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“Your voice was as important as the teacher sat next to you.”

Exploring Adults First, an educational psychology intervention, supporting children and their parents.

Full Report of findings from interviews with parents

University of Sunderland and Teesside University, working in Collaboration with Redcar and Cleveland Borough Council

January 2024

Contents

1. Introduction	4
1.1. Background to the Project.....	4
1.2. Project Aims and Objectives	4
1.3. Adults First Model	5
1.3.1. Adults First Intervention Protocol	6
2. Methodology	8
2.1. Project Design	8
2.2. Participants.....	9
2.3. Materials	9
2.4. Procedures	9
2.5. Ethical considerations	10
2.6. Data analysis	11
3. Results.....	12
3.1. Parental Involvement and Coproduction in Adult First Intervention	13
3.1.1. Acknowledgement of Parent Voice as Important.....	13
3.1.2. Parent as an Advocate for Child's Voice	16
3.1.3. Ability to Explore External Factors Affecting the Child.....	18
3.2. Influence and Role of Psychologist in Adults First Intervention	20
3.2.1. Interpersonal Qualities of Adults First Psychologist.....	21
3.2.2. Influence of Psychologist on Parents' Wellbeing	23
3.2.3. Facilitating Liaison with Professionals	25
3.3. Importance of Multiagency Meetings in Adult First Intervention.....	27
3.3.1. Value of Professional Collaboration	27
3.3.2. Effective Structure and Features of Adults First Meetings.....	30
3.4. Positive Impacts of the Adult First Intervention.....	32
3.4.1. Improvements in Child's Engagement with School.....	32

3.4.2.	Improvements in Parent/Child Relationships.....	34
3.4.3.	Improvements in Schools' Understanding of the Child	35
3.4.4.	Positive Impacts of Adults First for Parents.....	37
3.5.	Identified Areas for Development in the Adults First Model	39
3.5.1.	Challenges in Collaboration Between Parents and Professionals	39
3.5.2.	More Frequent and Longer Meetings Required.....	41
3.5.3.	Parental Understanding of the Contents and Requirements.....	42
3.5.4.	Absence of Childs' Voice	43
4.	Discussion	43
4.1.	Importance and Benefits of Parental Involvement in the Adults First Model	44
4.1.1.	Benefits of Parental Advocacy for Children	44
4.1.2.	Improved Parental Relationships with Schools Leads to Better Understanding of Child's Needs.....	45
4.2.	Importance of the Interpersonal Role of the Psychologist in the Adults First Intervention 46	
4.2.1.	Importance of Psychologist's Relationship with Parents.....	46
4.2.2.	More Effective Multiagency Meetings.....	46
4.3.	Areas for Development of the Adults First Model	47
4.3.1.	Challenges in Collaboration Between Stakeholders	47
4.3.2.	Need for Longer and More Frequent Meetings.....	47
4.3.3.	Improve Parental Understanding Prior to Intervention.....	48
4.3.4.	Absence of the Child's Voice	48
4.4.	Conclusion	48
5.	Recommendations	49
5.1.	Recommendations for Development of the Adults First Model	49
5.2.	Recommendations for Further Research and Evaluation of the Adults First Model	50
6.	References	52

7. Appendices54

Tables

Table 1: Interview Schedule 11

Table 2: Table of Themes, Sub-Themes and Excerpts.....54

1. Introduction

This report presents findings from an evidence gathering project into the efficacy and effectiveness of Adults First, a novel, school-based, educational psychology intervention supporting children and young people with social, emotional and mental health needs, and their parents, within Redcar and Cleveland. The aim of this project was to gather insight from parents, who have participated in the Adults First intervention within Redcar and Cleveland, to establish key elements of the Adults First model to be explored further, forming the foundations of a full-scale evaluation. Semi-structured interviews were undertaken with parents, with the aim of better understanding the experiences of parents involved with the Adults First model, establish successful aspects of the approach and areas for development. Findings from interviews with parents are presented in this report.

1.1. Background to the Project

Funded by the National Institute for Health and Social Care Research (NIHR) Clinical Research Network (CRN) through the Targeted Health Needs Award 2022/23, this project was undertaken by the University of Sunderland and Teesside University, in collaboration with Redcar and Cleveland Borough Council. The Research Team would like to thank the CRN for this funding. The bid was initiated by Redcar & Cleveland Borough Council, supported by the South Tees Health Determinants Research Collaboration (HDRC) during its development year. The driver for this piece of work from the local authority was to understand more about the Adults First intervention from a parent's perspective, acknowledging that, at an individual level the Education Psychologist is seeing good outcomes and there is positive anecdotal feedback from families, but there is no robust quantitative or qualitative available. This insight work is intended to be the first step of a research journey to understand and evaluate the effectiveness of the model. The findings will inform the development of a training package and be used to make changes to improve the service.

1.2. Project Aims and Objectives

Anecdotal feedback to the service provider from parents, carers and professionals has been overwhelmingly positive, however no formal evaluation or academic research regarding the effectiveness of the intervention has been conducted. This is necessary to obtain further resources and investment in support of the model. Therefore, the aim of this project was to

gather insight from key stakeholders to establish key elements of the model to be explored further, forming the foundations of a full-scale evaluation. As such the project objectives were to:

1. Understand the experiences of parents involved with the Adults First model.
2. Establish what constitutes a successful delivery of the model.

1.3. Adults First Model

The Adults First Model is a way of working developed by Educational Psychologist Christine Sketchley and currently in use at Redcar and Cleveland Borough Council. The Adults First Model is a unique way of working that differs from traditional Educational Psychology approaches.

Traditional approaches to Educational Psychology more often focus on the direct assessment of the child followed by a set of recommendations from the Educational Psychologist (EP) based on information shared by the school, information shared by the child and the child's presentation. Parents and carers are typically the recipients of the recommendations rather than actively involved in the decision-making process.

In contrast, the Adults First Model seeks to understand the child's challenges, behaviour, life, and experiences by bringing together parents and carers with the involved professionals, often from several agencies or disciplines, with the Educational Psychologist facilitating this process. The focus is on understanding the past and current experiences of the child, the impact this has had on them and how this is affecting their current challenges and/or behaviour. The group then work together to 'co-construct' a plan to help and support the child. The development of the plan is parent led and supported by all the involved professionals. This might include strategies to help a child deal with past trauma or encourage engagement with services or support to help address any broader issues that are identified in a family, for example the mental health of a parent.

The model seeks to intervene early, drawing on the collective resources of the group to best support the child. It aims to prevent needs from escalating to the point where higher needs funding is required and most importantly strives to enable children to remain in mainstream school with the appropriate support in place. The model recognises that parents and carers know their child best and places them at the centre of this process. It is the views of the parents that first and foremost shape the co-constructed plan, with professionals sharing their expertise and the group collectively agreeing what will work best for the child. It is considered that this co-

construction between parents/carers and the school, leads to a more productive and effective home and school relationship resulting in better support for the young person.

The Adults First Model embodies the ethos of the Government's Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan 'Right Support, Right Place, Right Time, (HM Government, Mar 23). It recognises that, despite the range of support available through the current SEND system, families feel frustrated and struggle to access the support they need, often reporting an adversarial relationship with authorities. The improvement plan has been developed to take forward the recommendations of the SEND and Alternative Green Paper (Mar 22) it calls for earlier identification of SEND, better quality support in mainstream settings and evidence-based provision. There are clear themes within the Plan regarding early intervention, effective transitions, co-production and strengthening relationships with parents.

1.3.1. Adults First Intervention Protocol

Referrals are usually made by colleagues in schools who specifically request the Adults First model approach. This typically happens at a crisis point, where the school are already utilising their internal resources such as support via the School's Special Educational Needs Coordinator and support from other services like the council's Inclusion Team but where there is little progress. An Adults First Referral is therefore often made as a last attempt to support the child before a formal request is made for a statutory Education Health and Care Plan (EHCP). An estimated three to four meetings occur over a six-month time-period. The below process indicates the meetings likely to take place at each stage. This varies depending on the parent/carer's confidence to participate; the rate at which their trust in the approach can be built, and other factors including the availability of other agencies to join the process. Meetings are conducted via a combination of face-to-face interaction facilitated by the relevant school and online participation through Microsoft Teams. The four stages include planning, initial meeting, first review meeting, and subsequent review meeting (including transition):

1. Planning

Initial planning work occurs with the school SEND Coordinator to arrange the meeting date, design the meeting set-up, agree who will attend the initial meeting and organise where it will take place.

2. Initial Meeting

The EP leads the introductions and summarises the intentions of the meeting, ensuring that the parent/carer is central to the meeting. All professionals are introduced so the parent understands who everyone is and why they are attending. It's important for all parties to understand the purpose of the meeting and what they're hoping to achieve; who is 'in charge' and who will take notes; the name and role of everyone present; and the meeting rules, including remaining respectful, listening to others, and taking turns to speak. The EP confirms that care will be taken to ensure the parent/carer feels comfortable with what is discussed, and they can stop or opt out of participation at any time.

During the initial meeting, the first focus is to ensure that the parent/carer feels comfortable and their trust in the approach is gained. It is important that the parent/carer feels confident that those present will listen to what they are saying. The EP explores the social, emotional, and developmental history, carefully guiding this process by asking the parent/carer questions to retell their child's story to date. Within this process, time may be taken to explore the parent/carer's relationships prior to the child's birth, which is important in building an understanding of the earliest stages of the child's history, even before they were conceived. This helps to explore what has happened before and how the current situation has been arrived at today. Many of these details add to the better understanding that is hoped to be gained within the meeting, which is known as the 'shared formulation'.

After the parent/carer has shared the history, others present are invited to share information to connect the here and now with the historical information shared by parent/carer. The formulation begins with the EP sharing their thoughts about what they think is currently happening and what the child or young person's (CYP) presentation is about. Led by the EP, everyone discusses what they think of what the EP has said, and possible actions begin to emerge.

The plan is made, based on the themes that have been noticed and led by the EP within the formulation. The EP suggests ways in which each of the themes can be developed through actions, but mainly these actions are agreed in the discussion from all parties. This process is known as either co-construction or co-production. Notes are taken of the agreed actions and the date of the next meeting is arranged, taking account of everyone's likely availability. If there isn't already a SEND Support Plan Plus (SSP+) in place, the information shared at the meeting will be used for key adults to begin to write one. If an SSP+ already exists, the information will be used to add to and update it.

3. First Review Meeting

The first review meeting will usually be scheduled approximately six weeks hence, but the decision about the date will remain flexible, according to the content that has emerged and the current situation and context. If a system for review is already in place, for example, if the family is open to Early Help or Social Care, it will likely be agreed to combine the meeting processes to ensure the family is present within one context only.

4. Subsequent Review Meetings (including Transition)

The review process continues with a Plan, Do, Review process for so long as it is agreed as necessary. Where transition to a different school context is foreseen, the review process will invite colleagues from the receiving school into the review meeting, to explain the CYP's details, context and to assist preparation of the receiving setting. Review will always take place following transition within the new school context and will include those from the original school setting. This is to ensure that the CYP has an appropriate plan in place to meet their needs within the new setting. Should any concerns remain, and/or new concerns emerge, reference will be made to those who have known the CYP previously, and expertise from their history for supporting the CYP will be used to inform the next steps.

2. Methodology

2.1. Project Design

A qualitative design was utilised to collect detailed open-ended data on parents' experiences of the model. Through semi-structured interviews, participants could share their experiences in-depth, providing insight and allowing for further probing as necessary to elicit additional detail or understanding (Frances, Coughlan & Patricia, 2009). Data were analysed thematically to capture patterns of meaning across cases (Clarke & Braun, 2017). Qualitative surveys and focus groups were considered as alternative methods of data collection, however as a consideration was to ensure participants felt supported within the interaction, individual interviews were a more suitable method (Brown & Danaher, 2019). This was due to the rapport building that a one-to-one interview allowed and the potential influence of the provider's tone and body language on how questions are perceived by participants (Pitts & Miller-Day, 2007). As discussion of parent's experiences may cover sensitive issues, the one-on-one interaction with the researcher may also provide parents with a sense of personal space where they feel

comfortable to discuss personal experiences. These elements are not possible within a focus group or survey.

2.2. Participants

Participants consisted of twelve parents from eight schools across the Redcar and Cleveland Borough. One parent was joined by a relative who was also included. Recruitment occurred via the schools through purposive sampling, gatekeeper assent was gained from school headteachers prior to recruitment. Parents who had completed the intervention within the twelve months prior to data collection in April 2023 were emailed an advert for the study, parents' position in terms of knowledge and experience relating to the practical application of the model were considered during selection. Eligibility criteria included being a parent of a pupil who had received and completed the intervention, and the ability to speak English well enough to understand the questions. Parents were excluded from participation if they had participated in the intervention but disengaged. Four participants were contacted but did not respond.

2.3. Materials

The question schedule for the interviews was designed specifically to meet the objectives of the study. Questions were open-ended, prompts and follow-up questions to seek explanations or further detail were asked when necessary. The initial question was broad and easy for the participant to answer to help the participant to relax and build rapport (McGrath, Palmgren, & Liljedahl 2019). Ensuring the participant felt comfortable enough to speak openly without judgement by the interviewer was particularly important due to the potential sensitive nature of topics discussed.

Potential research questions were piloted with members of a steering group, including a parent who had accessed the intervention, where they were adjusted based off feedback (Mikuksa, 2016). Questions aimed to explore parents' perceptions of the intervention and any potential impact this might have had. Topics included feelings before, during and after the intervention, positive elements, changes after taking part in the intervention, and areas for improvement (see Figure 1 for interview schedule).

2.4. Procedures

Individual semi-structured interviews were conducted online via Microsoft teams. Eligible participants were provided with an information sheet containing summary information of the

study procedures, risks, and ethics to allow for an informed decision to be made regarding participation. If participants wished to take part, they were contacted via email by the research assistant and provided the opportunity to ask questions before written informed consent was obtained and a suitable time for the interview was arranged. Alternatively, due to technical difficulties, some participants recorded verbal consent. Parents were provided with the option to have a SENDCO or relative present during the interview for support and although held remotely, a room in the parents' respective school was also offered to facilitate the interview. One parent requested the interview schedule in advance.

Immediately prior to the interview participants were reminded of their right to withdraw at any time and were provided another opportunity to ask any questions. Verbal confirmation that the participant was still happy to participate was also obtained, if the participant agreed, the researcher began recording and started the interview. Interviews lasted between 30 and 120 minutes and were audio recorded before being transcribed verbatim for subsequent analysis. All interviews were conducted by the same interviewer. Once the interview had concluded, the participant was debriefed and was emailed a debrief form containing information on the data use of their data, how to withdraw, and available support. Participants were reimbursed with a gift voucher for their time.

2.5. Ethical considerations

Prior to data collection, ethical approval was obtained from the University of Sunderland ethics board and complied with the British Psychological Society ethical guidelines (British Psychological Society, 2021). Participants provided informed consent and were informed of their right to withdraw before, during, and up to a month after the interview. Participants were informed of the possible sensitive nature of topics that may be discussed during the interview prior to participation and could skip any question they did not feel comfortable answering, a school rep or relative was offered to provide support during the interview. The interviewer was attentive to potential signs of distress and discussed the parents' experiences sensitively, willingness to participate was assessed throughout and clarified with the participant if in doubt. Parents were provided the opportunity to ask questions and verbally consented to participate immediately before the interview after being reformed of the interview content. Contact details for the mental health support services were provided following the interview. Confidentiality was strictly adhered to throughout; all data were anonymised, identifiable information was removed, and unique participant codes were used to protect participants identity. All data provided was

stored securely on a password protected system in accordance with internal policies, funder requirements and the GDPR guidelines (2018), only accessed by the research team.

2.6. Data analysis

Data were transcribed verbatim and analysed using a six-stage thematic analysis framework, this was appropriate for the critical realist approach adopted within this study, allowing for the exploration of participants experiences while also considering how each individual experiences a different reality (Braun & Clarke, 2006). It has been argued that this approach relates to constructionism as it demonstrates how a construct develops (Joffe, 2011). To do so, deeper, latent themes were analysed within the data (Kiger & Varpio, 2020). Themes were identified inductively and derived from the data, this was most appropriate due to the limited existing research on the topic and lack of established coding frames (Kiger & Varpio, 2020). While the researcher cannot remove their preconceptions, effort was made to ensure analysis was data drive. Reflexivity was maintained throughout the process of the study to recognise and minimise potential bias and increase validity.

Analysis involved familiarisation with the data by repeated in-depth reading of the transcripts and noting of initial thoughts. Inductive line-by-line coding was used to manually derive codes from the data, adding meaning to words, phrases and sections of the text that were of interest to the study aims. This was repeated across cases. Codes were compared with each other and clustered into patterns based on similarity or relation to the underlying meaning, forming preliminary themes. Through further comparison preliminary themes were refined into themes and subthemes and were defined for clarity and understanding (see Appendix for table of themes). Physical copies of the codes and themes were used to assist with the process of grouping and refining themes and the associated codes. Data saturation was observed as similar experiences recurred as interviews progressed while demonstrating sufficient variation in the data.

Table 1: Interview Schedule

Question	Further prompts
Can you tell us a bit about how you first became involved in the meetings with Christine?	
What was it like before your meetings with Christine started?	What made you feel that way?

Question	Further prompts
How did you feel about your first meeting with Christine?	What made you feel that way?
How much did you feel listened to and heard during the meeting?	
How did you feel at the end of the meeting?	What made you feel that way?
How did you feel a few days after the meeting?	What made you feel that way?
How did it feel as the process continued?	Feelings at end of process
Thinking about things now,	
a. how is your relationship with the school?	Areas to probe: SENDCO, key adults within the school, multiagency professionals
b. how is your relationship with your child?	
In what way did you feel that your views and opinions have informed the planning?	
Have you noticed any changes in the way the school understands your child?	
Have you noticed any changes in the way you understand your child?	
What would you say were the positive aspects of the process?	
What improvements would you make to the process?	
Would you like to add anything else?	

3. Results

Results from the analysis of transcripts from interviews with parents revealed several themes and sub-themes centering around parents' experiences and perceptions of the Adults First Model. These results are presented in five key themes and sub-themes including:

1. Parental Involvement and Coproduction in Adult First Intervention
2. Influence and Role of Psychologist in Adult First Intervention
3. Importance of Multiagency Meetings in Adult First Intervention
4. Positive Impacts of the Adults First Intervention

5. Identified Areas for Development in the Adults First Model

Themes and sub-themes are narrated and supported by direct quotes from participants.

3.1. Parental Involvement and Coproduction in Adult First Intervention

Findings highlighted that parents' involvement was a key feature of this model and this was important to parents. Parents valued this involvement and felt they could offer professionals unique insight into their child and factors that may be influencing their behaviour. This enabled both parent and professional to develop a full understanding of the child which resulted in the identification of the child's needs and the necessary support. Three subthemes emerged in relation to perception of parental involvement and coproduction: acknowledgement of parent voice, parent as child's voice, and exploration of influential factors.

3.1.1. Acknowledgement of Parent Voice as Important

Multiple parents described challenges prior to the intervention, predominantly feelings of dismissal by school when attempting to seek support for their child, this impacted access to appropriate support. As the parents' needs often remained unmet prior to the intervention, this impacted parents' wellbeing. Four parents highlighted the need to be proactive and took on the responsibility of seeking support for their child, they felt that without this, action would not be taken and appropriate support to meet the child's needs may not be accessed. This highlights a potential gap in provision as adequate support is not easily accessible to some children and the importance parents placed on listening to parent voices to identify children in need of support:

'With school, it was always not feeling fully listened to and not feeling heard, feeling frustrated, feeling disappointed, and having to then try and pull in that support myself because, had we have gone down their route, she would have still been there now with no support or she would have been under a service that wasn't the right service' (P4)

'I think sometimes in schools teachers and other members of staff don't take parents' concerns seriously, even when things are really bad, you're just constantly pushed off and you're told 'it'll be okay, not to worry' like there's no major issues, it's like I was walking into a fight and everyone kept telling me it's okay.' (P11)

'before Christine came along [...] I-I-I did all the pushing, I got everybody around to the table' (P1)

In contrast, parents described feeling listened to by the psychologist within this intervention, this was attributed to her attentiveness to the parent. The psychologist reflected comments back to the parent and checked for accuracy, the parent felt that their understanding was prioritised and what they had to say was important to the psychologist. The psychologist ensured other professionals understood and acknowledged what the parent had to say, emphasising the importance of the parents input further as the psychologist advocated for parent voice within meetings. This acknowledgment was important to parents as it meant that effort was invested into ensuring they were heard and understood, and the approach felt collaborative:

'You can tell she's absolutely actively listening and the reason that you know that is she picks up on the pertinent detail, so you'll say something, she'll reflect it back to you, and then she'll break it down into, like, little things, and she'll look at that in more detail. You can tell that she's actively listening by how she reflects stuff back to you, how she looks at things in more depth, how she tries to problem solve stuff alongside you' (P4)

'Christine, and she's got a good way of translating what I'm trying to say as well, because sometimes I'll lose my words, and she's like, 'right so' and it's really helpful to be able to have somebody put into words what I'm trying to say' (P13)

The intervention provided parents with the opportunity to discuss their child with professionals and the parent placed value on their voice being acknowledged by the psychologist. This was due to the perception that parents could provide useful insight into the child as they possessed a relationship and knowledge of the child that is unique to the parent, knowing their child better than anyone else. They felt that including the parent perspective in this way meant that a complete and accurate image of the child could be developed as other parties, such as school, may have a contrasting perspective of the child and excluding the parent would lose this knowledge. This insight could increase the psychologists understanding of the child and their behaviour. One parent speculated that while they felt the parent was useful as the person most knowledgeable on the child, this role may not be suitable for all families due to constraints in the family's personal life and this requires consideration:

'She wants to hear your views and thoughts as a parent. She recognises that you're the closest person to that child and that you know that child inside and out so. So I certainly felt I

had the opportunity to speak and I had the opportunity to share and advocate for [child's name] ... 'I think the parents are the best people, absolutely great, are great people to do it, but they need to be emotionally able to do it. Not absolutely shattered or whacked because they've got that much other stuff going on, [...] It does feel like we can absolutely input and join in and all of that, erm I don't know if that'll be the case for all families because of every family's circumstance is so different' (P4)

'apart from having a visual of [child's name] and [...] having a 24-hour recording, there's no way that they could have had an insight or an understanding of [child's name] and how she works. So I was the closest person to be able to kind of offer that insight really' ... 'if they haven't got a parent there [...] how can you have a true image of something if you haven't got all, if you haven't got a helicopter view? If you've only got one side of it. Cause children behave differently in different situations and circumstances, don't they? A child might behave absolutely wonderfully at school and then at home might be completely different and vice versa' (P6)

Additionally, parents felt it was important that they could apply the knowledge of their child to determine which actions may be helpful or unsuitable for their child, and the parent could also feedback the effectiveness of implemented strategies, assisting with the assessment of their suitability. The parent was involved in decision making and their voice was frequently sought out to guide the actions taken based on their perceived suitability, assisting the psychologist to determine the most effective strategy and support tailored to meet the child's needs:

'She just made sure that I was involved, that when there was an action or something someone had, how did I feel about it, did I see any problems in it? I felt fully involved in the whole planning also after, you know, by the next meeting when we were reviewing what worked well, what didn't work well, it was very much, she always kept pulling it back 'so [P3], what did you think?' (P3)

'I would feedback how [child's name] was, what was going on, what I felt was best for [child's name], and then [...] we worked like around that. There was no point in putting like, there's no point in saying right we'll send [child's name] here and do this if it wasn't gonna work. Erm, or if I didn't think it was gonna work' (P6)

Through the intervention, the parent was provided the opportunity for their concerns to be heard and acknowledged by a professional who understood the context and presentation of their child.

Multiple parents highlighted this as important. This may be attributed to the relief brought about by the psychologist understanding and validating the parents' preexisting concerns and explaining the child's behaviour, when parents often felt their views had previously been disregarded:

'I felt like for the first time I had somebody who was listening to my views, to my concerns, taking them seriously, understood what was happening... I felt relieved. I felt like there was somebody there who was listening and she understood [child's name]'s difficulties really quick' (P11)

'straight away, Christine got the measure of her, erm and then so as a parent, to really feel that you've been listened to and heard, and it it just it, it means the world, and she did that so naturally erm and it makes you just breathe a sigh of relief. It feels like here's somebody who's actually... she gets it, she gets it.' (P4)

3.1.2. Parent as an Advocate for Child's Voice

Parents took on the role of representing/ acting as an advocate for the child's voice within the intervention. Parents felt it was important to be listened to by professionals as they could relay information between child and professional. Some parents felt they could offer insight into the child as they could discuss their child's thoughts and feelings on suggestions made by the psychologist and would feed back the child's views to the psychologist in the meeting. This enabled the parent to bring in the most accurate representation of the child's views as this was based on the child's own perspective:

'She tells me to always sit and speak to the kids and get their views, it's me talking for them' (P5)

'I was the vessel, if you like? And then when things would be suggested then I was the vessel to kind of suggest it back to [child's name]' (P6)

In addition, some parents emphasised the usefulness of the parent acting as the child's voice as opposed to direct child involvement. They felt this could reduce the emotional burden on their child that the provision of information via direct involvement may ensue. Professionals listening to the parent could provide a means of the psychologist understanding the child's needs and what was best for the child that may not be understood if the child was involved directly. As the parent and child possessed a strong relationship resulting in the child communicating with the

parent, this provided the parent insight into the child's perceptions. For some children that would not be able to express their needs or views directly, their parent voicing this on their behalf was felt to be vital to understanding the child and implementing suitable support to meet their needs:

'If [child's name] would have been in a meeting with anybody, she's completely she's selective mute, she wouldn't have said a word [...] My input was really important cause they could understand, you know, I could reflect back things that [child's name] had said, things that [child's name] had done erm, how [child's name] had perceived certain things' 'nobody knew what [child's name] was thinking only I knew what [child's name] was thinking cause she'd tell me after we'd been. So that was really important cause I was able to be [child's name]'s voice' (P6)

The parent felt this approach was *'better because without [child's name] being there, people didn't have the worry of upsetting [child's name]' and 'she gets to be a child and trust that the adults have got this'. By not including the child directly felt this 'filtered out what she [the child] needs to know, what's in her best interest to know, well she doesn't need to know that, so we do this, and she needs to know this... which is a lot better because then she has the information she needs about her, what she's doing, the plan, and she doesn't have to worry about all the other stuff.'* (P3)

Although the parent adopted the role of conveying the child's views and was central to this process, the parent felt that the intervention remained focused on the child's needs and what was in their best interests. The parent was a tool to understand and support the child and the focus remained on the child rather than other parties and what was most suitable for them. Remaining focused on the child within the intervention was important to the parent as it meant that the strategies and suggestions could be discussed and considered until the most suitable strategies to meet the child's needs could be identified, the best interests of the child remained paramount:

'She was very clear on how 'what would [child's name] say in that situation? what would [child's name] do in that-' so pulling it back to being centred around [child's name], but then, being adult focused and doing it in, you know in, in adult speak and adult erm, you know, guidance erm but then pulling it back to, 'but if you do this, this is how it's going to affect [child's name], if you do that, she's going to do this, so what else can we, what can we learn from this? What else could we do?' (P3)

'Everything was much more organised and you know, focused on [child's name] and his wellbeing. And not on, well actually the school, it's not right for the school. Not actually, it's not right for [child's name] so it was child focused, very child focused' (P7)

3.1.3. Ability to Explore External Factors Affecting the Child

The importance of working with parents and providing a space to be listened to was highlighted by multiple parents. This was felt to be due to the potential impact of external factors and experiences on the child's behaviour, of which the parent could inform the psychologist. One parent discussed how during the history taking process, the opportunity to explore the parents' mental health was important due to the potential impact of poor parent mental health on the child. It was felt that if a parent is struggling with their mental health, this may result in behaviours that impact their child and ultimately their behaviour. The parents' own needs must first be met in order to support and meet their child's needs and the situation cannot be improved for the child without first addressing the underlying issues causing the behaviour. To improve such a situation for the child, the parents' mental health must first be addressed, involving the parent in this way allows the disclosure of any struggles. By exploring the parent mental health and providing support to the parent to meet their child's needs, this can in turn influence the child and improve their behaviour and wellbeing overall:

'I work with my [relative] [...] she suffers from PTSD. Erm and Christine'll speak to her [...] about what she's going through and then try and work with her to help her get to a good level' ... 'if you're feeling down and you're you're feeling like you've got nobody, you can't be expected to look after your kids in that state, so if you've got someone that's understanding and listening to you, and then also trying to take care of you at the same time to make you stronger to fight for your kids, then that's gonna have a massive impact on the whole family' ... 'if you don't listen to the parent, you don't take into consideration everything that's going on, or... for her instance, she's got really bad PTSD she didn't leave her bedroom for months [...] so that's had a massive impact, because everything's sort of fell, and them kids are sort of in survival mode should we put it. So then they're fighting against everybody, but unless you sort that main issue, nothing's gonna change.' (P5)

Additionally, exploration of the child and the parent's history was mentioned by multiple participants as a valuable feature of this intervention. This was perceived as important as it meant that previous experiences and their potential impact on the child could be explored via the parent that may otherwise remain unknown, particularly as the child may not be aware to

disclose the impact of these experiences themselves. This meant the child and associated behavioural challenges could then be understood by both the psychologist and the parent. This intervention helped parents to further understand their child, connecting previous experiences with the child's current presentation and providing explanations for the child's behaviour that may not have previously been considered:

'there was a really big moment which she she offered that part of the problem was that my son had taken on a role of protecting me, and like subconsciously taking on this role of he has to protect me because there had been [...] domestic violence and things in our past, and so he had sort of become my protector and when he was at school, he wasn't with me, he was worrying about me, didn't know what I was doing or if I was okay.' ... *'he agreed and said yeah, he said it felt like a weight lifted off of his shoulders because he didn't know that that's what was going on. But he said that's it, once it was said to him, he just knew it, that's it, that's the problem'* (P12)

'she listened to us, and it was then when she come back with erm, as if she could see into [child's name]'s head and explained exactly how he is feeling, which then we all did cry because she was saying how he feels all alone and he doesn't feel understood by anyone. He's lost quite a lot of family members, so he's got attachment issues with that, how he's stuck from being a young child from his dad walking away and leaving him, erm he's not being able to move on from that' (P8)

As the intervention explored the influence of factors such as the child's history and background on the child's current behaviour, this helped the parent to better understand their child. The psychologist exploring these elements in relation to the child and their behaviour may produce connections explaining the child's behaviour that the parent had not previously confirmed. This could be challenging for parents, raising difficult emotions around the influence of these actions on the child:

'so [child's name] witnessed domestic abuse when he was a baby, and that's something that I've always kind of mentioned, I brought that up with professionals because I know professionally that that's important to mention because it might be impacting on how he's feeling now or all of that emotion, they carry that [...] to hear that back as one of the possible reasons why your child is having issues is really difficult to hear' (P1)

'as if she could see into {child's name}'s head and explained exactly how he is feeling, which then we all did cry because she was saying how he feels all alone and he doesn't feel understood by anyone' (P8)

All parents felt that the psychologist had developed an understanding of their child and their child's behaviour based on the information shared by the parent and professionals. Parents perceived the psychologist explaining the child's behaviour and why this was occurring as a positive element of the intervention, this improved the parents understanding and parents felt reassured that their child and their behaviour was understood through the utilisation of all perspectives:

'She seemed to understand [child's name] and his needs and what was going on for him off the things that people were saying.' ... 'she heard everything that was said, and then like, what she said she felt she then was able to relate that to [child's name] [...] I had confidence that she was taking the things that we were all saying as a group and then formulating kind of a bit of a picture about [child's name]' (P1)

'she is able to help explain what's going on and what might be going on in [child's name]'s head. So we are all able to work out what's going on and the way she wants stuff structured for him helps a lot as well. Because she's figured that there's a big, massive trust issue with that kid, and if we stick to the plans and this, that and the other, we will start to level out and gain some faith with him' (P13)

3.2. Influence and Role of Psychologist in Adults First Intervention

Parents highlighted the role and influence of the psychologist as important to the intervention. The interpersonal elements of the psychologist's interaction and approach with parents improved and facilitated the process. A positive relationship developed between the psychologist and parent, and parents felt supported by the psychologist. The psychologist helped support the implementation and maintenance of support through liaison with other professionals. Three subthemes emerged in relation to the influence and role of the psychologist: interpersonal qualities of the psychologist, influence of psychologist on parents' wellbeing, and liaison with professionals.

3.2.1. Interpersonal Qualities of Adults First Psychologist

Parents described the importance of the interpersonal qualities of the psychologist within the intervention. The psychologist developed a positive relationship with parents throughout this process and five parents highlighted her understanding, non-judgmental, professional stance. It was felt that an egalitarian approach from the psychologist was utilised, and this was important to parents as this meant that they did not feel that their parenting was criticised. Parents were not blamed for their child's behaviour and circumstances; all parents were supported equally without triggering feelings of shame:

'she works with people from all different backgrounds, but she treats us all the same, which is the most beneficial part of it, she doesn't treat you like, that you're neglecting your kids and talk down to you, and she's understanding of why you get to that point' (P5)

'She never made me feel stupid or, you know, failing or anything like that at all. She made me feel supported the entire time [...] and she's very friendly, even though she was very professional' (P12)

This egalitarian approach was highlighted by four parents who discussed the power balance maintained within meetings. Parents felt that within meetings, parents' voices were respected and valued by the psychologist. The levels of authority and power that professionals held over parents outside of the meeting were levelled, with parents treated as equals. Some felt this was an important element of the intervention as it provided parents with a platform to speak and be listened to, which for some was perceived as limited when engaging with professionals outside of meetings. This opportunity for dialogue was valued by parents and provided an element of control:

'your voice was as important as the teacher sat next to you' ... 'sometimes when, as a parent, when you're talking to a teacher [...] they make you feel like you don't know what you're talking about, and I think Christine changes that dynamic and it almost comes to the point where teachers are just like parents when Christine's around, just listening and and, you know, getting her expertise' ... 'sometimes when you are in meetings with lots of professionals, you feel they hold the power almost at some points and you feel they have power over you, but I think the way Christine communicated. It wasn't like that' (P11)

'she gives that opportunity for us to be a bit higher than the teachers [...] Rather than the teacher's taking control and-' '-telling us what's happening' (P8, P9)

Additionally, parents felt meetings were organised in a way that ensured information was extracted equally from all present. This provided a platform for the parents to discuss challenges at home freely and this was well received by parents, allowing parents to seek support from the psychologist directly. This was particularly valuable to some who highlighted how outside of these meetings, parent lacked the platform to provide their perspective without interruption:

'she goes around the table letting everybody speak one at a time, and everybody has their different opinions and voices, so it's nice that everybody can get it out' (P9)

'we got to talk and say exactly how things were, because if you go into school to say something, then they are talking back at you. Whereas with Christine, we got to say exactly like, what's happening at home and what the issues are without anyone interrupting' (P8)

The interpersonal qualities of the psychologist were perceived as important to facilitating the parents' engagement with the intervention. The psychologist created a safe environment for the parents to discuss their child. Six parents described how the psychologist's approach when interacting with them resulted in feelings of comfort and ease within the multiagency meetings. This facilitated openness and was felt to be important to parents as meetings with professionals could be challenging for parents and this discomfort limited communication. By creating feelings of comfort and safety, parent engagement and honesty within the meeting was encouraged:

'when you go into a meeting, you first go in with somebody and think they're gonna judge you on your parenting [...] and you feel that dreading feeling of, like, you don't even want to open your mouth or be honest with them, [...] some parents probably hold back, where she makes you feel at ease where I didn't have to hold back and I didn't feel like that' (P5)

'as a parent in this environment with these professionals, such as school teachers, SENDCO's, educational psychologists, it can be really daunting. But Christine, the way she communicates, you just felt at ease, you didn't feel as though you were out of your comfort zone' (P11)

Additionally, one parent expressed that the interpersonal qualities of the psychologist enabled the psychologist and parent to develop a trusting relationship which improved the interaction. This relationship was valuable to parents as it meant parents felt safe to be honest with the psychologist. This relationship facilitated honesty and collaboration, which was key to the approach and supporting the child. The parent felt that without this relationship, the process would be challenging:

'because of the relationship I was able to be open and honest about what I thought would be helpful' ... 'I was able to be open and honest cause I felt comfortable in order to do so.' ... 'That trusting, you know, relationship was really, really important as well. [...] If you haven't got that, if you haven't got those foundations of a good professional relationship, then it's not going to work. So I guess she laid those foundations as well' (P6)

The perception of the psychologist as a caring professional was also highlighted as important. Almost half of the parents mentioned that the psychologist cared about the families she was involved with and possessed a genuine desire to help. A psychologist who was invested in and cared about their cases was felt to be important as this meant there was motive and drive to take action, with greater attention to detail. This was believed to be influential in progressing by some and meant that parents felt supported:

'she's passionate as well about the cases that she has, I think that's why things get done. So to us parents, her input is is huge' ... 'She comes across as being passionate about trying to help out, making sure that she hasn't missed anything or whatnot, and I think you need that rather than somebody just having conversations with you as if they're just ticking a box' (P2)

'when you need somebody to be there for you [...] and then somebody just comes, you know, comes up and and puts their arm around you and, just says come on, it's alright I've got you. That's what it felt like. It felt like she cared, she was interested, she really wanted to help. She wasn't just there because she was being paid to be there.' (P12)

3.2.2. Influence of Psychologist on Parents' Wellbeing

The intervention was perceived as a positive experience by parents. Most parents highlighted instances where through this approach, the psychologist had provided them with some element of reassurance regarding their progress with their child, outcomes, or their own influence on their child. Reflecting the child's progress back at the parent and reiterating the possibility of progress was an important component in this. This reassurance was helpful to parents as it calmed worry and solidified the plan and possibility of progress while helping the parent to mitigate any blame around causes of their child's difficulties:

'it's that reassurance that people know what they have to do, people know when they have to have it done by, and we always set another meeting at the end of that meeting, so we know there's-it's going to be followed up and you know, as a parent, that reassurance is..

good. You don't feel like you're banging your head against a brick wall [...] you know... with the professionals not doing what they're supposed to do and it rolls over to the next meeting, rolls over to the next meeting, that is when your frustration kicks in' (P3)

'I thought that [...] we were never gonna achieve anything, we were never gonna get anywhere. That [child's name] would always be the way like, how she was and that she would never succeed in life [...], and I would be like, almost panicking and she would kind of help to bring me back down again and give me examples of you know, how that might like improve and again, reflect back the improvements that she'd already made' (P6)

'Christine helped me see the light at the end of the tunnel as the saying goes. She made me feel that everything, it wasn't all my fault, it wasn't all [child's name]'s fault' (P7)

Additionally, parents appreciated it when the psychologist provided alternative options for unsuccessful strategies and actions. This reassured the parent further that progress and improving the outcome for the child was still possible, and the psychologist would persevere to do so. This was important to the parent as the trial-and-error nature of support seeking could concern parents. The parent was previously concerned that professionals would cease their involvement in seeking a suitable solution for their child due to the lack of success and the psychologist's attitude could motivate all involved professionals. The psychologist improved upon this by shifting professionals' perspectives and highlighting abilities:

'if it doesn't work one way, she's like, okay, I've got this plan and we'll do it, we'll try this way, and she she's never defeated, and it's really nice because at times I felt like people were going to give up on him, and it's just a case of this kid's the way he is, sod it kind of thing [...]. And Christine comes in and just it's a case of we aren't giving up on him, there is a good kid here, there is, and she's been able to reinstate that for everybody, I think as well and just say look like, yeah, he's he's got his issues and he's this, that and the other, but he's a good kid and we can, with some support and help and some guidance, get him where we need him to be' (P13)

'we'd try stuff and I'd be worried that it wouldn't work and then be thinking oh my god like, what if this doesn't work, then what are we gonna do and she'd like, she'd reassure me that the, you know, we haven't exhausted everything that, and that they'd always be involved as well' (P6)

Multiple parents expressed feeling supported by the psychologist and this was another useful element of the intervention. Parents emotional wellbeing was considered, and parents no longer felt that they were alone on their journey to support their child as the psychologist was listening and providing support. The parents' needs were being met and they were no longer solely burdened with the pressure to find a solution as the responsibility was now shared with the psychologist:

“you feel like you're in really safe hands with her and it's, from a parent's perspective, that's just a lovely thing because you don't feel like it's going to be a fight anymore, and often with children who have needs within services, it can feel like you're in fight mode when you're not being listened to and heard” (P4)

‘I wasn't just left on my own. I had a support, I had somebody there. She seen it through to the end, she [...] made sure I knew that she wasn't just going to leave this. She was going to see it through to the end, I always knew that I wasn't just going to be left to figure things out myself.’ (P10)

3.2.3. Facilitating Liaison with Professionals

Parents identified one of the psychologist's roles to be liaising with other professionals involved in this intervention. This was perceived as important to ensure progress was initiated and maintained, support to meet the child's needs could be implemented when previously the child had gone without, and their needs remained unmet. Multiple parents felt that suggestions and concerns raised by the psychologist were listened to by school and other professionals, but parents were previously not listened to when raising the same concerns themselves. By discussing parents' concerns, the psychologist enabled progress to be made as this encouraged professional collaboration in seeking solutions. Parents felt the psychologist took on the role of liaising between the school and parent, this helped support to be put in place as the psychologist's input was perceived as holding greater weight and could voice parents' suggestions. Some felt this was influenced by the psychologist's professional role, however this did not guarantee she would be listened to:

‘there was certain points that I was trying to put across, erm, could we not try this, could we not try that, so different ideas really, but coming from a parent they didn't really respond to that, but coming from somebody like Christine Sketchley, they decided that actually they

would be better off to work with than against erm, and that's where things started to happen' (P7)

'if a professional's gonna make advice and recommendations, they're gonna follow that quicker, when I was making those same recommendations or similar recommendations, I was told that they can't do that because they're not specialist school.' ... 'they're not listening to everything Christine says, don't get me wrong, there's lots of things she's recommended that they've just not done' (P1)

It was felt that the psychologist held a level of authority when liaising with professionals, particularly in meetings and acted as a 'chair', steering and managing discussion while also holding professionals accountable when actions had not been completed as requested. Clear instructions were reiterated to professionals and the psychologist would problem solve solutions. The psychologist adopting this role of liaising with professionals to achieve the most effective outcome was well received by parents, potentially highlighting the need for a psychologist to coordinate support within the intervention and ensure progress does not stop since challenges with implementation may arise:

'she's the chair, and when she gets frustrated that [...] like two schools haven't come together 'well, how come?'-and she's very precise of 'how can the plan move forward if you have not done XYZ? We need to be' and she'll pull it back to what the focus is, she'll pull it back to what the agenda is, she'll pull it back to what the plan is and give clearer instructions of 'right, we need it done by the end of that week'. (P3)

'she does kind of like, put her foot down and say right, this is what we're doing, not this, and that's what I love about her' ... 'she's like the captain at the helm, she does just take hold of that wheel and makes sure we're all driven in the right direction with it all.' (P13)

Additionally, the liaison role of the psychologist was considered important by some parents as the psychologist could provide direction to schools on how they could best support and manage the child to attend school and access their education. This was valuable as it meant that school could utilise the psychologist's guidance as the school lacked the knowledge of the appropriate actions to take to meet the child's needs, resulting in the child accessing suitable support:

'once Christine became involved, she then gave school ideas and she, she was a lot more knowledgeable of what school had to do, erm, and ways that can help manage school' (P5)

'there's a cost for the school to put her in alternative provision and I feel like Christine gave them that insight and push that they needed in order to make that happen. Otherwise, they might have just dilly daddeld around it and said that they couldn't do it, or that they didn't have the funds or whatever cause she put it across, she was able to kind of articulate it in a way that, if she doesn't do this, well what else is she gonna do?' (P6)

3.3. Importance of Multiagency Meetings in Adult First Intervention

Meetings involving the school, parents and multiple different professionals were perceived by parents as important elements of the intervention. Within these meetings, discussions around the child and how their needs could be met occurred. The collaboration and information sharing from different professionals within these meetings was identified as useful by parents as well as logistical elements of the meeting. The two subthemes emerged within parent perceptions of multiagency meetings: value of professional collaboration and structure and features of meetings.

3.3.1. Value of Professional Collaboration

Parents highlighted meetings as a platform for information sharing, allowing the parent and all professionals involved to share their perspective and guidance to provide understanding, direction and to develop the most suitable approach to support the child and meet their needs. The contribution from professionals was considered important to parents as it meant various professionals' perspectives and knowledge could be utilised to identify the most suitable strategy available to support the child and their needs, and all professionals involved could be informed on the child's presentation and need for support:

'I think that's like a huge point of having that many people around a table in that they can all bring their own experience and all bring their approach really, and then you can work out with the child which one is the best one to take, and and we did a lot of that. We did a lot of that with [child's name] [...] It gave everybody the opportunity to put in what they could do and what they could offer, and then we were able to say, well, that is, the one that we feel as parents will work' (P4)

'a lot of these professionals unfortunately in the education system, the blame's on the child. So working with Christine and you know the schools, SENDCO and all these other professionals that have been pulled in and we've had education health plan and things like that, working with Christine and for her, I think she was standing up for him and she was

acknowledging his needs, you know, other professionals must acknowledge these needs'
(P11)

Multiple parents discussed the collaboration that occurred within the multiagency meetings between the psychologist, parents and the professionals involved in supporting the child. Collaboration between parents and the various professionals was considered important by the parent as this meant that all parties could work together to seek solutions to meet the child's needs. Parents felt part of a 'team' and parent and professionals supported each other in problem solving and seeking solutions for the child:

'she made sure that she also involved like the temporary provision, when he was at the other provision, they were involved in the meetings too so they all like, to try and all work together to try and get a solution for [child's name].' (P7)

'you felt that you weren't, they [school] weren't against you, you all work together as a team'
(P10)

Some parents shared appreciation for this collaboration between professionals as it meant that parents were not burdened with having to repeat or relay information from the psychologist to other professionals, which the parent felt may occur without these meetings. Parents did not have to chase up or take on a role of directing professionals, this was not the parents' responsibility as responsibility was now shared:

'having everybody on the same page and not having to repeat or try and relay messages or trying to get, well, you know, trying to say that the educational psychologist said this needed to be done by so and so, they were there, they knew what they were responsible for having to do. So, you know, it was brilliant really.' (P7)

Multiple parents questioned their ability to progress and achieve the goals necessary to support their child within education without the involvement of the psychologist and believed this had a key role in the positive outcomes achieved. One parent highlighted that for school to take action to support their child, psychologist involvement and guidance was necessary. It was felt that collaboration between the psychologist and school was needed for adequate support provision to direct the school on actions required. The parent felt that without the psychologist's support, the parent and ultimately their child's needs would not be acknowledged, and support would not be implemented:

'without Christine's help, I probably would still be shouting and screaming at somebody to try and get something done' (P2)

'without her, we wouldn't have started working on a coordinated care plan, we wouldn't have moved up to the educational health plan¹ and then that put a duty on schools to have to meet his needs. That wouldn't have been possible without Christine, or might have took a longer process and it might've be more difficult' ... 'without all that support from Christine, none of that would have been put in place, cause school would never, school have the knowledge, school can do this. But they didn't, and they don't until you've got someone like Christine saying this is what should be done' (P11)

Some parents perceived the school as adhering to or attempting to adhere to the recommendations made by the psychologist. Collaboration between the psychologist and the school was important to parents because when this collaboration occurred, it often resulted in positive outcomes as the school could action the needed support to benefit the child. The school were often the ones implementing strategies and they could change the approach with the child directly within school as requested by the psychologist. This support could result in a more positive experience and changed behaviour for the child. Two parents described highly positive experiences in working with school, where school were receptive to the psychologist's requests:

'I feel like they are absolutely trying, like they really are. Like we've got things on the coordinated support plan they needed to put in place for [child's name]'s transition and, and they were done like, they were absolutely, you know, let's do this, how can we do it, erm and working out times to do it and that kind of thing' (P4)

'they [school] put lots of things in place so that his day runs much more smoothly and they can talk to him because they devised a way of doing it sort of in a gentle manner as opposed to directly giving orders. They really sort of worked out a way based on Christine's suggestions to be able to deal with him in a different way so that he doesn't feel attacked and he doesn't feel, you know, under pressure' (P12)

¹ It is worth noting that the purpose of Adults first is not to facilitate the EHCP process but rather to support the child in the best way, in most cases (74% of children that did not have an EHCP at the intervention start, as documented by the council's internal system analysis) children are supported with a SEN Support Plus Plan and don't require an EHCP, but for some children it becomes evident this is the best route and the meetings therefore support this process coproducing the EHCP request and any subsequent plan.

3.3.2. Effective Structure and Features of Adults First Meetings

Logistical elements of the meetings were felt to be important to the effectiveness of the intervention by parents. The importance of setting an agenda within meetings was useful to direct and motivate professionals. Clear planning of actions and goal setting were identified as key elements which streamlined the process. Setting an agenda was important, as this meant that all involved were engaged with and understood the actions that were required of them to maintain progress in meeting the child's needs. Parents felt reassured that actions would be taken, and they would move forward in seeking support for their child with minimal barriers, however this reduced when other professionals did not adhere to suggestions:

'you feel like, coming out of the meeting, something's gonna be done, everybody in the meeting has agreed that this is what's going on for [child's name] and this is what we're gonna do about it. So for a couple of days [laughs] until, until you see that actually not all of it's been implemented erm, but for at least coming out of the meeting, you feel positive like everyone's coming away with something to do' (P1)

'everyone's got a clear agenda, everyone's got clear guidance, everyone's got, you know, timely set targets and achievable targets, everyone, it's, it's how you would write it in a book.' (P3)

Three parents mentioned the psychologist's involvement in meetings via Microsoft Teams, overall, this method of communication was well received. Two parents felt understood and connected with the psychologist despite the use of an online platform, this did not limit the effectiveness of the interaction: *'it didn't feel like she was on Teams, didn't feel like it, it was... a Teams meeting it, it felt like there was a connection there straight away' (P4)* and *'even though she was on Teams, I still felt like she looked at me and she listened to me and she she got me' (P10)*. One parent preferred if the psychologist could attend the meeting in person due to technical difficulties: *'sometimes technology lets you down and you can't get on, and then it takes up time out the meetings'* but understood that this may be impractical for the psychologist due to her high demand:

'But then she can't be round... how many schools does she even work in? [...] Like the the, I think her workload is far too busy' (P5)

One parent highlighted how adequate time for discussion in the initial meeting was vital to understanding the child and their behaviour and was appreciative of this element of the

intervention. Adequate time for assessment was vital to this intervention as it ensured all factors that may influence the child and their behaviour could be considered, increasing the likelihood that the correct conclusion for the cause of the child's behaviour would be reached:

'if you only have brief, small encounters with people, you don't really get right into sort of the root of the cause [...], you need all of the background kind of information' ... 'You need that time to be able to get all of the pieces into that picture' ... 'otherwise details might be missed and you may not reach that conclusion.' (P12)

Three parents expressed their thoughts on this intervention in contrast to previous experiences with other educational psychologists. This approach was perceived favourably, parents felt it was different to interventions experienced before. One parent felt that within previous experiences, as the psychologists understanding of the child did not consider the child's behaviour across settings, involved minimal discussion with parent, and did not explore the influence of external factors on the child, such as their history, this approach may have been less effective. The parent felt it was important that the child was understood, and within the current intervention it was felt that the assessment was in greater depth and the psychologist was actively trying to understand the child to prevent and address the behaviour, which had not previously been considered. The psychologist was focused and motivated by understanding and supporting the child. It may be more effective to explore and address potential causes of the behaviour via the parent than to address the behaviour separately outside of that context. As the psychologist could understand the child's specific needs and behaviours, causes of the behaviour can then be addressed using suitable strategies. One parent highlighted the meetings overall as different to previous experiences as the structure and methods of sharing information was felt to be more efficient and effective at capturing an understanding of the child. This was influenced by the coordination within the meeting and the utilisation of others insight on the child:

'when we've had educational psychologists, they've been out to see [child's name] and observed in school [...] and the meeting has just been like this is what I found from the observation and it's not been, no one's come to the house to see him or no one's dug into that past, it's just been a quick phone call, a visit to the school and then a list of actions, and it didn't feel like that, it felt like actually it's somebody that wants to know why he's working, how he is... and unpicking it from that point, rather than dealing with... the actions if you get me, so [...] what are the reasons for the actions rather than, like Christine seems to be

looking at the reasons, what's underlying rather than just dealing with the consequences'
(P1)

'It was different meetings, and the way Christine does hers is 1000 times better, 1000 times more productive, it's more timely, erm, the information is captured quite quickly, and the amount of information captured in one meeting is phenomenal. The way she works, the way she delivers the meeting, coordinates the meeting, everything about that meeting it is... maybe I would have four or five meetings with my, when my [name of child] was having his EHCP done and having educational psychologist involved, I would probably have four meetings capturing information to one of Christine's' ... 'the way she chairs the meeting, the way she captures the information, the way she recites, you know, previous meetings, what the feeling of the child, the voice of the child, what people have said. You know that whole capture all together, gelled together, is just brilliant. That is what makes that different to any other.' (P3)

3.4. Positive Impacts of the Adult First Intervention

For most parents, the intervention had a positive impact on the child's engagement with school. The intervention also influenced the parents' relationships with their child and school, and the parent and school's understanding of the child. Multiple parents felt the intervention had also impacted on themselves. Four subthemes emerged within the impact of the intervention, child's engagement with school, impact on parents' relationships, impact on understanding of child, and impact on parent.

3.4.1. Improvements in Child's Engagement with School

Most parents described their experiences prior to the intervention negatively, highlighting how their child's needs were unmet and this resulted in reduced access to education. This led to involvement with the current intervention, which improved the child's engagement with school:

'before Christine became involved, it got to the point where when my son was in the school, he wasn't actually in a classroom. He was sat in a headteacher's office on his own, not learning, so there was literally no point in him in him being there cause he wasn't happy, he'd become withdrawn. It was quite a worrying time' (P7)

'he was just getting into trouble in all of his lessons or he wasn't going to his lessons and just just everything seemed to be going on a massive downward spiral for him quite quickly

[...] erm and then Christine's services somewhere along that line were sought out' ... 'he was getting suspended nearly every day.' (P12)

For nine of the parents, their child's engagement with school had either improved to some degree, or parents were hopeful that their child's engagement would improve in the future. This included their child now accessing education, moving into a suitable provision or improvements in their child's behavior. Parents valued their child accessing and enjoying education:

'She got my child a place at a, somewhere where nobody else thought of nobody else knew. Erm, and she fought for funding, she fought for everything, and it's been the making of my son. He's come out so much, he's thriving.' ... 'It's positive, [child's name] wants to go to school' ... 'He's quite happy to go to school, he enjoys it, he doesn't stay off like he used to.' (P10)

'I've got a more confident and more happy outgoing child, who's much easier, you know, he's happy to come to school and is not getting into trouble much at school now. So the the positives are just that it works and that it's it's it's changed our lives for the better' (P12)

Three parents expressed their concerns for their child without the psychologist's involvement and what the alternative outcome might have been. Parents feared that without the psychologist's investment into their child and the understanding provided via this intervention, their child may not have access to a suitable education. The intervention improved their child's behaviour or identified suitable provision and support which prevented the child from no longer having access to education:

'to us parents, her input is is huge. Otherwise, he'd probably still be at mainstream. Probably mainstream education or college, which wouldn't work at all, or he'd be in and out of the education system' (P2)

'I think we would have probably reached a permanent exclusion by now for my son if it was a case of not having Christine in the picture because I think she's really the the glue that's holding this together for us at the minute when it comes to keeping him in school.' ... 'it's just her guidance and her, her ability to help school understand that although he seems like a naughty child and he's just a disobedient child, there's a lot more at play than that' ... 'that kid could go in school and be excluded within 20 minutes of being in the school building, and now we haven't had that for a while, and I do believe that due to Christine explaining that he's just not a classroom kid' (P13)

3.4.2. Improvements in Parent/Child Relationships

Seven parents felt that the intervention had improved their relationship with their children, this was perceived as due to the increased understanding the parent had developed and the approach the psychologist had recommended the parent adopt. As the parent now understood that the child's behaviour was not a deliberate choice, the parent responded in a less confrontational manner:

'We can see when he's feeling really anxious because of his hand movements [...] so we could see how we was reacting to that situation, whereas before this, we'd have just thought he was being naughty, which again has really helped our relationship with him.'
(P8)

'now I'm starting to understand him a bit more and he understands my frustrations a bit more. We are getting a lot more closer again, so that that is a lot better than what it was because it did become really difficult for the pair of us bless us we were clashing, bumping heads' (P13)

Five parents felt that their relationship with school had improved since their involvement in the intervention. This was felt to be due to the school's improved understanding of their child and parents now feeling listened to by school as trust had developed. Relationship improvement was limited by parent's frustration with school for not completing actions as requested:

'I would say slightly better in the sense that, they understand more now. However, I'm also very frustrated with them that they're not doing what Christine's asked them to do. I think it would be 1000 times better if they'd actually done everything that Christine had asked' (P3)

P8: 'It's a lot better to what it used to be' P9: 'Yeah, it has got a lot better and I feel like they do listen a bit more' (P8, P9)

Five parents felt there had been no impact on their relationship with school. Some highlighted that despite the psychologist's attempts to build upon this relationship, the school not completing actions as requested by the psychologist resulted in frustration which prevented the relationship from improving. Others felt they had a positive relationship with school, this was due to the perception that school was open and had tried to support and understand the child as much as possible:

'I think we have a really good understanding and a good relationship with each other based on the fact that we just lay everything out on the table and say look, that's how it is' ... 'they [school] couldn't have done any more for him, to be honest.' (P12)

'sometimes it becomes stressful because I get frustrated because she's [Christine's] trying to build those bridges and build, make those relationships better and then obviously because I feel that school aren't taking on board what she's saying, [...] that kind of gets a bit frustrating' (P13)

3.4.3. Improvements in Schools' Understanding of the Child

Seven parents felt that the school's understanding of their child had improved to some extent since the intervention as the psychologist could inform and educate the school on the cause of the child's challenging behaviours. The psychologist supported the school in identifying the behaviour as an underlying problem rather than a behavioural choice. This understanding was felt to be important as it meant that the child's difficulties and need for support could be recognised by the school:

P9: '-it gave the teachers a whole new understanding of [child's name] as well.' P8: *'and that it wasn't just him being naughty, it was him struggling within school and at home.'* (P8, P9)

'her guidance and her, her ability to help school understand that although he seems like a naughty child and he's just a disobedient child, there's a lot more at play than that and she's able to bridge that gap of the the, that he's not just like I say a naughty child' (P13)

The school possessing this understanding of the child was important to parents as this meant the school could provide the necessary changes to meet the child's needs. The school could recognise that the child's behaviour was not a behavioural choice and understood that support was required. This meant professionals within the school could respond accordingly, providing appropriate support to the child and changing their approach to one more sensitive and considerate of the child's needs:

'she called him as having an emotional block. Now that has really stuck with school, so they have really then changed the way they're working with him and to consider his emotional needs, rather than kind of managing an angry child, erm they've really, they talk about his emotions and how he's processing that, they talk about if he has a big cry or if he's not cried

at all like all of those things, whereas before they wouldn't have even kind of thought about that' (P1)

Nine parents felt that their own understanding of their child had improved since the intervention. The psychologist educated parents on their child and their thought process and affirmed that the behaviour was not a choice made by the child. This highlighted the child's needs, informing the parent that the child was struggling with unmet needs and found it difficult to complete what was required:

'she gave us all that new understanding of how he works and so it's, rather than just thinking, is he putting it all on? She confirmed that he's not' (P9)

'Christine helped me understand that it's not that easy for him and he might want to do that, but it's not why he's reacting, like, he's not just doing this to try and upset everybody or anything like that. And she's definitely helped that understanding with him there' (P13)

This improved understanding often enabled parents to change their approach with their child to one more suitable to the child's needs. As the parent could now understand the child's behaviour and the associated needs, the parent could respond in a way less likely to cause conflict for the child, this encouraged the child to engage. Parents could manage and respond to challenging behaviours differently, such as providing the child time to self-regulate or remaining patient and reflecting on alternative actions:

'I have a lot more patience with him' ... 'before I would have been like no, absolutely not. Like, move. Like, stop, stop messing about like that and do as you're told type of thing. Where now I have more... the more you go on at him, the more he goes into himself so I have more of an understanding not to go on at him. But I do have to talk to him about it, so I will go back to him. And that's another thing she sort of taught me to do, is to like, give him that time to self-regulate and then discuss it' (P5)

'when he tells me he doesn't know why he's done something, it's a case of I don't now go 'what do you mean you don't know? Like you must know?' now it's case of okay, well, let's figure out what led you to that so we can then we go back over and we break down like, why, and how the day's gone and what his choices were and what his opinion was. And I can now look at him and we can have a talk and say well, instead of doing that and reacting like that so you don't know why we reacted like that, maybe we should step back and reapply ourselves to it differently.' (P13)

3.4.4. Positive Impacts of Adults First for Parents

Many parents described the negative impact of their child's unmet needs and the process of seeking support for their child prior to taking part in this intervention. Parents often identified feeling responsible and having to be proactive to find and access suitable support for their child. When the support was not implemented and the child's needs remained unmet, this negatively impacted parents' mental health. Parents felt that they were not progressing when attempting to seek support and this impacted their wellbeing and other areas of their life, such as work:

'life was quite hard, it affected my work. I had to, I went on the sick for a bit' (P10)

'I think up until that point, my own well-being was being affected. I felt as though I was fighting a losing battle and I wasn't heard and I wasn't, my concerns weren't taken seriously. So the impact on me was massive and I think she stepped in at a time where my well-being mentally was at an all time low.' (P11)

In contrast to this, many parents described how they were able to move forward in seeking or accessing the necessary support once they accessed the current intervention. The parents' perspective shifted from feeling that they were not progressing to viewing the situation more positively as though things were starting to work successfully or were hopeful for this change in the future. This was attributed to the psychologist's knowledge, access to and provision of support:

'as a parent, I was getting absolutely nowhere, erm, there was no communication with school [...] and with no stability in the support being provided to [child's name], we just seemed to be on this carousel going round, and round and round and round and there was no change' ... 'when I asked for Christine, that carousel broke' (P3)

'I think when it came to before Christine stepped in, I thought, oh, we're we're done, like we're just gonna go around in circles, and then Christine [...] she comes in and she opens more doors really and says that it, where you think you've got that wall and you can't get over it [...] she gives you a ladder to help get over that wall and if that wall builds a bit higher, she'll extend that ladder for you.' (P13)

Additionally, half of the participants described feelings of relief or hope after the initial meeting with the psychologist. Parents felt relieved that the challenges currently experienced may

change now due to the direction provided by the psychologist, and were hopeful for progress in their child's access to suitable support and education:

'I felt hopeful that there might be some, some positive movement and change for [child's name] and that good things might come off the back of, off the back of that because we all had some actions to take away and do and try' (P1)

'from that first meeting, it was like, oh my god, thank goodness that we've got a plan, people have got stuff to do, we know where we're going with this, we know what the next steps are going to be. So for me it was... reassurance that we're not going to be stuck on this wheel, some something is going to happen, we're gonna get off this wheel.' (P3)

Some parents described feeling empowered by the psychologist within meetings in the intervention. As the psychologist listened to the parent, recognised their insight, and sought solutions for their concerns, parents felt they were provided with a level of power that for some, was lacking prior to the intervention. Meetings with professionals were perceived as daunting to some parents as parents felt they were disadvantaged and in a situation beyond their capabilities. This highlighted the importance of parent feeling empowered within the intervention as it improved parent comfort and confidence to engage within meetings:

'the mood completely sort of shifted from me going in feeling like I could potentially be on the back foot, to feeling actually empowered as a mum and that she'd given me a level of power back, cause I'd felt disempowered for a very long time and she suddenly was looking at what the struggles were, 'but how can we problem solve that then? how can we look to change that? what can we all do in this room now to make that better for [child's name] and for you guys as a family?' (P4)

'she made me feel empowered that actually, you know your son and what you're saying is key. So she made me feel empowered, she made me feel that what I was saying was important and it should be listened to. That's how, that's how she made me feel because you know, I got it from her that, you know, you're his parent, you know what's going on better than any of us. Yeah, I think just the way she communicated as a whole, sometimes, getting back to this thing about being in a room with lots of professionals, you can feel as a parent um totally out of your depth, but Christine just puts a different spin on it' (P11)

Four parents shared their desire for greater access to this intervention as it was felt to be useful to families. Parents recognised the benefits of this approach and the need for it to be more widely available:

'I wish we could clone her, like there's not enough of her in Redcar and Cleveland. It would be lovely if we could clone her and clone the approach she takes and have more of her' ... 'she makes a difference' (P4)

'having more of Christine [laughs] doing it, she's very, very good at her job. But there isn't enough, there isn't enough in my area that, that do the same job as Christine. Hire more people and she needs to train them up' (P5)

3.5. Identified Areas for Development in the Adults First Model

Some parents identified areas for improvement within the intervention. This included challenges with collaboration, more frequent or longer meetings, direct child involvement, and ensuring the parent understands the intervention prior to participation.

3.5.1. Challenges in Collaboration Between Parents and Professionals

Despite professional collaboration being identified as an important element of the intervention, this was not always successful. Some parents identified challenges with collaboration between professionals in meetings, this included professionals not attending meetings or not completing actions as requested by the psychologist. This emphasized the importance of professional collaboration to parents; it was necessary for the intervention to be effective. When collaboration did not occur, information sharing, and the implementation and assessment of support was inadequate:

'they were invited every single meeting and then never came to any of them, and yet they're the ones that need to make the decision, and then say, 'ohh well on paper he sounds like this'. Well, yeah, on paper, everybody sounds completely different to when you actually see them in real life' (P2)

'we've had three meetings and nothing's moved forward. [...] Christine's advice and guidance just isn't being moved forward by the services involved erm and that's, that's their failings, not Christine's' ... 'the failing is with the collaboration and coordination with the other services to follow what Christine's been asking for, erm, you know, the review, the

communication between meetings and meetings with Christine, unless we've got... the professionals working with that plan that Christine set, we're failing to make change.' (P3)

The school's role of collaborating with professionals regarding support provision and implementing strategies and actions to meet the needs of the child was vital to the success of the intervention, this was evident by multiple parents. However, seven parents perceived the school as facing challenges with collaboration and this was an element identified as requiring improvement to increase the effectiveness of the intervention. Parents felt that actions or strategies requested by the psychologist would not always be completed by schools and this limited progress in supporting the child in education. Some parents perceived this lack of collaboration as influenced by systemic challenges in the school, as the structure and systems within schools limited capacity for implementing support:

'even though Christine was giving them ideas and advice, I don't think, I don't think school was in a position to manage any of them, if you know what I mean? But only purely because I think that's mainstream school and they are so strict and so rigid with their processes and everything' (P2)

'I'm trying to explain to them that he's not naughty child, there's some, there's a reason behind his behaviour and Christine'll listen to me, what I'm saying, and then offer strategies. But the school aren't always following them, so it's like, I'm going round in circles.' (P5)

One parent felt this may be improved by introducing a coordinator between meetings to troubleshoot potential barriers to the implementation of actions suggested by the psychologist.

Although parents identified the psychologist as a means of holding professionals accountable when actions were not completed by the professionals, this was not always fruitful. The psychologist was not always successful at overcoming this despite her efforts, this was felt to be due to the psychologists' lack of power to force professionals to adhere to suggestions:

'not saying it worked all the time because you know it's not up to Christine, you know, Christine can't make them put that into fruition, but she did try' (P6)

Additionally, one parent felt that an opportunity for holding professionals accountable when actions were not completed was missed by not exploring actions discussed in previous meetings. This would be useful to review the implementation and suitability of suggestions made by the psychologist:

'actions from the previous meeting are never then discussed at the next one. So there's lots of kind of positive thoughts and stuff, but then it's not like, 'oh, how's', cause actually if then it was then discussed at the next meeting, Christine would know that school haven't put him into art therapy or there would, like, it's those bits and bobs where actually there's no evidence of it' ... 'there's an opportunity for accountability I feel that's... being missed a little bit, in terms of right we said we were gonna try this, this and this, what's been done, has it worked, can we scrap it off, are we moving forward, that kind of, just a quick almost like a checklist at the beginning, and then right okay so what's happening now' (P1)

3.5.2. More Frequent and Longer Meetings Required

The length and frequency of meetings with professionals was perceived as inadequate by some parents. Multiple parents identified the need for more frequent or longer meetings within this intervention to ensure adequate time to discuss all the necessary information, and to provide opportunities for challenges with implementation to be addressed by the psychologist. Some parents felt that more frequent meetings could decrease the time without action being taken by professionals as it would provide the psychologist more opportunities to troubleshoot and hold professionals' accountable when strategies had not been implemented. Some parents' felt that the psychologist's busy workload influenced this, resulting in delays to booking new meetings:

'I think maybe a little bit more time for the meeting. I think it was already an hour long, but given that we've got a few professionals there, we had a lot to talk about in terms of his transition [...], perhaps the meeting just being a little bit longer to, to allow those discussions would have been helpful' (P1)

'when a child's having that many issues or a lot going on, then how do you tackle that in one meeting, and then you're waiting three months for another meeting' ... 'I think to make it better, I think if we had more regular meetings, more of Christine, that authoritative figure that schools have to follow, so then they can be made to follow it' ... 'we'll, put strategies in place and then if they don't work, school will stop and revert back... until we have the next meeting. So that's the only criticism I have because they're not, they're not consistent enough, but that's not Christine's fault, it's the workload she's got, that's where we struggle to get new meetings in' (P5)

One parent described an instance of feeling dismissed when raising concerns around their child's behavior at home during a meeting with the psychologist. The parent felt that the school's

perspective of their child was considered more than their own. Limited time within the meeting was identified as a potential influential factor, further emphasising the importance of adequate time within meetings to address all concerns raised by those attending:

'I'd seen a real decline in his behavior over the last two weeks before erm, at home' ... 'and I'd raised that, and then school said oh well we haven't seen that at all.' ... 'what I was seeing, wasn't necessarily taken into account as much as what school was seeing at that point' ... 'I was a little bit frustrated at the last meeting and the things that I'd raised weren't necessarily considered, I think we'd ran out of time' (P1)

3.5.3. Parental Understanding of the Contents and Requirements

The importance of the parent understanding the content and requirements of the intervention prior to involvement was identified as an area for improvement by two parents. One parent felt that as components of the intervention could be emotional for parents, prior knowledge of this would be useful to ensure adequate preparation. Another parent highlighted that this lack of understanding may result in parents perceiving the intervention as negative and act as a barrier to engagement. To ensure parents are equipped and prepared to deal with the emotional impact of the intervention while maximising the number of people engaging with the service, an explanation of the model prior to any involvement was identified as useful:

'Christine obviously takes a very different approach and I wasn't armed with that knowledge' ... 'I think an explanation of what the adult first model is that prep-, even like just a note or a letter or a phone call, just to let you know this first meeting might be emotional' ... 'luckily I didn't have anything on after, but for me sometimes I'll go from one meeting and another to work and [child's name] meetings are squashed in and I would have really struggled then to go into another meeting from work after having big tears in a Teams' (P1)

'I went into it blind, I had no idea what was going on, but because I was so open to suggestions, I didn't care. But other people might be a bit more reluctant [...] to accept the service, because they don't know what it's about. So maybe yeah, a good explanation of what to expect and what the service is would maybe be a good thing to add.' ... 'because they might think that this is going to go against them when actually, it's absolutely the opposite. Some people would be a bit afraid that it was a negative thing when it's not' (P12)

3.5.4. Absence of Childs' Voice

Although the parent representing the child's voice was valued and some parents felt this was key, two parents felt that the child should have direct involvement in voicing their thoughts to some degree and raised concerns around the accuracy of their own perceptions. As the parents' perception of the child and their behaviour was influenced by their own perceptions and potential bias, parents were concerned that the image of the child provided to the psychologist may not be accurate to the situation and this may result in the provision of unsuitable support or unmet needs, and to increase this accuracy, the child could provide some level of input. One parent highlighted that direct involvement may also provide the child with feelings of control, which may be particularly beneficial for older children/young people. Self-awareness and the involvement of others' perspectives were highlighted as influential in ensuring accurate perceptions of the child within this intervention which were necessary for success:

'I didn't want to over exaggerate any need or not represent him fairly, but because I was aware that could be a possibility, I think I prevented it. But I think in other circumstances that might be able to happen.' ... 'But we've also got a few professionals round the table so. It's not, you know, I think teachers can chip in if they think something's not being said accurately' ... 'Sometimes parents can really over exaggerate a situation and you've got to be careful not to do it. It's not that you're intentionally doing it, you feel it's this bad. You know, that was a concern for me and I think the child's perspective should be taken somewhere' (P11)

'You never truly know what somebody's thinking and how they feel it's going. So where I'm sat there going, oh, yeah, it's going really well, as far as [child's name] could be concerned, he could be like, no, it's not actually mum and this isn't working and that isn't working, and I just think every now and again maybe that little bit of input' ... 'especially for teenagers, when they feel everything's spiraling out their control anyway' (P13)

4. Discussion

This report presents findings from an evidence gathering project into the efficacy and effectiveness of Adults First, a novel, school-based, educational psychology intervention supporting children and young people with social, emotional and mental health needs, and their parents, within Redcar and Cleveland. The aim of this project was to gather insight from parents/ carers, who have participated in the Adults First intervention within Redcar and Cleveland, to establish key elements of the Adults First model to be explored further, forming

the foundations of a full-scale evaluation. Semi-structured interviews were undertaken with parents/carers with the aim of better understanding the experiences of parents/ carers involved with the Adults First model and establish the successful aspects of the approach and areas for development. Findings provide a unique insight into the Adults First model, exploring the experiences, views and perspectives of parents participating in the intervention.

4.1. Importance and Benefits of Parental Involvement in the Adults First Model

Parental involvement was highlighted as a key element, parents felt it was important for the psychologist to acknowledge the parent due to the unique insight they could provide regarding their child's perceptions, history and the wider family context that may impact the child's current presentation, such as parent mental health. The focus on understanding the child in the context of their current and past experiences was useful for addressing the child's current challenges. For some, this was the first time the parent felt listened to by professionals regarding their child's needs, highlighting the value of listening to parent voices to identify children requiring support. Exploring these influential factors via the parent was useful in developing a complete and thorough understanding of the child, often leading to understanding and identification of the child's needs and access to required support. By engaging with the parent's comments and ensuring other professionals understood the parent, the psychologist made the parent feel valued and involved.

4.1.1. Benefits of Parental Advocacy for Children

Within their involvement, the parent was an advocate for their child. A key benefit of utilising parental involvement in this way was the opportunity for the parent to act as a means of the professionals understanding the child when the child would be unable to communicate if involved directly. Parents felt this was vital to understanding the child and implementing suitable support for such children. Parents were involved in decision making and parent perspective was frequently sought out, this was important to parents as it provided the opportunity to assist in determining the most appropriate support to meet the child's needs. Parents' relationships with their child frequently improved, this was attributed to the new understanding of their child obtained through the intervention.

For many parents, the intervention shifted their perspective from feeling as though they were not progressing in supporting their child to one of hope, where parents felt positive change could

occur. This was attributed to the access to support and understanding the intervention provided. Parents felt relief at the potential for their child to be supported and access education. Some described feelings of empowerment from being listened to and engaging with the psychologist regarding their concerns, this empowerment may increase parent confidence and engagement with the intervention. The need for greater access to the approach was recognised, highlighting the perceived benefits and positive impact of the intervention for others.

4.1.2. Improved Parental Relationships with Schools Leads to Better Understanding of Child's Needs

The parents' relationship with school improved for some, parents felt this was influenced by the intervention changing school's perspective as they now understood the child or listened to the parent. For parents whose relationship with school did not change, this was felt to be influenced by the pre-existing positive relationship with school, or parent frustration with school preventing /improvement. Developing positive relationships between parents and school is important, as positive relationships between parent and school may be key factors in improving emotionally based school non-attendance (Corcoran, Bond & Knox, 2022).

The intervention was perceived to have improved both parents and school's understanding of the child for many. This was felt to be due to the new perspective the intervention brought, recognising that the child's behavioral challenges and difficulties within school were not a behavioral choice and the child was struggling with unmet needs. This understanding often resulted in a change in approach with the child by parent and/or school. The understanding of the child's needs and presentation was used to identify a more suitable approach for the child, and this was adopted, often with greater success.

Child's engagement with the school improved for many, the child had or was in the process of accessing a suitable education, had improved behaviour within school and was happier with a desire to attend. Some parents raised concerns that without the intervention, their child would have been out of education. Not all outcomes were positive, although some improvements had been made, some parents felt that their child's access and engagement with school was limited due to challenges with collaboration between professionals or the school.

4.2. Importance of the Interpersonal Role of the Psychologist in the Adults First Intervention

The role of the psychologist was another key element of the intervention, the psychologist's interpersonal qualities were felt to be crucial to facilitating the intervention. The psychologist adopting an egalitarian approach was important to parents, as parents felt they could speak freely without fear of judgement or criticism. Additionally, the equal power balance between parents and professionals within meetings resulted in parents having a platform to speak and be listened to which for some, was not perceived as occurring outside of the intervention. The psychologist created an environment where parent felt safe and comfortable, this was felt to develop the relationship with the psychologist and facilitate honesty and collaboration between parent and psychologist. This was valuable, as parent honesty was identified as necessary to the success of the intervention. Parents perceived the psychologist as possessing a genuine desire to help and this was felt to increase the psychologist's interest and motive to support the child.

4.2.1. Importance of Psychologist's Relationship with Parents

Parents felt that the psychologist had provided them with reassurance and reduced responsibility on the parent. This was important to parents as it supported them in mitigating challenging emotions triggered by their child's situation and provided feelings of support and reduced pressure. The psychologist was felt to be responsible for liaising with the school and other professionals in the intervention and this was key to the success of the model as it ensured progress continued when seeking and trialing potential support strategies to meet the child's needs which for many, were previously unmet prior to the intervention. The psychologist held professionals accountable when actions were not completed as necessary by the required date, this was important to parents as it enabled problem solving to find solutions to any challenges or barriers that arose. The psychologist could provide direction to school on actions to best support the child within school to enable them to access education.

4.2.2. More Effective Multiagency Meetings

Effective management of multiagency meetings was another element highlighted by parents. Within the multiagency meetings, collaboration and information sharing between professionals was valuable to parents as this enabled the parent and all professionals to share their unique perspective and knowledge to work together to understand and support the child and their

needs. Parents felt the role of school was to implement recommendations made by the psychologist to support the child in school. This collaboration, particularly between the school and psychologist, was identified as necessary for progressing in support access and provision and enabled positive outcomes to be achieved. Collaboration between professionals was also valuable as this reduced the perceived role of the parent, information sharing within meetings meant the parent did not have to adopt the responsibility of ensuring professionals understanding of their child. Setting a clear agenda within meetings was useful to parents, this clarified the actions required of each party and ensured all professionals knew what they had to do to work towards meeting the needs of the child.

4.3. Areas for Development of the Adults First Model

Parents identified several areas for improvement and potential within the Adults First intervention. These included challenges in collaboration between stakeholders, need for longer and more frequent meetings, better parental understanding of the Adults First model and parental requirements, and the absence of the child's voice within meetings.

4.3.1. Challenges in Collaboration Between Stakeholders

Challenges arose with collaboration between the psychologist and other professionals. This included professionals not attending meetings or not completing the necessary actions required. This slowed or stalled progress in the implementation of actions to support the child and parents felt this required improvement to maintain progress. School faced the most challenges with collaboration and parents perceived school as struggling to make the changes requested by the psychologist. Parents felt this was particularly important to improve as the lack of collaboration prevented progress. One parent voiced their desire for the implementation of actions from previous meetings to be discussed as this could provide accountability when actions had not been completed by professionals. Although the psychologist made attempts to hold professionals accountable and encourage action, this was not always successful.

4.3.2. Need for Longer and More Frequent Meetings

Longer or more frequent meetings with professionals were suggested as improvements by some. It was felt that on some occasions, time limits would prevent full discussion from all parties, and longer meetings would ensure all necessary information was discussed. Adequate time to discuss the child in-depth was valued by parents. As one parent did not feel listened to

within a meeting and this was potentially influenced by the limited time, the need for adequate time to allow full discussion by all parties was highlighted. More frequent meetings would provide the psychologist with more frequent opportunities to chase up actions and ensure progress was maintained, resulting in shorter periods without progress. One participant referenced the psychologist's limited time and how she was in high demand, this may influence the psychologist's capacity for more frequent meetings.

4.3.3. Improve Parental Understanding Prior to Intervention

Informing the parent of the model and its content prior to participation was suggested as an improvement. By informing the parent in advance, the parent could prepare for any potentially emotional discussions that may occur and take actions to support their wellbeing. This may also influence parents' engagement with the model, as without prior understanding, parents may be reluctant to participate due to misconceptions or concerns.

4.3.4. Absence of the Child's Voice

Although the parent representing the child's voice was a key element of the intervention for parents, two felt that the child should also have some level of direct involvement. Parents were concerned about the influence of their own perceptions and bias on the image of the child and their situation that they were providing the psychologist. By occasionally including the child directly parents felt this may increase their comfort and could confirm the accuracy of the information shared as it could be obtained directly from the child without the influence of the parents' perception. This involvement may also benefit the child as one parent highlighted the sense of control it may provide, particularly for older children and young people. As parent attitudes towards direct child involvement varied, a level of involvement tailored to the child and their need and capacity may require consideration.

4.4. Conclusion

This report presents findings from an evidence gathering project into the efficacy and effectiveness of Adults First, a novel, school-based, educational psychology intervention supporting children and young people with social, emotional and mental health needs, and their parents, within Redcar and Cleveland. The aim of this project was to gather insight from parents, who have participated in the Adults First intervention within Redcar and Cleveland, to establish key elements of the Adults First model to be explored further, forming the foundations

of a full-scale evaluation. The findings from this project have provided a unique initial stakeholder insight into the efficacy and effectiveness of the Adults First model from the perspective of parents. This insight work is intended to be the first step of a research journey to understand and evaluate the effectiveness of the Adult First model.

The ability to generalise findings is reduced due to the specific focus on the Adult First model, the collection of data from one stakeholder group (parents), and from schools within one regional areas of the UK. However, it should be noted that the aim of this report was not to infer causality or wide-ranging generalisation, but instead to present a descriptive overview of the experiences and perspectives of parents participating in the Adults First model within Redcar and Cleveland. The findings, which may be transferable to other regional areas, stakeholder groups and educational settings, will underpin subsequent research and evaluation of the Adults First model, as part of a collaboration between Redcar and Cleveland Borough Council, the University of Sunderland and Teesside University.

5. Recommendations

The following recommendations are made based on findings from this evidence gathering project into the Adults First model. These recommendations are presented in two parts, including recommendations for development of the Adults First model and recommendations for future research and evaluation into the Adults First model.

5.1. Recommendations for Development of the Adults First Model

Recommendations for the development of the Adults First model based on findings from interviews with parents as key stakeholders are as follows. These recommendations are tailored towards those stakeholders working to implement and deliver the Adults First model, including the educational psychologist, SENCOs, schools and the local authority (where applicable).

- i. To continue to foster and develop the important and unique parent/carer role within the Adults First intervention, which provides an essential lens and conduit into the child's life, background, challenges, and strengths, and empowers parents/carers as advocate for their child's needs.
- ii. To develop more strategies, and provide opportunities, as part of the Adults First intervention, for fostering positive relationships between parents/carers and schools,

which are an essential mechanism for successful implementation of the model for individual families, and in meeting the needs of the child.

- iii. To continue the facilitation of important multiagency collaboration with parents and schools, as an important source of knowledge and information sharing between stakeholders and wider agencies, professionals, and practitioners, involved with the child.
- iv. To address and seek to reduce the logistical challenges in real-time collaboration between the educational psychologist and parents, with wider agencies, professionals, and practitioners, which may impede progress in the delivery of the Adults First Model.
- v. To ensure that meetings with the educational psychologist, parents, and wider agencies, professionals, and practitioners, are sufficiently timed and structured to enable full information sharing from all parties, to ensure that important information about the child is not missed.
- vi. To improve parents/carers understanding of the Adults First model and requirements, in terms of their own participation, before the intervention commences, to ensure parents/carers are fully informed before participating.
- vii. To address the absence of the child's voice within the Adult's First model, and consider the advantages and potential drawbacks, of involving the child directly within certain elements of the intervention.

5.2. Recommendations for Further Research and Evaluation of the Adults First Model

Further research is required to assess the efficacy, efficiency, and impact of the Adults First model at individual, interpersonal, school, family, and community levels. Findings from this initial evidence gathering project will be used to underpin future research and evaluation of the Adults First model. Recommendations for further investigation include:

- i. To carry out a scoping literature review into peer reviewed research and grey literature on educational psychology approaches in schools, working with parents/carers supporting children and young people with social, emotional, and mental health needs.
- ii. To carry out further research to assess the efficacy and effectiveness of the Adults First model intervention inputs, activities, outputs, and outcomes for the child, family, school, and community.
- iii. To develop a logic model and map out inputs, activities, outputs, and outcomes onto a Theory for Change, to assess and measure the capacity of the Adults First model to generate change at individual, interpersonal and community levels.

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7. Appendices

Table 2: Table of Themes, Sub-Themes and Excerpts

Theme	Sub-themes	Example quotes
Perception of parental involvement and coproduction	Acknowledgement of parent voice	<p><i>'before Christine came along [...] I-I-I did all the pushing, I got everybody around to the table' (P1)</i></p> <p><i>"I needed to be able to articulate that and express how, how she presented, how she behaved in certain situations, so that Christine had an understanding of [child's name] from the closest perspective as possible anywhere' (P6)</i></p>
	Parent as child's voice	<p><i>'If [child's name] would have been in a meeting with anybody, she's completely she's selective mute, she wouldn't have said a word [...] My input was really important cause they could understand, you know, I could reflect back things that [child's name] had said, things that [child's name] had done erm, how [child's name] had perceived certain things' 'nobody knew what [child's name] was thinking only I knew what [child's name] was thinking cause she'd tell me after we'd been. So that was really important cause I was able to be [child's name]'s voice' (P6)</i></p> <p><i>'She was very clear on how 'what would [child's name] say in that situation? what would [child's name] do in that-' so pulling it back to being centred around [child's name], but then, being adult focused and doing it in, you know in, in adult speak and adult erm, you know, guidance erm but then pulling it back to, 'but if you do this, this is how it's going to affect [child's name], if you do that, she's going to do this, so what else can we, what can we learn from this? What else could we do?' (P3)</i></p>
	Exploration of factors influencing child	<p><i>'I work with my [relative] [...] she suffers from PTSD. Erm and Christine'll speak to her [...] about what she's going through and then try and work with her to help her get to a good level, cause [...] everyone knows if you're not right, you can't look after somebody else.... I know that she's helped my [relative] on that level of, an emotional level [...] to help with her own depression and things like that' ... 'if you're feeling down and you're you're feeling like you've got nobody, you can't be expected to look after your kids in that state, so if you've got someone that's understanding and listening to you, and then also trying to take care of you at the same time to make you stronger to fight for your kids, then that's gonna have a massive impact on the whole family' ... 'if you don't listen to the parent, you don't take into</i></p>

Theme	Sub-themes	Example quotes
		<p><i>consideration everything that's going on, or... for her instance, she's got really bad PTSD she didn't leave her bedroom for months [...] so that's had a massive impact, because everything's sort of fell, and them kids are sort of in survival mode should we put it. So then they're fighting against everybody, but unless you sort that main issue, nothing's gonna change.'</i> (P5)</p> <p><i>'so it was really hard erm, emotionally I found it really difficult because it was that, the background the history, and-and it was hard, I struggled with... so [child's name] witnessed domestic abuse when he was a baby, and that's something that I've always kind of mentioned, I brought that up with professionals because I know professionally that that's important to mention because it might be impacting on how he's feeling now or all of that emotion, they carry that [...] to hear that back as one of the possible reasons why your child is having issues is really difficult to hear'</i> (P1)</p>
Influence and role of psychologist	Influence of interpersonal qualities of psychologist	<p><i>'your voice was as important as the teacher sat next to you' ...</i></p> <p><i>'sometimes when, as a parent, when you're talking to a teacher [...] they make you feel like you don't know what you're talking about, and I think Christine changes that dynamic and it almost comes to the point where teachers are just like parents when Christine's around, just listening and and, you know, getting her expertise' ... 'sometimes when you are in meetings with lots of professionals, you feel they hold the power almost at some points and you feel they have power over you, but I think the way Christine communicated. It wasn't like that'</i> (P11)</p> <p><i>'because of the relationship I was able to be open and honest about what I thought would be helpful' ... 'I was able to be open and honest cause I felt comfortable in order to do so.' ... 'That trusting, you know, relationship was really, really important as well. [...] If you haven't got that, if you haven't got those foundations of a good professional relationship, then it's not going to work. So I guess she laid those foundations as well'</i> (P6)</p>
	Influence of psychologist on parent's wellbeing	<p><i>'if it doesn't work one way, she's like, okay, I've got this plan and we'll do it, we'll try this way, and she she's never defeated, and it's really nice because at times I felt like people were going to give up on him, and it's just a case of this kid's the way he is, sod it kind of thing [...]. And Christine comes in and just it's a case of we aren't giving up on him, there is a good kid here, there is, and she's been able to reinstate that for everybody, I think as well and just say look like, yeah, he's he's got</i></p>

Theme	Sub-themes	Example quotes
		<p><i>his issues and he's this, that and the other, but he's a good kid and we can, with some support and help and some guidance, get him where we need him to be' (P13)</i></p> <p><i>'it's that reassurance that people know what they have to do, people know when they have to have it done by, and we always set another meeting at the end of that meeting, so we know there's-it's going to be followed up and you know, as a parent, that reassurance is.. good. You don't feel like you're banging your head against a brick wall [...] you know... with the professionals not doing what they're supposed to do and it rolls over to the next meeting, rolls over to the next meeting, that is when your frustration kicks in' (P3)</i></p>
	Liaison with professionals	<p><i>'there was certain points that I was trying to put across, erm, could we not try this, could we not try that, so different ideas really, but coming from a parent they didn't really respond to that, but coming from somebody like Christine Sketchley, they decided that actually they would be better off to work with than against erm, and that's where things started to happen' (P7)</i></p>
Parent perception of multiagency meetings	Value of professional collaboration	<p><i>'to then have someone sort of unpick it and look at how you can then... find a solution or find a way through it. I just think is absolutely key. Erm and I think that's like a huge point of having that many people around a table in that they can all bring their own experience and all bring their approach really, and then you can work out with the child which one is the best one to take, and and we did a lot of that. We did a lot of that with [child's name] [...] It gave everybody the opportunity to put in what they could do and what they could offer, and then we were able to say, well, that is, the one that we feel as parents will work' (P4)</i></p> <p><i>'school were able to pick up on things and say, right, well, okay, then created a really good plan of action to avoid these things from getting to that point and they put lots of things in place so that his day runs much more smoothly and they can talk to him because they devised a way of doing it sort of in a gentle manner as opposed to directly giving orders. They really sort of worked out a way based on Christine's suggestions to be able to deal with him in a different way so that he doesn't feel attacked and he doesn't feel, you know, under pressure' (P12)</i></p>
	Structure and features of meetings	<p><i>'everyone's got a clear agenda, everyone's got clear guidance, everyone's got, you know, timely set targets and achievable targets, everyone, it's, it's how you would write it in a book.' (P3)</i></p>

Theme	Sub-themes	Example quotes
Impact of the intervention	Child's engagement with school	<p><i>'She got my child a place at a, somewhere where nobody else thought of nobody else knew. Erm, and she fought for funding, she fought for everything, and it's been the making of my son. He's come out so much, he's thriving.' ... 'It's positive, [child's name] wants to go to school' ... 'He's quite happy to go to school, he enjoys it, he doesn't stay off like he used to.'</i> (P10)</p> <p><i>'to us parents, her input is is huge. Otherwise, he'd probably still be at mainstream. Probably mainstream education or college, which wouldn't work at all, or he'd be in and out of the education system'</i> (P2)</p>
	Impact on parents' relationships	<p><i>'We can see when he's feeling really anxious because of his hand movements [...] so we could see how we was reacting to that situation, whereas before this, we'd have just thought he was being naughty, which again has really helped our relationship with him.'</i> (P8)</p> <p><i>'I would say slightly better in the sense that, they understand more now. However, I'm also very frustrated with them that they're not doing what Christine's asked them to do. I think it would be 1000 times better if they'd actually done everything that Christine had asked'</i> (P3)</p>
	Impact on understanding of child	<p><i>P9: 'it gave the teachers a whole new understanding of [child's name] as well.'</i> P8: <i>'and that it wasn't just him being naughty, it was him struggling within school and at home.'</i> (P8, P9)</p> <p><i>'I have a lot more patience with him' ... 'Like where before I would have been like no, absolutely not. Like, move. Like, stop, stop messing about like that and do as you're told type of thing. Where now I have more... the more you go on at him, the more he goes into himself so I have more of an understanding not to go on at him. But I do have to talk to him about it, so I will go back to him. And that's another thing she sort of taught me to do, is to like, give him that time to self-regulate and then discuss it'</i> (P5)</p>
	Impact on parent	<p><i>'I think when it came to before Christine stepped in, I thought, oh, we're we're done, like we're just gonna go around in circles, and then Christine [...] she comes in and she opens more doors really and says that it, where you think you've got that wall and you can't get over it [...] she gives you a ladder to help get over that wall and if that wall builds a bit higher, she'll extend that ladder for you.'</i> (P13)</p> <p><i>'the mood completely sort of shifted from me going in feeling like I could potentially be on the back foot, to feeling actually empowered as a mum and that she'd given me a level of power back, cause I'd felt</i></p>

Theme	Sub-themes	Example quotes
		<p><i>disempowered for a very long time and she suddenly was looking at what the struggles were, 'but how can we problem solve that then? how can we look to change that? what can we all do in this room now to make that better for [child's name] and for you guys as a family?' (P4)</i></p>
<p>Limitations</p>		<p><i>'even though Christine was giving them ideas and advice, I don't think, I don't think school was in a position to manage any of them, if you know what I mean? But only purely because I think that's mainstream school and they are so strict and so rigid with their processes and everything' (P2)</i></p> <p><i>'when a child's having that many issues or a lot going on, then how do you tackle that in one meeting, and then you're waiting three months for another meeting' ... 'I think to make it better, I think if we had more regular meetings, more of Christine, that authoritative figure that schools have to follow, so then they can be made to follow it' ... 'we'll, put strategies in place and then if they don't work, school will stop and revert back... until we have the next meeting. So that's the only criticism I have because they're not, they're not consistent enough, but that's not Christine's fault, it's the workload she's got, that's where we struggle to get new meetings in' (P5)</i></p>

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