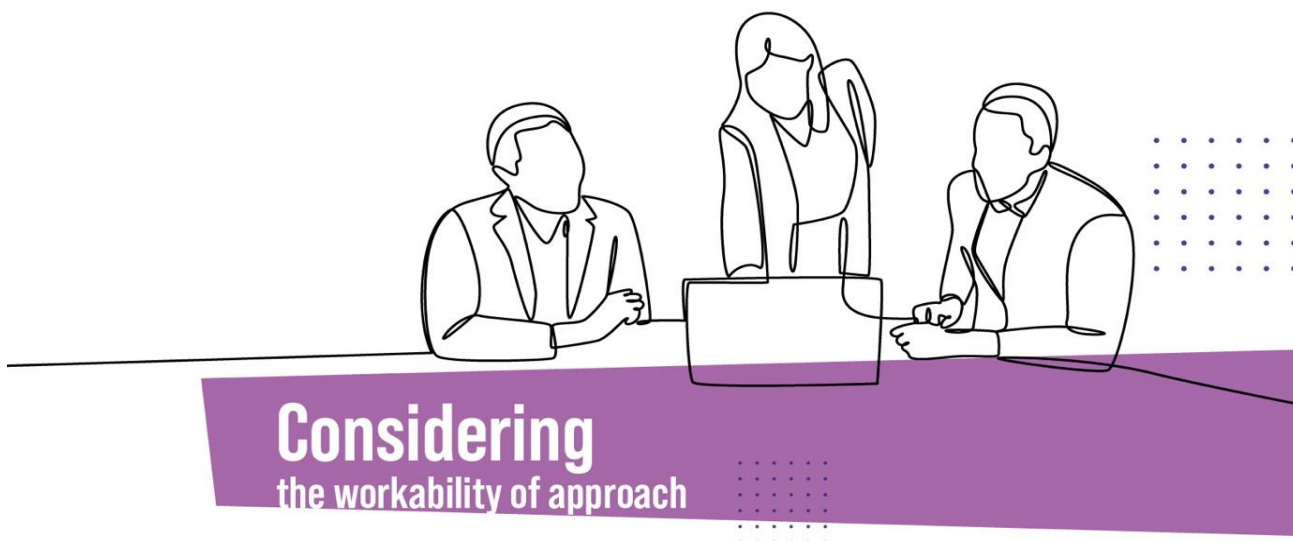
- Who are the relevant stakeholders to engage when planning the new approach?
- Have the key contacts within each partner organisation been identified?
- When in the planning process and what ways can these stakeholders be engaged?
- How will stakeholder be involved in the planning process?



A necessary step when planning for implementation is to agree with partners the detail of the practice approach. Whether selecting an established whole family model (such as the Family Safeguarding Model or Safe and Together), or a locally developed approach, it is important to involve the stakeholders identified in step 1 in the process, including local families. It may be helpful to jointly consider the local prevalence and impact of domestic abuse upon families and the strengths of the current system.

#### Things to consider:

- What are the needs of the local population regarding domestic abuse?
- What are the strengths in the system that can be built upon?
- In what areas/ways could the system be enhanced?
- What would positive change for the family look like?



## Considering the workability of approach

After agreeing upon the practice approach, stakeholders need to consider how to make the approach fit with the existing services and approaches within the local area. Several factors may affect the workability of the practice approach including stakeholders' competing priorities, capacity and resources. Involving stakeholders in identifying factors which may be a barrier, as well as those that might facilitate implementation of the practice approach, will be important in preparing for its implementation. For example, if a local area has a multi-agency safeguarding hub that brings multi-agency partners together who are working with the whole family (MASH), consideration may be needed into how the whole family approach to domestic abuse interacts with the MASH, including where the practices complement, duplicate or detract.

### Things to consider:

- What are the existing responsibilities and priorities of the different stakeholders, and what new input is required of them?
- Do any of these existing responsibilities and priorities conflict?
- What capacity do stakeholders have to implement the whole family approach (as appropriate to their role)?

## PLANNING TOOL FOR STRATEGIC LEADS

INVOLVING STAKEHOLDERS	AGREEING A PRACICE APPROACH	WORKABILITY
<b>Stakeholders/key contacts:</b>  	<b>Who needs to be involved in the new practice approach is:</b>  	<b>Practices that already exist that may support the whole family approach:</b>  
<b>Plan for stakeholder involvement (how and when):</b>  	<b>The new practice approach aims to:</b>  	<b>Practices that already exist that may contradict or duplicate the whole family approach:</b>  
<b>SMART objectives for stakeholder involvement:</b>  	<b>To achieve its aims, the new approach will:</b>  	<b>Action plan (to resolve any conflicting demands and build on areas of strength):</b>  

# PLANNING TOOL FOR OPERATIONAL LEADS

WHAT IS THE TASK TO BE TAKEN FORWARD?	WHO IS RESPONSIBLE?	WHAT IS THE TIMELINE?	HOW WILL PROGRESS BE MONITORED?



# Embedding

## whole family approaches

### Aim of the Embedding phase

To embed a whole family approach into routine practice a number of steps are likely to be necessary. This may include building a shared understanding of the whole family approach across partner organisations, fostering participation of all stakeholders by forming communities of practice and networks, and normalising working practices within and between partners.



The first step in embedding the whole family approach into routine practice is to build a shared understanding of the practice approach. Once the practice approach is agreed (planning stage) there may be further work needed to interpret, apply and make sense of the approach within the existing local system. It may be helpful for partner organisations to work together to make explicit the principles underpinning the approach and discuss how they think the approach may 'work' to bring about better outcomes for parents and children in families affected by domestic abuse.

A visual depiction of the 'logic model' for the approach, which details how and why the approach is believed to link to its outcomes is likely to be helpful (see logic model tool on page 16). Once this is developed and agreed, consideration should be given to how shared understanding will be achieved across strategic and operational levels. This may include incorporating the key principles of the approach into policies and procedures and ensuring clear messaging. On an operational level, training in the approach is also likely to be important.

### Things to consider:

- How will partner organisations be involved in discussions to agree the practice principles of the new approach?
- Do you have a developed and agreed logic model for the approach?
- How will coherence of the whole family approach be built at a strategic level?
- How will individual practitioners be supported to understand the whole family approach and how it differs from what came before?
- What role will operational managers have in supporting practitioners to understand the new practice approach?



Communities of practice can be defined as groups that share common interests and goals, who come together to improve practice. Members meet regularly to think together, exchanging knowledge and expertise to achieve collective learning. Forming multi-disciplinary communities of practice focused upon the strategic vision and delivery of the new practice approach may support it to embed within routine practice. In particular, bringing strategic leads together to jointly consider the local vision may reinforce buy-in across the partnership and provide opportunity identify workarounds should barriers to implementing the new approach emerge. Practitioner communities of practice may be convened to focus upon individual cases, formulate responses and galvanise a network which can encourage and support the change in practice necessary when implementing a new approach. Alternatively, partnerships may build communities of practice consisting of 'champions' within each of the partner organisations with an interest in specialising in domestic abuse. The frequency at which the communities of practice meet will dependent upon the needs of the local system and whether the group is strategically or operationally focused.

### Things to consider:

- How will strategic leads and managers be supported to come together on a regular basis to discuss the partnerships approach to responding to domestic abuse?
- How will frontline practitioners be supported to come together to discuss responding to domestic abuse?
- What will be the frequency of the communities of practice?
- What structures exist for communication between strategic and operational communities of practice?



Whole family approaches consist of organisations and individuals that are both adult and child focused and those that are specialists and non-specialist in domestic abuse. All partners, at all levels, have an important role to play in implementing the whole family approach when responding to families affected by domestic abuse. Successful collective action is likely to be supported by agreeing how these distinct roles and responsibilities come together and the contribution they each make. Whilst co-operation between partners is helpful (for example where partners undertake a specific task), this can lead to a fragmented approach which undermines collective action. Alternatively, co-ownership models wherein partners seek to collaboratively respond to families affected by domestic abuse, and which include an appropriate degree of fluidity between roles, may encourage a whole family approach.

### Things to consider:

- What does collective action look like on a strategic, organisational and practitioner level?
- How will collective action be facilitated on a strategic, organisational and practitioner level?
- What are the roles and responsibilities that can be shared with appropriate agreement, training and support?
- Are there protocols in place for information sharing?
- Are there adequate opportunities for practitioners to jointly formulate and deliver plans of care for families affected by domestic abuse?

One method to help you to embed a whole family approach is to develop a logic model. A logic model is a visual tool to help all partners think about and plan the journey of change they would like to make.

In simple terms, logic models can be used to show the connections between needs that have been identified, what actions can be taken to address the identified needs and how it will make a difference for individuals and families affected by domestic abuse.

For each section of the logic model, you need to consider:

Principles of approach - What are the guiding principles of the model you are proposing to use?

Resources - What is needed to deliver the model?

Activities - What are the active components of the model/what will the model deliver?

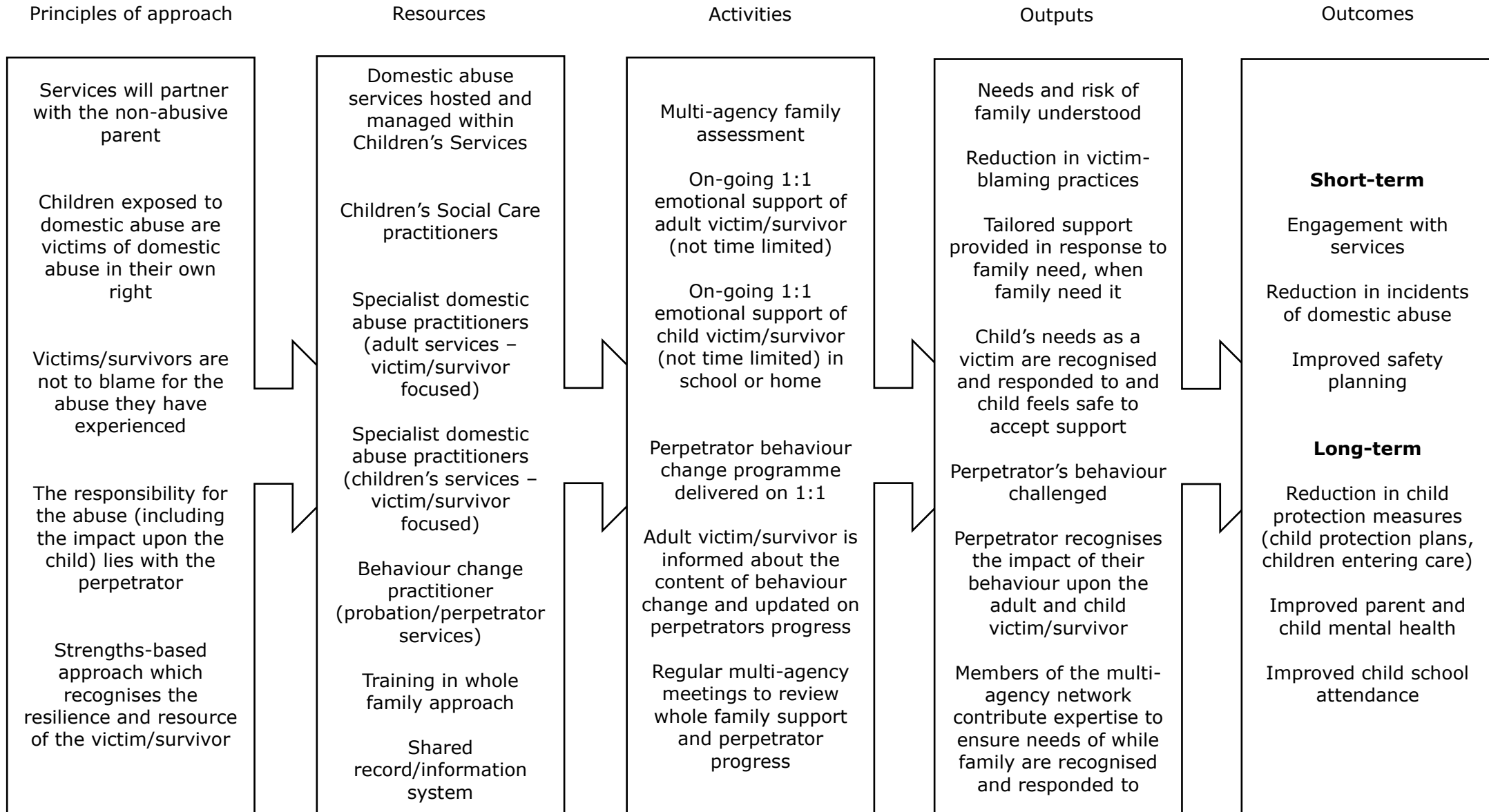
Outputs - What are the intended accomplishments of the model?

Outcomes - What do you expect to see/achieve for individuals and families if the model is delivered successfully?

An illustrative example is provided below.

# TOOL FOR STRATEGIC LEADS

## Practice Approach Logic Model (Illustrative example)



# TOOL FOR STRATEGIC LEADS

## Practice Approach Logic Model Template

Principles of approach

Resources

Activities

Outputs

Outcomes

[Enter key principles underpinning new approach. May include core beliefs and drivers underpinning approach]

[Enter human, time, physical and financial resources required in approach]

[Enter all activities/actions involved in delivering the practice approach including direct and indirect delivery with families]

[Enter what attitudes, knowledge, behaviour, responses you anticipate may result from the activities/actions]

[Enter short, medium and long term outcomes are anticipated from the new practice approach]

## EMBEDDING TOOL FOR STRATEGIC LEADS

SHARED UNDERSTANDING	COMMUNITIES OF PRACTICE (COP)	COLLECTIVE ACTION
<b>Activities/actions to build strategic coherence:</b>	<b>Frequency of COP meetings:</b>  <i>For strategic leads and managers</i>  <i>For practitioners</i>	<b>Plan for strategic collective action:</b>
<b>Training for practitioners and managers:</b>	<b>Agenda/structure of COP</b>  <i>For strategic leads and managers</i>  <i>For practitioners</i>	<b>Plan for organisational collective action:</b>
<b>Other activities to support practitioners and managers to achieve shared understanding:</b>	<b>What is the intended outcome/goal of COPs</b>  <i>For strategic leads and managers</i>  <i>For practitioners</i>	<b>Plan for practitioner collective action:</b>

## EMBEDDING TOOL FOR OPERATIONAL LEADS

WHAT IS THE TASK TO BE TAKEN FORWARD?	WHO IS RESPONSIBLE?	WHAT IS THE TIMELINE?	HOW WILL PROGRESS BE MONITORED?

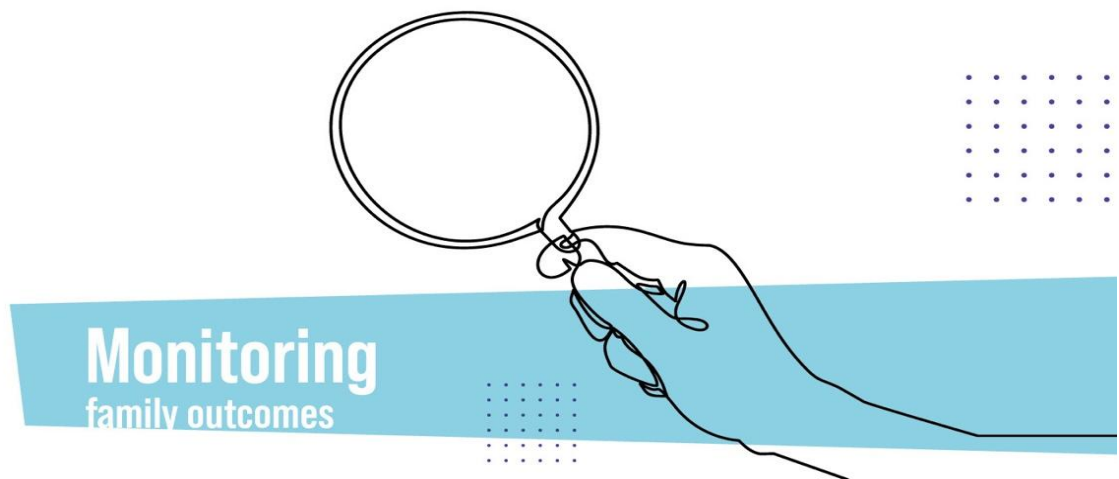


# Sustaining

## whole family approaches

### Aim of the Sustaining Phase

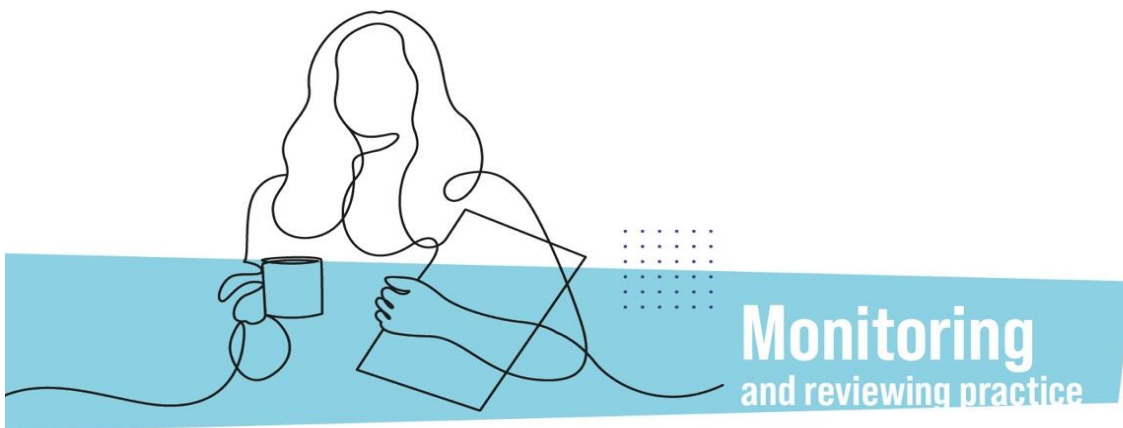
After a period of implementation, a decision will need to be made about whether to sustain the whole family approach. It is therefore necessary to monitor and review whether the approach is functioning as anticipated and leading to the intended outcomes. Revisiting the practice approach logic model developed within the embedding phase may be helpful in identifying aspects of the approach that are working and those that are not. Where it is not functioning as anticipated, it may be helpful to consider the reasons for this and whether modifications may be necessary, including situations where an approach may need to be discontinued.



The main indicator of whether the whole family approach to domestic abuse is achieving its aims is if, and in what way, it affects outcomes for families. Whilst routinely collected data relating to hard outcomes (such as incidents of police call outs and child concern notifications for domestic abuse, child protection plans and children entering care) are important in measuring effectiveness, soft outcomes (such as practitioners being able to identify positive impacts upon the families they support) can be influential in motivating practitioners to sustain their practice. As such, approaches to monitoring and reviewing may benefit from a combination of outcome indicators along with opportunities to identify, share and celebrate 'good news' stories.

#### Things to consider:

- What measures will be used to monitor and review whether the new approach 'works' to improve outcomes for families?
- What opportunities could be provided to facilitate joint reflection upon the new approach?
- How will feedback from families be gathered?



The extent to which the whole family approach is implemented as intended is an important consideration within its monitoring and review. Variations may represent innovation (where practice is intentionally altered to make improvements) or drift (where practice is unintentionally altered without relation to improvement). Operational managers play a crucial role in ensuring efficient and effective delivery of services and therefore hold a central role in adapting and/or sustaining the practice approach. They are ideally placed to support continuous workforce development, ensuring evolving staff teams maintain knowledge and skill to deliver the new approach. Additionally, by creating opportunities for practitioners to regularly reflect on their practice within individual and group supervisions, operational managers can support practitioners to consider the strengths and areas for improvements in the whole family approach.

#### Things to consider:

- How will newly appointed practitioners be introduced to the practice approach within the partnership?
- How will individual and group supervisions be utilised to monitor and review the practice approach?
- How will areas of innovation be captured and shared with others?



After monitoring and reviewing the whole family approach, it is likely that the approach may need to be modified, and/or commitment to the approach renewed. It is important to involve the stakeholders identified in the planning stage in discussions about what and how the approach is modified and/or whether it should be sustained. Where modifications are made, it is important to capture these and ensure these modifications become part of routine practice. It may be helpful therefore to repeat the three steps of the embedding phase. On-going strategic commitment is likely to be necessary to normalise and sustain approaches, even when they have been found to be effective and workable. This may include agreeing longer-term funding, support and oversight.

#### Things to consider:

- Has the whole family approach achieved the strategic objectives set?
- Are any aspects of the approach needing modification, and if so, in what way?
- How will modifications be communicated to all partners at all levels to ensure continued shared understanding of the approach?
- Are there adequate resources (financial, human, infrastructure) to sustain the whole family approach?

## TOOL FOR STRATEGIC LEADS

### WHOLE FAMILY APPROACH MONITORING AND REVIEW

OBJECTIVE/OUTCOME	PROGRESS MADE/EVIDENCE	MODIFICATION REQUIRED
1.		
2.		
3.		
4.		

## TOOL FOR MANAGERS AND PRACTITIONER

### Staff Induction Template

When new employees join a team, it may be helpful for supervisors and supervisees to discuss and reflect upon the employees understanding of the whole family approach implemented within the service. It may also be useful to reflect upon their involvement in activities which have been found to support the implementation of the approach and get their feedback on what they consider to be the strengths and areas for improvement within the approach.

<b>Name of supervisee:</b>	
<b>Name of supervisor:</b>	
<b>Date of meeting:</b>	

**Where considered relevant, supervisors and supervisees may consider the following questions:**

	Supervision questions	Practitioner response	Agreed actions
<i>Knowledge and understanding</i>	Does the supervisee have a clear understanding of the whole family approach implemented within this organisation?  What does the approach aim to achieve?  Training completed during my induction  Does the supervisee have any additional development needs to assist them to understand and implement the approach?		
<i>Networking</i>	Is the supervisee aware of the key partners/ professionals are who work into the whole family approach in the area?  Is the supervisee linked into communities of practice/ meetings relevant to the whole family approach and/or domestic violence?		

<i>Working together collaboratively</i>	<p>What has the supervisee noticed about the way in which the multi-agency network works together to support whole families?</p> <p>What does the supervisee understand of their role within the approach?</p>		
<i>Reflection</i>	<p>What does the supervisee see as the strengths of the whole family approach taken in the area?</p> <p>In what ways could the multiagency network work together differently to improve the experience of families receiving support?</p>		

**Feedback from supervisor**

Following completion of the induction, it would be beneficial for supervisors to provide clear and focused feedback to practitioners.

Please identify any objectives to be actioned by practitioners in advance of the next supervisory session.

**When will your next supervision session be?**

Date: Time: Venue for your next session:	
<b>Signed: (Supervisee)</b>	
<b>Date:</b>	
<b>Signed: (Supervisor)</b>	
<b>Date:</b>	

## Individual Supervision Recording Template

How you approach your supervision will be up to you and your supervisor to determine. This supervision template, which has been adapted from the HCPC supervision template, includes a focus upon activities and consideration which support the implementation of whole family approaches. Supervisors and supervisees may further adapt this template according to need and/or use in conjunction with existing supervision activities.

<b>Name of supervisee:</b>	
<b>Name of supervisor:</b>	
<b>Date of meeting:</b>	

### What is the aim or purpose of your supervision session?

It is important that your supervision has a clear focus. You should identify clear objectives at the beginning of each supervision session. If this is a follow up session, it would be helpful to review notes of your last meeting to discuss previous actions identified and any progress made against these.

### What are the primary discussion points to be covered within this supervision session?

1. Training needs relating to whole family approach and wider practice.
2. Identify/review attendance at networks/meetings relating to whole family approaches and/or domestic abuse.
3. Caseload review (with reference to working together with adult and child focused workers, those with specialist/non-specialist DA roles)
4. Reflection - What is 'working' within the approach?

### What would you like to achieve in this supervision session?

**What goals have you achieved since your last supervision?** (How have you put previous learning relating to the whole family approach into practice and how this has contributed towards your professional practice?)

**What have been your successes since your last supervision?**

You may want to outline any positive outcomes you have observed in the families you support and examples of good multi-agency whole family working.

What lead/contributed to these successes?

**What challenges have you faced since your last supervision?**

You may want to outline any challenges that you have faced when implementing the whole family approach (either in working with families or with other professionals), and what you have done to overcome these.

If any challenges remain, you could outline what's needed to help you overcome these going forward.

**What future learning objectives have you identified to assist you to work with whole families affected by domestic abuse and what do you hope to achieve before your next supervision?**

How will you achieve these objectives, and by when?

How will these contribute towards your professional development?

Will you need any additional support?

**Feedback from supervisor**

Feedback should be clear and focused. It should also be evidence based, which means clearly outlining the reasons for any comments provided.

Identifying clear actions and objectives will help ensure feedback is constructive, but you should also use this section to reiterate/highlight any achievements and progress made.

**What actions have been agreed?**

Think about what you have learnt from this supervision session, and what will you do differently.

<b>Signed: (Supervisee)</b>	
<b>Date:</b>	
<b>Signed: (Supervisor)</b>	
<b>Date:</b>	

# TOOL FOR MANAGERS AND PRACTITIONERS

## Template for reviewing the whole family approach

This template can be used to promote reflection upon the whole family approach within teams/services. It can be used to identify what works, specific examples of good practice and also areas of the approach which may require modification in order to improve support for families affected by domestic abuse.

<b>Names of people present at review:</b>	
<b>Date of meeting:</b>	

**In what way does the whole family approach affect families?** (positive and negative outcomes)

**In what way does the whole family approach affect your practice?** (positive and negative impacts)

**What are the things that work well about the whole family approach?**

**What are the things that do not work well about the whole family approach?**

**Think of an example from your practice when you felt proud of your work with families. Explain what you did, how you did and the outcome.**

**In what ways do you think the whole family approach could be modified to address the things in the approach that do not work well?**

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