

# Valuing Those Who Care for Others: The 'SafeSpace' Project at Kibble

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## **Abstract**

Maintaining and enhancing staff wellbeing is increasingly recognised as an essential aspect of effective residential child care. Children and young people receive the best care from adults who themselves are well supported. This article provides an overview of the 'SafeSpace' project at Kibble, which offers individual sessions to care staff to allow opportunities for reflection and emotional support within their role. Lessons learned from the project thus far, and questions for wider consideration across the sector are also discussed.

## **Keywords**

COVID-19, residential child care, staff wellbeing, reflective practice, emotional support, Scotland

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## Introduction

Few would disagree that residential childcare can be one of the most rewarding careers. Establishing safe and trusting relationships and being a supportive presence in a child's life journey is an undeniable privilege, and one that can ultimately influence better future outcomes for the child. But it is also a career that comes with its challenges. Working with children who have experienced trauma and adverse life experiences can take an emotional toll on caregivers, who may regularly find themselves on the front-line of a range of emotions and behaviour which they may find challenging and hard to understand.

At the recent '*More Than My Trauma*' Conference, Bruce Perry reminded us of the importance of connectedness in the healing journey of the child, and that a dysregulated adult can never truly hope to regulate a dysregulated child. This is not a criticism, but an important point for us to consider as caregivers. We also experience our own emotions - we are human too. There are days when we are buoyant, resilient and able to withstand the toughest storms that come our way. However, there are other days when we feel vulnerable, uncertain or overwhelmed. These are normal emotional experiences faced by every individual at some point, but which have the potential to significantly impact upon our ability to be fully present for the child. As Furnivall (2017) explains, 'what has been harmed by poor relationships can be healed by good ones' (p. 14) - fundamentally, the children in our care depend on us for co-regulation, to support them to understand and better regulate their own emotional states. The presence of sensitive, attuned caregiving from regulated adults is therefore essential to this process.

## The 'SafeSpace' project

Across the residential childcare sector, staff wellbeing is increasingly recognised as crucial to effective child care. Children will experience the best care from adults who themselves are well supported. Over the years, a range of services have become accessible to caregivers including external counselling, supervision, managerial and peer supports, all of which have an important role to play.

Kibble is a charity and social enterprise supporting at risk children and young people aged 5-26 across the UK. Many of the young people we care for have experienced significant trauma and adversity in their lives. A range of integrated services are offered at Kibble, including education, residential and secure care, therapeutic and community support to assist our young people to reach their full potential. As part of the introduction of Kibble's Therapeutic Trauma Informed Care model, we began to consider what else could be offered to enhance staff wellbeing and the 'SafeSpace' project was born. Individual, one-to-one sessions would be offered from an in-house therapist from Kibble's Specialist Interventions Service to provide a confidential and protected space for care staff to reflect on their work experiences. Working in residential childcare can undoubtedly be fast paced, and opportunities to process and reflect on the challenges and rewards of caregiving can be limited. The aim of 'SafeSpace' was to offer a genuine, empathic, non-judgemental space in which the caregiver would be prioritised and given the opportunity to reflect and feel heard. 'SafeSpace' was never intended to replace any existing wellbeing supports, but simply to offer an additional form of support from which staff may benefit.

As we began to plan the project, there were some initial uncertainties and reservations - would staff want to utilise an internal service? Would this feel too close to home? Could we assure staff that support would be confidential? While outside support is indeed a preference for some, anecdotally a number of staff expressed apprehensions about seeking support from unknown external professionals and voiced a wish to be able to access the same type of provision from someone with a closer understanding of the systems within which they work. It was therefore hoped that 'SafeSpace' could fill this gap. Over the course of the following year, initial pilots of 'SafeSpace' began across three identified services across Kibble. These services had either been partners in the planned progression of Kibble's Therapeutic Trauma Informed Care model or had expressed an interest in bringing 'SafeSpace' to their teams. Sessions began in earnest, and to date over 100 sessions have been facilitated.

## **Initial reflections on 'Safespace'**

From the seed of an idea, a host of reflections, questions and learning points have emerged which we share below for wider consideration-

### **Accessibility**

Offering sessions on a regular monthly basis on site proved to be effective for one service, while others benefitted from the option of evening sessions for night staff, who would otherwise miss the opportunities to access supports typically only available during daytime hours. Night shift staff can often bear closest witness to the effects of trauma but can inadvertently become a 'forgotten' sector of the workforce by virtue of their shift patterns.

### **Attitudes towards staff seeking support**

while the topic of mental health has undoubtedly grown in prominence in recent years, accessing therapeutic support continues to hold a degree of judgement or stigma within wider society. Does this create similar barriers within residential childcare? From our experiences, not all services have demonstrated the same readiness to utilise a service such as 'SafeSpace', and it would be important to consider whether the wider culture is supportive of caregivers seeking support. While we often encourage our young people to utilise therapeutic supports, how willing are we as the adults who care for them to also do the same? Do we lead by example? Or do we find it too challenging to accept that we also need support sometimes? Is there an expectation that we are always emotionally strong and resilient? Or does accessing support mean we are perceived by others as being 'incapable' in some way?

### **Managers 'set the tone'**

From our experience, communication and support from managers has played a significant role in the progression of 'SafeSpace'. Leaders who have demonstrated an interest in the service, been proactive in informing their staff about the benefits of a space for reflection and who have taken an active role in collaborating with the 'SafeSpace' team have maximised use of the service

within their teams. As a result, staff who have been initially unsure or uncertain about the service have gone on to utilise it positively.

### **Safety for those providing the service**

Offering 'SafeSpace' in-house can raise some ethical challenges when delivered by those who also work within the organisation. For 'SafeSpace' to operate effectively, it has been important to have clear parameters defined and agreed by management in advance of the service commencing to ensure role clarity and preservation of the confidential space.

### **Coronavirus strikes!**

As with most sectors, aspects of service delivery were thrown into disarray with the arrival of Covid and subsequent adaptations were made - in hindsight, not all with success. Online and telephone supports replaced face-to-face sessions but were not widely utilised. Some staff openly voiced their lack of comfort and confidence with these modalities and missed the opportunities for personable and authentic connections. Since face-to-face 'SafeSpace' sessions have resumed, uptake has increased again. Conversely, some have preferred the 'distance' that online methods allow. It would be important to acknowledge that the pandemic continues to pose a host of challenges for society as a whole, and our own reserves and resources as caregivers may become considerably depleted when access to our usual support mechanisms has been curtailed. Opportunities for genuine, relational connectedness through services such as 'SafeSpace' may potentially be all the more important in these unsettling times.

### **Widening access to 'SafeSpace'**

Rather than targeting 'SafeSpace' only to three specific services, access was opened organisation-wide to expand support following the pandemic. This has proved more beneficial in allowing staff who feel most ready to utilise the service to self-refer.

## Expansion of personnel

To accommodate increasing demand, the 'SafeSpace' team has expanded to three staff. The team hold backgrounds in counselling, family therapy and psychiatry, and it is hoped that the diversity of approach across facilitators will prove to be beneficial for staff.

## Evaluation

Given that much of our feedback thus far has been anecdotal, we recognise this is something we need to work towards and improve in the next phase of the project.

## Conclusion

In conclusion, 'SafeSpace' is by no means the finished article – it continues to be very much a work in progress and we are learning, adjusting and adapting as we go. The vision for 'SafeSpace' continues and exploring opportunities for team reflective spaces is planned for the year ahead. It is our hope that 'SafeSpace' becomes an established and valued form of relational support across Kibble's services for years to come, creating a legacy where caregivers feel just as important and as valued as the children they care for.

## References

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Mhairi is a Therapeutic Practitioner based within Kibble's Specialist Intervention Services. Mhairi has a background in forensic psychology and is a qualified person-centred counsellor and DBT therapist. Mhairi works directly with young people across all of Kibble's services to offer therapeutic intervention, in addition to other roles such as staff training and the 'SafeSpace' project.