



## **Moving forward in Kinship and Foster care**

Final Report on the GIRFEC in  
Kinship and Foster care Strategy

Report prepared by the tFN – BAAF  
Reference Group and the project Task Groups

September 2008



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## FOREWORD

This report is the outcome of the work of many people across Scotland. Shortly before the publication of the Getting it Right for Every Child in Kinship and Foster care report the Government in Scotland asked BAAF and tFN to set up a Reference Group composed of the main stakeholders in kinship and foster care. The group worked through the areas identified by the Government in Scotland through five Task Groups each of whom were allocated a specific area of the Strategy to develop.

Our aim has been to identify good practice in kinship and foster care across Scotland. We have been very encouraged by the range of imaginative and skilled current work that we found. The place of foster and kinship care as key services for children has been enhanced by the focus on how they work and what needs to be improved. It is very humbling to hear the dedication of kinship and foster carers and the way in which many of them put their lives on hold to provide care for someone else's child. The groups are committed to taking the opportunity of a lifetime to make proposals for change in foster and kinship care so that the experiences of looked after children will improve. There will continue to be many challenges in delivering high quality foster and kinship care and these challenges are discussed in the report.

We have identified the key outcomes desired for children living in foster and kinship care and we believe these are achievable. What we believe needs to happen to make those outcomes realities for children is set out as well. There is a tremendous amount of work to be done to achieve the ambitions of the Government in Scotland and how the Reference Group believes those ambitions can be met. We see that achieving them will be about everyone involved with children and carers doing their best for each looked after child with whom they are in contact. In time we are confident that we will see services working collaboratively with all corporate parents fully understanding and accepting their responsibilities for meeting the specific needs of their looked after children.

## ACKNOWLEDGEMENTS

Many people across Scotland have made a significant contribution to the development of this report. Despite considerable pressure on all the members of the group, I have appreciated the commitment that members made and the quality of the work they produced. I would want to thank:

- The members of the Reference Group for keeping the work moving ahead safely and for their extensive work on the Strategy.
- The members of the five Task groups for their detailed attention to the complexities of kinship care and to the increasingly skilled foster care tasks.
- Thanks also to a number of colleagues who gave specific input to a couple of meetings, who responded to requests for information or provided the groups with accommodation.
- The Scottish Government staff particularly Jackie Brock and her team and the staff from Analytical Services for their availability to the Groups and their support
- Particular thanks to the staff at BAAF who "adopted" some of us and made us most welcome.
- My special thanks to Natalia Duncan who was appointed as Project Support Worker in February and has worked so hard to type minutes, to mastermind the newsletter, and to arrange not just excellent venues for our meetings but also the agendas and supporting papers.

*Anne Black*

Independent Chair of the Reference Group for  
Getting it right for every child in kinship and foster care

## 2. EXECUTIVE SUMMARY

### **Moving forward in kinship and foster care**

This report examines in detail recruitment, assessment and training of foster carers. It proposes an assessment framework for working with kinship carers and highlights best practice in supporting children and their carers.

It is set in the context where the Scottish Government has led new initiatives to improve outcomes for all children through *Getting it right for every child*. There is considerable concern to improve outcomes for the small but significant group of looked after children who do less well in health, education and employment. The Government in Scotland are committed through a three year Concordat to work together to improve responses to all looked after children and in particular to improve the financial support to kinship carers.

This report has been developed by a Reference Group, a number of Task Groups, and Policy Consultation Days, which have achieved widespread participation and engagement of foster carers, kinship carers, young people, practitioners and managers from local authorities, the voluntary and independent sector, policy makers and regulators. The full report sets out guidance for practice and policy direction.

This Executive Summary describes the vision for kinship and foster care and highlights issues that require to be addressed to enhance the future development of services to support some of the most vulnerable children in our society.

Within the report the analysis of population trends illustrate that while the overall population of Scotland has remained relatively static, around 5.1million, the structure of the population is changing. There is a steady increase in the number of older people, while the child population has been decreasing, though may now be stabilising.

In contrast to the general child population, the number of children in care has been increasing over recent years from 11,309 to 14,060 since 2000, an increase of 24% in just seven years.

As the population of looked after children has increased most of the placement growth has been in the community rather than in residential care, which has remained static over those last seven years. The growth has occurred within foster care and more significantly in kinship care, that is placements with relatives and friends, which have increased by 33% in foster care and 91% with children placed with relatives and friends (see Section 4 of the main report.) The number of children placed with kinship carers is likely to continue to rise as further supports and services are developed for children in kinship care.

## **The Vision for Kinship and Foster Care**

- The vision for children in kinship and foster care is the same as for all children in the community: they become responsible citizens, effective contributors, successful learners and confident individuals.
- However to overcome the difficulties that result from these children's trauma, neglect or poor early care, the services required to ensure that they will be safe, nurtured, healthy, achieving, active, respected are more specialised and require more investment.
- All children's services need to be committed to help looked after children to reach their full potential. These children will also require specialist services throughout their childhood.
- Specialist services should be developed to ensure that looked after children receive priority from skilled, well supported professionals within their placement, within their school and within their community.
- Specialist services have a role in supporting universal services to include looked after children within the mainstream services.
- Children should be supported to live with their extended family, without the need for formal intervention, unless they need protection. Their kinship carers should be supported by adequate services and finances.
- The capacity of the fostering service should be enhanced to ensure that the most appropriate foster care placement can be found for every child as close to their community as possible.
- The capability of foster carers should be enhanced with training and support, and they should be valued as part of the children's workforce.
- Every looked after child should have a multi-agency child plan which commits universal and specific services to meet the needs of the child.
- Corporate parents need to ensure systems and resources are in place to deliver the different components of the child's plan.
- Children should have their needs for permanency or, at the very least stability, met within the timescale which best suits their needs and which they understand.
- Children's views must be listened to and taken into account in these plans.
- Adult services must ensure that children's needs are not overlooked or compromised, while parents are receiving services

## Recommendations for Action

To improve outcomes for children in kinship and foster care the following actions are required:

- Universal services should be strengthened to meet the needs of children including those in kinship and foster care.
- The capacity of the fostering service needs to be increased through sustained recruitment involving coordinated local and national initiatives.
- While the systems for assessing and supporting kinship and foster carers are different, they both need skilled practitioners, robust systems and appropriate resources to achieve safe care for children.
- Foster carers need to be trained, valued and included in the children's workforce.
- Investment in a central training resource for foster carers is essential to create more opportunities for them to participate in training and to gain qualifications.
- Resources to meet the financial and support needs of kinship carers require to be increased to enhance opportunities for children in kinship care and to sustain complex placements.
- The eligibility of kinship carers for state benefits needs to be unravelled so that kinship carers can receive adequate universal benefits.
- Social workers in kinship and foster care need knowledge of child development, attachment and separation as well as skills in assessment, analysis, decision-making, report writing and court presentation. This will require additional resources to ensure continuing professional development of social workers in these areas.
- In making decisions, children's hearings, reviews and courts must have a shared understanding of a child's needs for permanence, and take their decisions in timescales which reflect the child's needs.

Children need high quality services from agencies. They also need committed carers who are prepared to be strong advocates for them and who will help them to develop resilience which promotes their well-being. Every child should have someone who supports them through their childhood and into adulthood, and who believes in their capacity to grow and develop. For looked after children, kinship and foster carers are the people who invest in relationships with these children and they need continued and extensive support from corporate parents, and indeed society.

### 3. INTRODUCTION

#### Background to the Strategy

In December 2007, after a period of consultation about a National Fostering and Kinship Care Strategy, the Government in Scotland published a further document “Getting it right for every child in kinship and foster care”(for ease of reference this document will be referred to as **the Strategy** in the Reference Group reports). The report sets out the vision of the Government in Scotland for all children and what care children and young people should expect to receive whether in their own home or looked after by a local authority.

The Strategy identified the two key areas which the Government in Scotland believed would help to ensure strong kinship and foster care.

The two key goals identified in the report were:

- Delivering a Child Centred approach to kinship and foster care and
- Supporting high quality kinship and foster care

To move towards the vision being realised, the Government identified areas where more work was required. Some specific areas for development were referred to a Reference Group coordinated by BAAF and tFN.

This report presents the outcome of the work of the Reference Group over the months since the launch of the report. The particular areas of work allocated to the Reference Group were:

- ❑ To update current recruitment processes for foster carers, building on existing good practice.
- ❑ To revise current assessment processes for foster carers, building on existing good practice.
- ❑ To assess the training requirements for kinship and foster carers in the light of the strategy and the introduction of permanence orders.
- ❑ To consider any improvements to current organisational arrangements within local authorities and enable them to make more efficient, child-centred decisions for looked after children and to ensure that plans for their care and progressed in timescales relevant to their needs. This will include looking at the current difficulties and barriers to good planning.
- ❑ To develop assessment guidelines for kinship carers of looked after children.
- ❑ To consider existing models of good practice for kinship carers of non-looked after children and, if necessary, prepare relevant guidance.

#### Current context for kinship and foster care

Before setting out in detail the way that the Reference Group has worked, it is important to place the strategy within the current social and political context in Scotland. That context presents many challenges to services and to politicians but also opportunities.

Many children are living in foster and kinship care families and their lives are being enhanced by the commitment of their carers and their workers. They provide a range of life chances to the young person to help reverse some of the damage their early years may have caused and to help them to grow into healthy adults. These services are developing the range of skills that are needed to face the challenges of caring for children who have often had poor early care and have experienced abuse and neglect.



There are some current universal concerns which we believe are part of the backcloth to this report. Continuing child poverty is affecting the life chances of some children and young people and reducing the scope of opportunities they can enjoy during their childhood. Recently there has been attention to fuel poverty which is likely to affect adversely the poorest families often in poor housing. Both types of poverty can have an adverse impact on the health of children and families. Studies have identified the health inequalities in Scotland and they will impact on children and young people as they grow and develop.

Discussions with several managers of Children and Families services highlighted that practitioners were dealing with an increasing number of families where parental substance misuse was seriously affecting their capabilities to care for their children. This presents enormous challenges to services for both adults and for children. Children living in households where parents are abusing substances may have to become self-sufficient long before they are able and may lack any parental encouragement in their activities or education. For very young children lack of stimulation, lack of emotional warmth and physical neglect do damage that is long lasting and hard to redress. Kinship carers and foster carers must be part of the strategy nationally to redress these poor early experiences.

Economic uncertainty for some families may mean that they do not consider becoming foster carers for a looked after child. Children with complex disabilities are having positive treatments that are increasing their life expectancy and many parents will need respite services to enable them to cope with the heavy burdens of care for a very dependent child. These are some of the short and medium term issues that were part of the context for the work of the Reference Group in presenting their report.

The Concordat between the Scottish Government and COSLA was published in November 2007. The GIRFEC in kinship and foster care report was the first strategy issued jointly by the Scottish Government and COSLA. The Minister for Children and Early Years and the COSLA spokesperson on Education, Children and Young People introduced the strategy in December 2007.

The Concordat has changed relationships between the government and local authorities and requires different mechanisms for negotiations between local and central government. Previously well-established routes for negotiation about national developments require to be reviewed. In particular, ring-fenced monies, which in previous administrations were allocated to all local authorities to deliver specific services, are now included within the overall settlement, giving local authorities greater autonomy to deliver the services they assess as required in their area.

Three year financial settlements from April 2008 to March 2011 are also new. Identification of the indicative allocations for new work has been problematic in some Councils. The sufficiency of centrally allocated monies for new responsibilities has not yet been evaluated.

The Concordat included a commitment for Councils to make payments to kinship carers of looked after children at the same rate as foster carers. The commitment is for allowances to reach parity within the three years of the concordat. Many kinship carers expected to receive the equivalent allowances from the 1<sup>st</sup> of April 2008 and have found that expectation not being met, a hard blow. Recognition for the work of kinship carers has been welcomed but there have been unforeseen negative consequences of receiving allowances on the income of kinship carers already in receipt of a range of universal benefits.

The recent national recognition of the complexities of the Benefits System, particularly for kinship carers, has been welcomed, as have the initiatives of the Scottish Government to resolve them with colleagues from the Department of Work and Pensions. These issues are discussed in more detail in the report of the Task Group on Kinship Care. [Section 10.4]

The Children (Scotland) Act 1995 requires local authorities and courts to ensure that intervention in the lives of families and children is proportionate. That intervention should be used to protect a child. This means that where families find their own resolutions for the care of their children, these should be supported rather than pursuing any legal intervention unless it is to protect the child's well being or safety.

The importance of understanding the demographic trends in Scotland in terms of numbers of children looked after, general population, age structure and employment to plan for kinship and foster care developments was recognised. The Reference Group has been assisted by work from colleagues from Analytical Services at the Scottish Government. Their work is presented in the next chapter with some specific details incorporated into the task group report on the recruitment of carers. [Section 10.1]

The most up to date figures on the numbers of looked after children and their care placements will be available in November 2008. There is a commitment from ADSW to work with the Government in Scotland to identify the longer-term consequences of any new trends emerging from the 2007-8 figures. Additionally ADSW will be able to include recent practice experiences into that debate

## 4. ANALYSIS OF NATIONAL EVIDENCE AND TRENDS

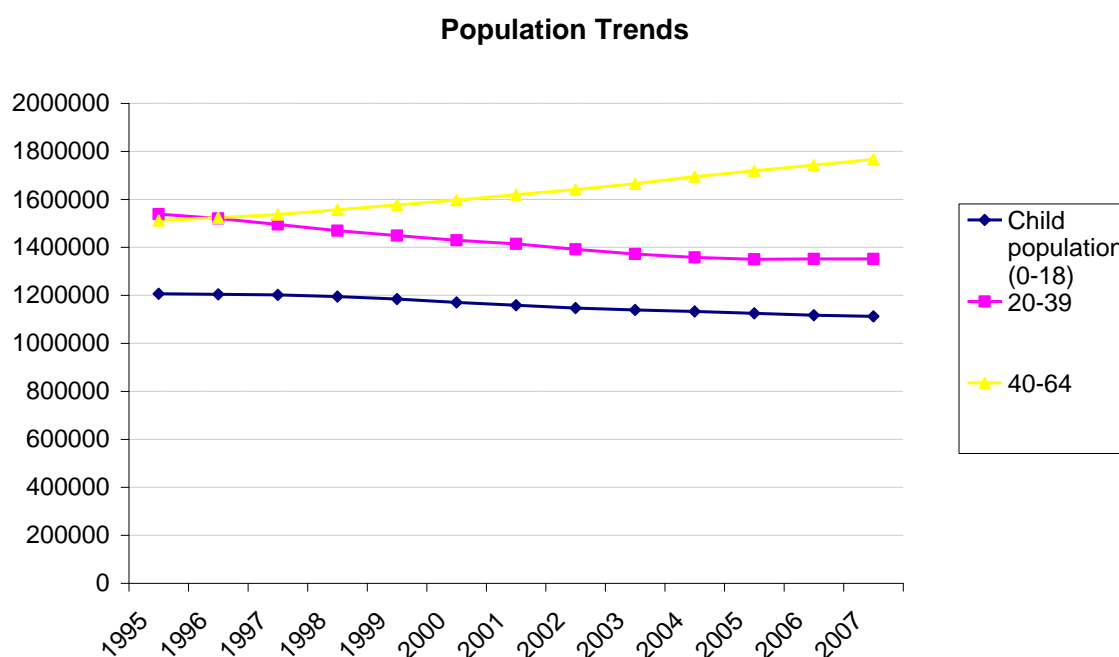
Since devolution, fostering, and more recently kinship care, have become progressively more important and increasingly utilised services for children and young people in need of an alternative warm, loving, nurturing and sustained home environment. The work of the Reference Group that was established to strengthen that environment was informed by evidence gathered by Scottish Government analysts with support from The Fostering Network and Local Authorities.

A key strand of that evidence was to consider the economic and societal context within which fostering and kinship care services are delivered. This chapter was developed as part of the recruitment task group although the lessons and learning are equally valid across the entire reference group. The analysis below highlights some of the key drivers and influencing factors at a national level but may disguise sub-national variations that local partners may wish to explore to inform local decisions.

### Population and Labour Markets

Scotland's demographics are changing but despite the media hype in the last few years they have been changing since the turn of the last century. According to the General Register Office of Scotland, the population of Scotland sat at 4.47m in 1901 peaking at 5.23m in 1971. From there it declined slowly to sit at 5.06m in the 2001 census before rising to 5.14m in 2007. Continued population growth remains a demographic challenge for the Scottish Government.

While the size of the population has remained relatively static around 5.1m since the Second World War, the structure of the population in 2007-08 is totally different to that which would have been seen just 50 years earlier with rising living standards and medical advances meaning that the current population is considerably older on average than that in 1957. As the graph below shows, the population has seen an increase in the number of older people over the last decade as well as a decline in the child population. This decline is currently projected to continue in the future although the recent increase in the birth rate may see this projection reversed.



To inform the work of the recruitment task group, the labour market context was also of key interest. While the working age population has remained relatively static over the last

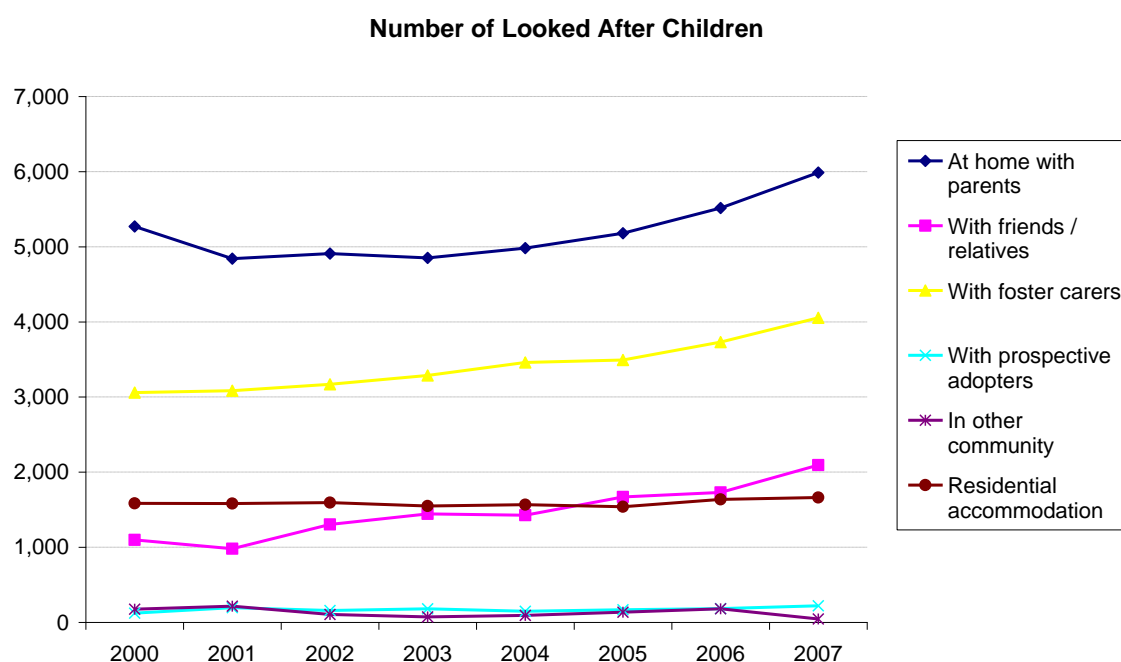
decade, it too has aged with more over forties and fewer under forties than previously. The working aged population is also projected to shrink in size and continue to age into the future. This presents a number of challenges to the economy more generally but also to sectors of the economy, such as foster care, that are potentially looking to recruit in greater numbers.

## Looked After Children

In contrast to the general child population, the number of children in care has been increasing over recent years and the nature of the care has also changed. The graph below shows the number of children in care over the last eight years broken down by type of placement<sup>1</sup>. It can be seen that the total number of looked after children in Scotland has risen from 11,309 to 14,060 since 2000 (an increase of 24%).

Within this total, the number of children looked after at home has increased slightly while the number of children in residential has remained fairly stable. This means that the majority of the increase in the number of looked after children can be accounted for by the increases in foster placements and placements with friends and relatives which have increased by 33% and 91% respectively

This rising trend has occurred at a time when, as noted above, the general child population has actually been decreasing. This means that the proportion of looked after children in the child population has risen at a greater rate.



In the context of Getting It Right for Children in Kinship and Foster Care it should be noted that the graph above refers only to those children officially looked after by local authorities. It is known that there are a significant number of children and young people living in kinship care arrangements who are not captured by these official statistics although there are no robust data on how many.

The 2005/06 Scottish Household Survey provides a proxy estimate for the number of children in kinship care when it found that approximately nine thousand children live with someone other than a biological, adoptive, step or foster parent as a primary carer. Of these, around two thousand are captured by the statistics presented above suggesting there may

<sup>1</sup> Source: Scottish Government, Children Looked After Statistics 2006/07

be a further seven thousand children and young people who are living in unofficial kinship care arrangements. It should be noted that there is a great deal of uncertainty around this figure but this remains the most accurate estimate.

## **Expenditure**

Expenditure on all social services (which includes fostering) has increased steadily but significantly since the advent of devolution. Given that salaries represent the largest element of social services expenditure this has been accompanied by a significant increase in the numbers of social work services staff. However, expenditure on fostering services, including kinship care, has increased at an even greater rate over the period.

The recruitment task group also looked at the relationship between expenditure levels and the numbers of children in receipt of fostering services. It was found that total LA fostering spend has increased, in real terms<sup>2</sup>, at a greater rate than the number of children in fostering. This emphasises that the increase in spending is not simply due to increased child numbers but also other factors such as increased expenditure on training and allowances for carers.

## **Foster/Kinship Carers**

In relation to the number of foster and kinship carers in Scotland the work of the task groups began in something of an information vacuum as there are no official statistics in the area. However, the collaborative approach adopted by the Reference Group ensured that partners round the table were able to bring the expertise and knowledge required to offer important evidence to the group.

Partners, notably The Fostering Network, were able to provide evidence on the location and some demographics of foster carers from their internal records. A key finding of this sample analysis suggested that social care workers generally tend to be older than the overall working population but foster carers are even older again with nearly half over the age of 55. This finding suggests that recruitment strategies could benefit from looking to target younger carers than previously may have been the case. However, as highlighted previously, Scotland has an ageing population and this could present a challenge and/or an opportunity for fostering in Scotland.

The challenge is that an ageing population will increase competition in the labour market and could influence Local Authority resources in terms of care for the elderly etc. Alternatively, given that there will be an increase in the age group typically attracted to foster care the ageing of the population could represent an increase in the potential pool of labour to be attracted to the sector.

When looking to inform recruitment and retention strategies, the recruitment task group also looked at the location of foster carers and identified some very interesting findings. Unsurprisingly the analysis showed that the demand and supply of foster carers varied across the country with some authorities being net exporters of carers and other LAs having greater levels of need than they could meet within existing resources. Typically this showed that the urban centres relied to some extent on the rural hinterlands to provide the carers to address their needs.

The map on the following page shows the location of carers registered with each of Aberdeen City, City of Edinburgh and Glasgow City. It is visually striking that carers can live quite a distance from the authority they are registered with even if they aren't all active carers. This has cost implications for the authority in question but more importantly potentially distances the children from their schools, friends and families and may not be in

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<sup>2</sup> The value of the expenditure has been adjusted to take account of inflation.

the best interests of the child. The task group felt that this presented an opportunity to encourage greater collaborative working between LAs to prevent children being placed unnecessarily far from their home authority.

## **Conclusion**

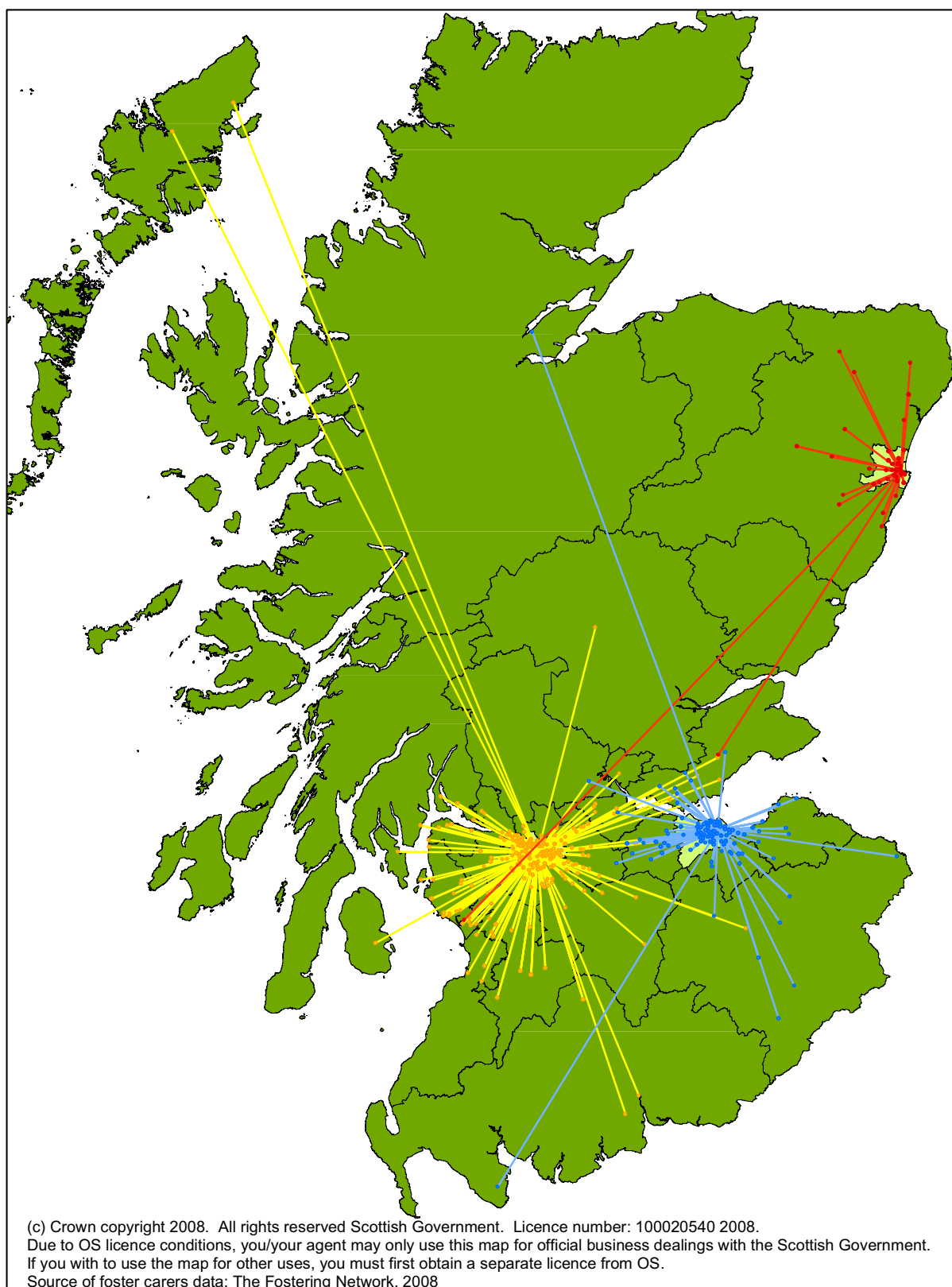
This chapter presents a short synopsis of the key evidence considered by the Reference Group to inform the strategy that follows and has presented some the context within which the strategy will be delivered. Constraints on resources set against no indication of falling demand will mean that efficient and effective delivery of services is more important than ever to improve the life chances for children, young people and families at risk. This analysis has presented a number of challenges for providers but equally has identified a number of opportunities.

A key conclusion of the work is that while the Reference Group benefited from the extensive evidence available to partners, a number of key gaps remain. Many of these gaps will be addressed by developments such as the individual children looked after data collection expected to be available in autumn 2009 but other gaps will remain.

Experience from this project has also shown that these gaps are unlikely to be addressed unilaterally. The Concordat and the new approach adopted by Scottish Government presents a window of opportunity and it is essential that partners and agencies take joint ownership of this challenge to ensure that these gaps are not neglected.

More detailed analysis of the trends in care can be found in the Appendix 1.

## Locations of foster carers used by Aberdeen, Edinburgh and Glasgow Councils, February 2008



## 5. WORK OF THE REFERENCE GROUP

The Reference Group has benefited from the involvement of social work managers and practitioners, foster and kinship carers, voluntary organisations, regulatory bodies, people involved in the Children's Hearings, Scottish Government and COSLA, academics and a sheriff in discussing the themes allocated to it.

The group has had analytical services staff assisting with information and demographic trends. The commitment of all the members has been outstanding at a time when everyone involved with children and families services and particularly looked after children, have faced increasing pressures on their services.

Five Task Groups were set up by the Reference Group to work on the different themes allocated in the Strategy. Each Task Group had core members from the Reference Group and also included a wider range of people with special interests and knowledge who contributed on a one off or continuing basis. This meant that a wealth of experience from across Scotland was harnessed.

Three Policy Consultation days were arranged to seek the views and experiences of the wider community of people involved with children and families, foster care and kinship care. The Policy days focused on kinship care, the recruitment of carers and the organisational arrangements to achieve best decisions for permanence plans for looked after children.

A monthly newsletter was published to keep as many people as possible across Scotland abreast of the work being done. The newsletters asked for information on specific topics as well as trying to answer some of the queries arising from the Strategy. The newsletter proved to be a successful way of extending the scope of our consultations.

## 6. OTHER RELEVANT DEVELOPMENTS DURING THE LIFE OF THE REFERENCE GROUP

GIRFEC in Kinship and Foster Care was not the only area of strategy development introduced by the Government in Scotland. The Government published a framework *for early years and early intervention*. The Reference Group believes that early years services and early intervention work are the foundation for the kinship and foster care strategy. It has concerns that the early intervention work can mean that for some children the attempts to keep the family intact over a protracted period could be damaging to the child's development. However early the intervention to a family for some children their needs will never be met in their birth family and that may be evident from an early point. Work needs to be done in a timescale that meets the child's needs for stability and emotional security in the very early months of life.

This concern links with the work done to look at effective decision making for children needing permanency away from their birth parents. Experienced practitioners and managers share concerns that the needs of young children can be overlooked or become secondary to attempts to help parents to develop parenting skills. Timescales for any parenting work have to be the child's not the adult's. Early intervention work will require to be supported by family based care alternatives for children who cannot stay safely in their birth family.

The GIRFEC team has published recently a Guide to *Getting it Right for Every Child*. This shows how the *Getting it Right for Every Child* practice model and tools can be used to complement any specialist assessment materials to assess, plan and review a child's progress both in single agencies and through multi-agency intervention. For example, the Highland Pathfinder has replaced all assessments for looked after children, including kinship care children with this model. *Getting it Right for Every Child* emphasises the importance of



both the universal services and more specialist services in providing timely and proportionate help to families when they need it.

*The Changing Lives* agenda focuses on the importance of strong and informed leadership of services for children and families and the need for a skilled workforce to deliver the services children and carers need. This mirrors the recommendations in the Task Group report on organisational arrangements to promote effective decision making for children.

The new *regulations* relating to all *Looked After* children will be introduced in 2009. We expect that the work of the Task Groups will contribute to the revised regulations and guidance.

Planning for the implementation of the *Adoption and Children (Scotland) Act 2007* has been continuing as the Reference Group has done its work and the discussions on decision making for children and the permanency options that children and carer need, have been fully shared with the team working on the implementation.

The *National Residential Care Initiative* has many similarities with the development of the kinship and foster care strategy. The importance of a sound and skilled workforce, the centrality of a multi-agency child's plan and the need to build resilience and stability into the lives of looked after children are equally relevant to all types of care.

The *Corporate Parenting* report 'These are our bairns' was published in September 2008. The Reference Group welcomes the messages in the report for corporate parents and their planning partners. They need to be aware of the volume of care that foster carers and kinship carers give to their community and children. The report of the Reference Group will help to highlight the actions that corporate parents should take that would make a real difference to children in foster and kinship care and to their carers and help to achieve some of the key ambitions for looked after children.

## 7. THE VISION FOR CHILDREN

### The principles underpinning the strategy

The **three principles** which are set out in the strategy provided the starting point for all our work:

- The needs of the child must be paramount
- Where remaining in the birth family would not be in the child's interests, care within the wider family will be the first option
- If this is not possible, placement with foster carers with a clear plan for the child's future is preferred.

We developed some additional principles which guided our thinking and recommendations

- Planning for children to ensure their needs for stability can be met must be set in timescales that reflect the child's developmental needs and not an arbitrary adult timescale.
- Services must be available to provide children who have experienced trauma with stability and emotional care. Understanding the impact on children of family substance misuse has to be a priority for all practitioners.
- All services must pay attention to the child's emotional needs and the parenting they need to grow and develop.
- Leadership in agencies must enable, support and empower workers
- Skilled practitioners working with children, kinship or foster carers must have sufficient time to form relationships with children and carers, gather information, analyse that information and create a child's plan.
- Listening to children and ensuring their views are used in planning.
- Carers for children must be skilled, trained and supported

### Achieving the Vision

All the work we have done has been set in the context of the Government in Scotland's vision for children. In summary, the Government in Scotland's vision for all children is that they will have the capacities needed to be Confident Individuals; Effective Contributors; Successful Learners; Responsible Citizens. This theme was the basis for the Curriculum for Excellence.

For children to achieve that vision, they need to be safe, nurtured, healthy, achieving, active, respected and responsible, and included. Kinship and foster carers play a significant role in helping children to fulfil their full potential and become secure and happy adults.

The key commitment to a personalised service for every child who needs to be looked after, many with complex needs, requires a range of carers with a range of skills and experiences. We have focused our vision on the particular needs of looked after children in kinship or foster care.

The principles of the Children (Scotland) Act 1995 remain central to Councils' work with children and families with the welfare of the child being the paramount consideration in any decision. This can appear to be in question in some decision-making. Concerns were expressed in some of the Task Groups that there appears to have been a loss of trust by Children's Hearing members and Courts in social work assessments particularly relating to permanent placement away from birth parents.

Some of our recommendations cover this concern and suggest more joint training and discussion opportunities involving legal decision makers and social work practitioners to improve mutual understanding of roles and the significant child development issues that need to be better understood.

Well-supported families, extended family support and foster care resources for children who have to leave home and family are all essential parts of reaching the vision for children. Support must come from universal and specialist services as well as extended families.

From our discussions we are clear that kinship and foster carers make a huge contribution towards the vision for many children both looked after and not looked after. Carers cannot achieve that without being well supported and able to access a range of other services essential to the development of the children for whom they care.

### **My Place**

This place is warm yet cold.  
This place can be light or dark.  
This place can be tranquil or booming.  
This place can be peaceful or full of war.  
This place is full of hope and yet the place of shattered dreams.  
This place is safe and dangerous at the same time.  
This place is love and hate.  
This place can smell of apples or roses.  
This place can be lonely or all the company you need.  
This place is both now and then.  
This place can be right here or a million miles away.  
This place is wherever you are.

***( From the report 'Forgotten Voices',  
tFN )***

## 8. THE VISION FOR CHILDREN IN FOSTER CARE

The Reference Group has developed a clear vision for children in foster care.

- There will be a range of foster carers recruited across the country who can provide skilled, loving and developmentally appropriate care to children who have had to leave their families.
- Across the range of carers different placements will be available. Short breaks, befriending children and families, providing emergency care in situations where children are at risk, providing care for children with complex disabilities and emotional difficulties, helping children to build attachments and self esteem and providing permanent care for children who cannot return home.
- The care provided by foster carers will support children to become happy and achieving.
- Foster carers and their sons and daughters will create a learning household which can make a positive difference to educational outcomes for looked after children.
- The skills of foster carers will be recognised and valued by communities.
- Foster carers can access services most needed by children who have suffered trauma of any sort- Child and Adolescent Mental Health services in particular.
- Foster carers will be appropriately recompensed for the work that they do.
- Foster carers will receive allowances which meet the costs of caring for the child.
- There will be collaboration between Councils, between the statutory and the independent sector to increase resources.
- Councils will address their commissioning strategies for foster care placements to ensure excellent foster care provision.
- Sons and daughters of foster carers will be given support, recognising their important role in helping children to thrive.
- Young people in care will be consulted about selection, training and support to foster carers.

### My Experience

I remember approaching the door of my soon to be new home, with my Mum directly by my side, my uncle on the other and my social worker leading the way.

My eyes once again began to fill up with water. I could feel the cold tear running down my hot flustered cheek, as one dropped another followed. I felt sick and queasy.

My Mum gripped onto my hand as if she was never going to let go.

My social worker rang the doorbell and it wasn't long before a pleasant looking man opened the door. He invited us in. I remember the sweet smell it made the atmosphere feel warm and homely. We took a seat on the pale pink couch I sat on the edge, as I was afraid of settling in.

Just as we began a conversation a lady came through from what looked like the kitchen with a warm looking smile on her face.

They both introduced themselves.

*( From the report 'Forgotten Voices', tFN )*

## **9. THE VISION FOR KINSHIP CARE**

The Reference Group also developed a vision for kinship care.

The key elements are listed below:

- The wider family will be involved whenever a child needs to leave their birth parents.
- Family meetings should be part of the planning process for a child.
- Placement in the wider family should be the first option if safe and in the best interests of the child.
- Retaining a sense of family, identity and heritage helps a child to feel valued.
- Kinship families will have access to adequate universal benefits and support and not be reliant on the child having a statutory legal relationship with a local authority.
- Kinship carers will be able to access specialist services where the needs of the child require that.
- Kinship carers will be able to develop their skills and understanding about child development and loss.
- Any assessment of kinship carers starts from the child's plan and considers what supports the carers will need to ensure the child's well being.

## 10. TASK GROUP REPORTS

The reports from the Task Groups are specific to their area of exploration. While their style may vary they all seek to identify the issues, to report good practice and to make recommendations about what work needs to be taken forward to help services and communities to achieve better outcomes for looked after children in foster and kinship care

### General Themes emerging from the reports:

- Universal services should be able to meet the needs of most children and families unless specialist needs have been identified.
- All services need skilled practitioners, well supported and enabled to develop new capabilities.
- Working with looked after children needs the same priority as child protection.
- A multi-agency child's plan should be in place for any child needing access to specific services.
- Children's views must be listened to and those views taken into account in any plans.
- Practitioners in adult services must put the child's needs at the centre and make realistic assessments of their ability to parent their children.

### Contact for young people

- Some children don't want to see certain people regularly. They should be asked if they want to go rather than a social worker just arriving up at the house to take them away to see someone who might scare the child.
- There should be support workers and social workers available to help you contact and see your family.
- My contact with my family has been fine. I stay locally to my family and see them regularly.
- Sometimes it's hard to find your mum. The social worker had to look up where they are staying.
- I just give my mum a phone and meet up.

*(From the report 'Forgotten Voices', tFN)*

## 10.1 Task Group report - Recruitment of Foster Carers

### Introduction

A Task Group was formed to consider the challenges in recruiting foster carers, to review previous recruitment campaigns, to identify good practice in recruitment and retention of foster carers and to inform further initiatives and campaigning required in Scotland.

The Task Group benefited from having a mixed composition of key staff from the Scottish Government, including members of the analytical and research team, as well as members of the 'looked after children' team, local authority representatives from three of the four city authorities, fostering team managers from independent and local authority fostering services, specialist recruitment staff from several fostering agencies, the Fostering Network, foster carers, and a young person in foster care.

The Task Group reviewed recent publications on recruitment of foster carers and were informed by the demographic challenges facing the service, outlined earlier in this report. We discussed the changing demand for placements and considered the impact that independent sector fostering services have made on fostering services in Scotland in the last ten years. As there is no central collection of data on foster carers, the data on all foster carers in membership with Fostering Network was analysed revealing trends and developments in the pool of foster carers in Scotland.

The Fostering Network also undertook a survey of local authorities to identify placement shortages. They also completed a report of previous and current recruitment activity which was submitted to the Scottish Government, some extracts from which are included in this report. The Task Group consulted children and young people in foster care, foster carers, fostering service managers, ADSW and marketing and communications professionals. The Group outlined its findings at a Policy Consultation event with 50 participants from local authorities and voluntary and independent fostering agencies and the main proposals were widely endorsed.

This Chapter outlines key background information, highlights good practice in recruitment of foster carers, and identifies some new initiatives and key recommendations to inform future investment in recruitment of foster carers.

### Background

Recent research on recruitment published by British Agencies for Adoption and Fostering, (BAAF), Bebbington and Miles, the Fostering Network and the Social Care Institute for Excellence (SCIE) highlight the following key messages:

- Planned, long term recruitment strategies are much more successful than *ad hoc* recruitment initiatives.
- Efficient systems for responding to enquiries and progressing applications are essential.
- Involving experienced foster carers and young people in recruitment activities encourages others to consider fostering.
- Sharing resources between agencies is important to increase the pool of foster carers.

There has been a significant increase in the numbers of foster carers in Scotland over the past five years and at March 2008 there are over 3,000 foster carer households in Scotland. These foster carers are either registered with one of the 32 local authority fostering services or with the 16 independent and voluntary

**"I love to know that I belong to somebody, I'm loved by people and it's good to know that I've got somewhere to come after school that I can call home."**

**Young person, 'Forgotten Voices'**

fostering agencies. Over this same period there has been an increase in the number of looked after children, especially those placed in foster care, as illustrated in the earlier charts.

The Fostering Network survey of local authorities in March 2008 estimated that 450 more foster carers were required to meet the immediate demand for new foster care placements. There appear to be several factors contributing to this shortfall, some of which are supported by the evidence from the data from the analysts.

- There is a significant increase in overall numbers of looked after and accommodated children in the last five years.
- The proportion of looked after children placed in foster care, rather than in residential care, is also increasing as fostering is the preferred placement choice for children and young people.
- Up to 10% new carers are required each year to replace the number of foster carers who retire or leave service each year.

The Task Group was concerned that if these trends continue then the current pattern of children being placed outwith their authority, sometimes at a considerable distance from home will increase. Shortages in foster care placements also result in a lack of placement choice for some children and some children sharing placements with up to 6 or 7 unrelated children. This survey also identified shortages in the placements for sibling groups, children with disabilities and for children from a range of ethnic backgrounds.

A previous publication by the Fostering Network identified that the majority (three quarters) of foster carers in Scotland are over the age of 45 (*The Fostering Network, 2005*). This age profile is largely similar to the social care workforce in Scotland. This has resulted in government initiatives to recruit and train new social care workers. The analysis of age of foster carers revealed that almost half the current foster carers are over 55 years of age and that 13% of foster carers are over 60 years of age. When the age of foster carers is considered alongside the information that 65% of children in foster care are aged 11 or below, this highlights a major age disparity. It also identifies a projected need to replace this cohort of foster carers when they are no longer able to be so actively involved in parenting. Set against the context of an ageing population and high employment rates, this represents a key challenge for the sector. The ageing population may, however, represent an opportunity for recruitment given that foster carers have historically tended to be older.

**Recruitment should:**

- Involve young people who foster carers have helped.
  - Show them how kids benefit. How the kids can get better lives from being in care.
  - Get rid of stigma surrounding foster care.
  - Get young people in care to do presentations. Show how much they are needed.
- Young people, 'Forgotten Voices'

Historically, there are some local authorities, particularly within the large cities, where the demand for foster carers is high, while in the neighbouring authorities there are potentially more foster carers than required. This dislocation between the demand and supply in foster care has become stark since local government reorganisation which separated the cities from their hinterland. The formation of the 32 local authorities has created circumstances where many more children are looked after by foster carers outwith their responsible authority. The map in the analysis section highlights the distances some foster carers are from the authorities they foster for. The consequences of this are that some children are being placed far from their home, school and community, which make their potential rehabilitation more problematic, as distance can impede parents and social workers retaining contact.

The Task Group noted the impact that the growth in the independent sector has made in Scotland and the changes which have resulted from this. While the majority of foster carers are registered with local authorities, the numbers of foster carers registered with independent fostering agencies has grown from 8% in 2004 to 20% in 2008 (*The Fostering*



*Network, 2005, 2008*). As a result the market for potential foster carers has become more competitive and applicants are now making informed choices about the benefits of working with different agencies.

*'Prospective foster carers are doing an increasing amount of research and are keen to evaluate several agencies ... before making the decision to progress. A lot of prospective applicants shop around and gather a lot of information before they attend an information evening.'* (*Improving Fostering Services*)

In circumstances of full employment the place of financial reward through the payment of fees at levels equivalent to other forms of employment, is critical to attracting potential carers.

The Task Group reviewed the success of previous recruitment campaigns in Scotland over the past decade and found varying levels of success. In 1997-98 the Scottish Office pledged to co-fund a campaign with local authorities but this was postponed due to concerns about the ability of local authorities to handle the responses to enquiries. When the campaign did take place, in 1999, using press and radio, the images were perceived as negative and there was poor co-ordination at a local level, resulting in poor response from the public.

*'Foster care does help young people who haven't got a home.'*  
Young people,  
'Forgotten Voices'

Greater success was achieved in 2000, when a campaign described as *Unsung Heroes* was supported by National Foster Care Association, (now known as the Fostering Network), BAAF and the Convention of Scottish Local Authorities, (CoSLA). The campaign was piloted by 12 local authorities and delivered on local radio, across the central belt of Scotland. An investment of £22,000 resulted in over 130 calls to the Scot FM response line during the four-week campaign. Enquiries were passed on to local authorities for follow up. While there was no central tracking of the outcome of these enquiries to know how many of these resulted in successful foster carers, this was generally considered a worthwhile campaign.

In 2005 the Scottish Executive invested £12 million in fostering services to increase recruitment and retention in fostering services and there is emerging evidence that some authorities have used this very effectively to generate local recruitment activity.

### **Good practice in recruitment of foster carers**

The Task Group considered that future recruitment activity should build on the successful recruitment practice now evident to raise awareness of the need for foster carers across Scotland, to improve the capacity of all agencies to recruit locally, and to strengthen local initiatives with coordinated materials and activities. Some case examples of good practice have been shared through a series of digital magazines, *Improving Fostering Services*.

The key elements in good recruitment practice that were evidenced include:

- **Dedicated recruitment staff**

Some agencies appointed communications or recruitment officers who were skilled in marketing. These staff critically reviewed existing recruitment materials and responses to enquiries within the fostering teams and also established systems to analyse and monitor the effectiveness of campaign activities.

One authority has established a relationship with a recruitment agency who designs their materials and ongoing recruitment campaigns:

*'We have learned that creative, but realistic, messages generate quality in enquiries rather than quantity.'* (Team Leader, Fife)

- **Positive stories and real people**

Young people in foster care were keen to ensure good news stories are promoted to attract new foster carers: They did not wish to be exposed themselves, due to the negative attitudes of the media to young people in care. They were also concerned about pitiful images of young people portrayed in recruitment material. They recognised that experienced foster carers were the best people to promote fostering and thought their real foster carers' stories could counterbalance some of the celebrity approach taken by the media:

*'Show them how kids benefit'.*

*'How the kids can get better lives from being in care.'*

*'Use success stories to get more foster carers.'* (Young Person, YPP event, 2007)

The nature of the responsibilities involved in fostering is such that people take a long time to consider whether this is right for them and their family. When potential applicants are contemplating fostering, meeting someone who is actually a foster carer has a powerful impact in converting their interest to progressing with an application. This 'word of mouth approach' is well known to agencies and has been highlighted in research:

*'Over half the current carers said they came to hear and learn about fostering through relatives and friends or through their work, especially in social care jobs.'* (Triseliotis et al, 2000).

Well supported foster carers are advocates for fostering and are well placed to promote the benefits of fostering for their agency when they are satisfied with the service they receive. Media training for selected foster carers has been helpful in equipping them with the skills and experience necessary to handle TV and Radio interviews and manage these events successfully.

- **Coordinated national and local activity**

Agencies report that multi-layered campaigns are effective, especially when local efforts are supported by high level media activity and good quality promotional materials. Opportunities for TV coverage and celebratory events are hard for single authorities to organise, but can be planned and achieved when national and local agencies work together. The recurring evidence of this is during Foster Care Fortnight, an annual recruitment event organised by the Fostering Network across the UK. Local authorities and fostering agencies often plan local events during this fortnight and benefit from the impact of the overall awareness raising, as described by one authority:

*'We average 90 hits per week to our website. During Foster Care Fortnight alone we received 1,570 hits – an increase of 900% - with interest being generated through a targeted marketing plan of press, radio and outdoor advertising combined with heightened media attention.'* (Communications Officer, Edinburgh City Council).

At a national level the approach is one of raising public awareness about the need for foster carers, the benefits for children and the rewards involved in caring for other people's children. Local authorities plan to highlight their particular needs, using local features to illustrate some of the gaps in the service that they are particularly seeking to recruit foster carers to undertake. They also plan to have staff geared up to respond to increased enquiries and to handle applications following such planned events.

Such initiatives have attracted central government support in England, and this year the Fostering Network led an initiative to target specific recruitment activity to attract potential applicants, based on their motivation to foster. This work identified the following key groups, to whom the agency recommended there should be different marketing approaches, developed nationally and delivered locally:

- 'Empty nesters' - families whose own children have grown up or moved away
- 'Mother hens' - families who love protecting, nurturing and caring for children.
- 'Family builders' - reconstituted families, divorced and building up their new family.
- 'Career choice' - applicants seeking a change of career or lifestyle, often already involved in care related jobs.

(The Fostering Network, England, My Agency Joint consultation, 2008).

Broad promotional recruitment campaigns have most impact when combined with local activity and information and focus on the needs of children currently awaiting placement and specific information on the gaps in service:

*'The specialist carer scheme is aimed at retaining children with high (dependency) needs in a family placement, thereby avoiding some being placed in residential schools outwith Highland.'* (Improving Fostering Services, Issue 3).

Smaller, less well resourced authorities report having difficulty in obtaining budgets for professional recruitment materials and appreciate being able to use posters and DVDs produced by the Fostering Network to support their local recruitment. Some authorities describe their recruitment activity as pragmatic and piecemeal and they value the contribution made by the Fostering Network to promote the profile of foster caring all year round. All fostering agencies report the benefits of good quality promotional material to provide them with a backcloth to undertake their limited recruitment activity.

- **Managing response to enquires**

The Task Group identified that having effective procedures in place for responding to enquiries and progressing assessments as quickly as possible, are essential prerequisites. Some agencies reported benefits in the following areas:

- Rewriting leaflets and literature to cut out jargon
- Experienced, informed staff responding positively to initial enquiries
- Following up all enquiries with written information and opportunities for a face-to-face meeting
- Involving experienced foster carers at the earliest opportunities to inform and support potential applicants.

The Task Group were impressed with the rigorous systems in the independent sector for tracking enquires to completion of assessments. This sector also enhances its ability to complete assessments within realistic deadlines through the flexible deployment of sessional staff. These approaches appear to have contributed to increased numbers of new foster carers approved by the independent agencies. The incorporation of similar approaches may improve the performance of some local authorities in recruitment.

- **Comprehensive foster care web site**

As the web is becoming an increasingly important information source, fostering agencies' web sites can be the initial contact point for potential applicants. As illustrated earlier, some agencies are reporting hundreds of hits on their foster care web site, while other fostering services reported difficulties in having fostering mentioned on the local authorities Home Page. The Fostering Network undertook a survey of fostering agencies' web sites and found

great variation in the quality, accessibility and limitations of a number of local authority web sites. There was support for the investment in a comprehensive recruitment web site, able to promote fostering and offer a range of information and guidance on different ways of caring for children, from respite care to fostering and adoption that is also linked to local information and contacts in fostering agencies. The existing national web site for Fostering Network is primarily geared to foster carers and professionals already involved in fostering and does not have links to local authority fostering web sites.

- **Retention of foster carers**

The Task Group was concerned to ensure that retention of foster carers gains adequate attention and investment. Support for existing foster carers to retain their knowledge and experience within the service is important and benefits children throughout their childhood. The length of time the average foster carer provides service has increased since 1999, and in 2004 it was estimated to be 9.3 years (*The Fostering Network, 2005*). There are, however, substantial variations in the performance of different local authorities in relation to the length of time foster carers remain in their service. In 2004 it was identified that retention level in one semi-rural authority was 16 years, while in another urban authority, the average length of time foster carers were in service for less than 5 years (*The Fostering Network, 2005*). Improvement in retention may reduce the burden on recruiting and assessing new carers and any small increase in retention in some authorities reduces the pressure and placement shortages.

The reasons foster carers give for leaving service include age, lack of support provided by agencies, and the challenges experienced in fostering (*Sinclair, 2005; Triseliotis, 2000*). Some of the factors which improve retention will be explored further in other Chapters, however these include:

- Good remuneration and conditions of service
- A supportive and responsive link worker
- Being valued as part of the child's care team
- Opportunities for learning and development
- Recognition
- Access to practical support at times of crisis, especially 24 hour support
- Exceptional financial support, if required
- Respite breaks
- Recognition of the contribution of sons and daughters to the success of placements.

The Task Group considered that fostering managers should review the performance on retention of foster carers by regularly scrutinising the number of foster carers leaving the agency and examining the reasons foster carers give up fostering, resign, move agency or are deregistered. Recruitment activity should be complemented with strategies at a local and national level to support retention of foster carers, through recognising and valuing their role, through training and development and through celebrating success in foster care. Valuing existing foster carers and involving them in all stages of the recruitment and support of new carers, builds capacity within the fostering service, the loyalty of these carers and their role as ambassadors for foster caring and for the agency.

## **New Initiatives**

The Task Group is keen to support new initiatives which may increase the development and sharing of fostering resources in Scotland. It was concerned to offer possible solutions to address the stale mate which currently exists between those authorities which are resource rich and those which are desperately short of new foster care placements. The Task Group is aware that there is no incentive for the former to recruit foster carers to supply the latter.

This results in some children being placed with foster carers who live a long way from their responsible local authority, as illustrated in the map of placements of children from three of the city authorities. Such distant placements are not conducive to rehabilitation plans for children and are rarely cost effective for authorities.

There is a history of resistance to sharing resources between some authorities and currently when an agency has exhausted its supply of foster care placements, its next recourse is to purchase a placement from the independent sector. There is a need for better collaborative arrangements between authorities, especially between cities and hinterland authorities, to develop strategies to recruit, assess and share foster care resources across authority boundaries.

The Task Group supports the emergence of local partnership arrangements, or consortia, to support the development of collaborative arrangements between authorities for the recruitment and sharing of foster care placements. There are some limited examples of consortia arrangements between authorities which plan recruitment, co-ordinate preparation groups and share resources, though these appear to work more effectively in relation to adoption and permanent foster care placements rather than short term foster care placements. In the competitive market that exists developing such collaborative arrangements for sharing resources between authorities would be a cost-effective investment by these authorities.

New recruitment partnerships may need to be piloted to address some of the underlying differentials in fees and to provide incentives to some authorities to recruit foster carers beyond their requirements. Some professional support and investment may be required for these arrangements to become established and to share the learning from the pilot arrangements. Such partnerships could offer a context in which to plan and deliver the national and local coordinated recruitment activity described earlier in this Chapter. Some local recruitment partnerships could involve the independent sector in their recruitment and assessment activity to build up their capacity and resources.

Currently, most independent fostering agencies provide individual foster care placements to local authorities on a case by case basis, though a few larger authorities are developing a strategic approach to commissioning independent fostering agencies to provide a specified number of placements to meet the projected needs of the authority, agreeing the number, nature and location of these resources. In England, commissioning between local authorities and the independent sector is better developed and it can be anticipated that a similar pattern will emerge in Scotland. Local authorities may need to review and plan which aspects of their fostering service need to remain in-house and which they could usefully commission from the independent sector, in order to meet need as effectively and efficiently as possible.

It has become evident in the course of the work of the Task Group that the new concordat between the Scottish Government and local authorities presents new challenges and new opportunities for working together, between and across agencies and government.

#### **Young People say:**

##### **Learning is Part of Support to Carers**

- ☐ How to cope with a child
- ☐ How to understand their needs
- ☐ How to resolve conflicts and deal with emotionally stressful situations
- ☐ How to support children
- ☐ How to deal with confidentiality issues

### **Key messages and recommendations**

- Sustained investment in recruitment of foster carers is required to meet the current demand and anticipated need for new foster care placements.

- There is evidence of good recruitment practice in Scotland in some of the larger local authorities, though there is need to encourage smaller, more resourceful, authorities to build up their recruitment activity to add capacity to overall foster care resources.
- The Government in Scotland should invest in ongoing public awareness activity to promote fostering and to develop materials and resources to support and coordinate local authorities in their recruitment activity.
- National and local authorities should work collaboratively to plan and co-ordinate their recruitment activity to gain maximum benefit.
- Recruitment activity should be complemented with initiatives, which support the retention of foster carers.
- New initiatives should be piloted, to encourage authorities to collaborate in local recruitment partnerships, to coordinate recruitment activity and to provide incentives to share resources.
- Local authorities should consider the strategic use of independent fostering agencies.

### **10.1.1 Outcomes - RECRUITMENT OF CARERS**

#### **Outcomes for children if successful recruitment is in place**

- ♦ Children who cannot live with their birth parents or wider family/kinship carers have the opportunity to live with foster carers if this is in their best interests
- ♦ Children have a choice of foster care placement at the point of leaving home and are able to stay within their community and close to their family and home wherever possible
- ♦ Children who live with foster carers have a positive experience, enhanced life chances and the benefits of a long-term and secure placement
- ♦ Children in well selected, assessed and supported foster care placements have a positive image/profile locally and nationally
- ♦ As children's care presents new challenges, recruitment adapts to attract suitable carers

Underpinning all the different activities listed below, carers need to be valued, respected, supported and recompensed.

**Some of the actions needed to achieve these outcomes are set out in the sections that follow.**

#### **Short term**

- Sustain year round awareness of the need for foster carers across Scotland and in communities
- Build on successful recruitment and retention practice
- Use positive stories of children and carers and involve foster carers to talk about positive experience of fostering
- Ensure effective procedures are in place for responding to enquiries and processing assessment work with prospective foster carers
- Have dedicated recruitment staff to make campaigns more effective
- Use targeted marketing approach to increase effectiveness of recruitment
- Have comprehensive information available through various sources, including on the web

- Improve the quality and scope of information available on websites
- Complement recruitment activity at national and local level with strategies to support retention of foster carers
- Do better targeting of recruitment and advertising using demographic information and analysis
- Start to explore the potential for recruiting in collaboration with neighbouring Councils and appropriate voluntary or independent agencies

### **Medium term**

- Collect statistical data on foster carers to make better informed foster care recruitment decisions
- Have ongoing high quality campaigns across Scotland on both national and local level to attract more foster carers which will help to maintain enough carers to meet changing demands
- Combine national campaigning to increase awareness with local action aimed at recruiting more carers while sharing resources, using quality promotional materials and activities
- Work on the factors which improve retention of foster carers such as good remuneration, having supportive link worker, being valued and recognised, having opportunities for development and practical support
- Support involvement into new initiatives and encourage sharing resources between authorities
- Develop a comprehensive foster care recruitment website to promote awareness and interest in fostering and permanent care
- Work towards a strategic plan for the use of carers from independent agencies to achieve best value and local high quality placements

### **Long term**

- Continue sustained investment at national and local level in foster care recruitment
- Maintain as much effort in relation to retention of foster carers as in recruitment
- Use good positive experience to mount successful advertising campaigns
- Improve local capacity to recruit locally
- Encourage more effective work between national and local agencies
- Improve collaboration with independent fostering agencies
- Invest in ongoing public awareness raising about the need for foster carers- along similar lines to the Children's Panel members publicity/ for the Government in Scotland
- Support development of local partnership agreements to encourage collaborative arrangements between authorities for the recruitment and retention of foster care placements

## 10.2 Task Group report - Assessment of Foster Carers

### Introduction

The task of the group was to review the current assessment processes for foster carers and identify any areas for improvement to make the process more effective. The following areas were identified as meriting consideration:

- The skills, confidence and competence of those undertaking assessments,
- Whether the assessment process deters or discriminates against particular applicants or groups,
- What would constitute best practice in the involvement of applicants' own children and extended family, and
- Does the assessment process lead to the selection of people who will promote good outcomes for children.

### What the task group did

The task group, met on 4 occasions, and decided that the most effective way of fulfilling the remit was to bring together existing material on the assessment of prospective foster carers. The group carried out the following work in between the meetings of the group:

- Discussions with and visits to a number of local authorities
- A meeting with children of foster carers
- Attendance at ADSW Fostering and Adoption sub committee
- Review of relevant research and publications

The group were also fortunate in having access to:

- Material which had been gathered as part of the Care Commission's Inspection of Fostering Services in 2006/2007;
- A small piece of research undertaken by tFN with the sons and daughters of foster carers;
- Minutes and discussions of the Adoption and Fostering Panel chairperson's forum;
- Minutes and discussions of BAAF's Scotland's Advisory Committee for Family Placement Managers;
- Discussions of the Independent Fostering Providers Forum.
- Views of fostering panel members and assessing social workers in different parts of Scotland.

In conducting its work the task group made the following assumptions:

- The task of caring for a vulnerable child in such a way as to promote his/her health and well-being is an onerous one. There is therefore a responsibility on fostering agencies to satisfy themselves by a robust preparation, assessment and selection process that anyone approved as a carer has demonstrated, to the satisfaction of the agency that they have the potential to offer this level of care.
- Whatever assessment 'process' is used, the final recommendation will essentially be a 'predictor' not a guarantor of the eventual performance of the foster carers.
- There already exist a range of frameworks and methods of conducting assessment and the group was not tasked with developing another.



## The Context

### The development of foster carer assessment

The assessment of prospective foster carers is a challenging task. The aspiration of any assessment is to identify whether applicants have the potential to provide a safe and nurturing environment to a vulnerable child or young person and thereby promote good outcomes for him or her.

It is not a scientific process and any recommendations for approval are a matter of judgement and not certainty. As the number of children placed with foster carers has increased, so have the demands on individual carers. Fostering children and young people who have experienced separation, loss and abuse requires high quality parenting skills and an ability to work as a member of a team of professionals. Writing reports, keeping records, attending meetings are as much part of fostering as preparing meals, listening to anxieties and helping with homework.

A further dimension to the complex task is the increasing expectation on foster carers to work sensitively and compassionately with the parents and other birth relatives of the children and young people in their care. Preparing children for contact visits, and facilitating rehabilitation arrangements require skills of tact and empathy. Respect for a child's origins and an awareness of his or her divided loyalties is a quintessential requirement for the fostering task.

Historically a fostering assessment would consist of an inspection of the premises, checks to establish the good character of the applicants and a friendly chat about what might be involved. Over the last 30 years fostering assessments have become more detailed and have focussed more on applicants' own histories, particularly their own experience of being parented and their capacity to form attachments. A significant development was the introduction of competency-based assessments focussing on the formulation of a set of skills or competencies for which evidence could be sought and recorded.

#### TOP QUALITIES of Carers

- ☐ Understanding
- ☐ Patient
- ☐ Caring
- ☐ Forgiving
- ☐ Supportive
- ☐ Good listener
- ☐ You can have a good laugh with

Young people,  
'Forgotten Voices'

In Scotland the work done by the Scottish Recruitment and Selection Consortium (published 2001) added to the debate. The work was developed having talked to carers who were identified as "good at the task" and could evidence key capabilities, such as flexibility, interpersonal understanding, self confidence, emotional awareness, tenacity, achievement, drive, service user orientation, planning and organising and working with role boundaries. These sets of key capabilities resonate with other studies which have highlighted flexibility, empathy and lateral thinking as indicators of successful carers. The consistency of view about qualities of carers does not necessarily assist in the assessment task as these qualities remain intangible, the presence or absence will be evidenced by what applicants have done, what others say about what they do, and an analysis of this by the worker.

Heightened awareness of the need to protect children has led to more rigorous checking of applicants' histories and criminal records to identify any potential risks. Practice and research has also raised awareness of the impact on children and young people of their experiences of abuse and neglect. This in turn informs expectations about the care and nurture which they should receive if they are to flourish.

The study of fostering placements and in particular those that disrupt have provided helpful insights into the background and experience of carers which might make them vulnerable to the stresses of the task. There therefore now exists a considerable body of experience and research about fostering and fostering assessments best summarised in a recent major

research study “Fostering Now” (2005). Ian Sinclair concluded “we know now a great deal about how to support foster carers and about the kinds of fostering that children need.... Foster carers who are kind, firm and slow to take offence are likely to have better results than others who embody these antique virtues to a less marked degree. There is much less evidence on how to select, support or train carers so that their performance approximates more closely to the ideal.

Progress will thus depend on two things; on the one hand a willingness to implement the good practice whose nature is already clear and on the other creativity in the development of practice, skill in defining what has been developed and willingness to rigorously evaluate its results”.

## **Current assessment practice in Scotland**

As with any activity, fostering is something, which requires support and opportunities for further training and development. An initial assessment can only identify potential, which must then be supported and developed.

Until very recently the main providers of foster carers in Scotland were local authorities and a small number of voluntary agencies. The fostering landscape has now changed with the development of the independent fostering sector. Another significant development is the payment of professional fees to carers, with, in some agencies, the opportunity to progress through a number of levels (and payment rates) dependent on completion of further training and/or ability to offer care to complex and challenging young people.

Staff from fostering teams usually conduct assessments of prospective foster carers but increasingly staff may be employed to do assessments only, sometimes on a sessional basis, and not other aspects of family placement work. All assessments of prospective foster carers have to be presented to a fostering panel who consider the assessment report, meet with social workers and applicants and then make a recommendation to the “decision maker” in that agency. The general expectation about matters to be covered in a fostering assessment and the responsibilities of the fostering panel are set out in Regulations 4,6,7 and 12 of the Fostering of Children (Scotland) Regulations 1996. National Care Standards 5 & 6 specify what prospective applicants can expect of the fostering panel and the agency.

Fostering assessments are usually conducted once applicants have had an opportunity to attend preparation groups. These groups use materials produced by tFN, adapted by individual agencies and augmented with inputs from foster carers, birth relatives, young people who have been fostered and others.

A fostering assessment or home study is carried out in the applicant’s own home and will consist of discussion between the assessing workers(s) and the applicants on a wide range of matters, including applicants’ own history, parenting experiences, education, relationships and employment. Applicants will be asked to write or talk about themselves, read and comment on case studies and scenarios, solve problems, draw family trees and eco maps and above all reflect on how these experiences have impacted on them and their potential to understand, empathise and care for a vulnerable child. Health is considered and references sought from individuals who know the applicants well as well as Disclosure (Scotland) checks. All this information is analysed by the worker(s) and an

*‘Well, my experience of foster care when I was younger was an absolute nightmare right up until my foster mother accepted and helped me for who I was and not for my background and what happened to me in the past’*

Young people,  
‘Forgotten voices’

assessment made of the strengths and vulnerabilities of the applicants. Conclusions and recommendations are supported by “evidence” drawn from the information shared during the course of the home study.

The experience of being assessed can be at times both exciting and anxiety provoking. Some applicants relish the opportunity to talk about their lives and interest in children, whilst being unsure whether their application will be accepted. Other people find the scrutiny deeply intrusive and disproportionate. There can be a sense of being “judged” not as a prospective foster carer – but as an individual. The reality is that the assessing worker is undoubtedly in a powerful position as his/her views and analysis of the applicants will be a key determinant in whether the application is successful or not.

The worker must use their interpersonal skills, emotional intelligence and knowledge to make the assessment process an effective and positive one for the applicants irrespective of the outcome. Workers require to be aware of the needs of children awaiting or likely to need placement and the likely impact of such children on a foster family. They also need to be mindful of their own view/values, prejudices and stereotypes and how these can impact on their behaviour and influence their ability to accurately interpret applicants’ histories and behaviour.

In recognition of the significance of the decision to approve prospective carers, regulations and a robust quality assurance process requires applications to be scrutinised by a fostering panel who will then make a recommendation to the appropriate agency decision maker. The panel, with its range of members representing different stakeholders, is charged with the responsibility of establishing whether significant work has been done on the preparation and assessment, and whether the conclusions reached are adequately supported by the work undertaken by the assessing practitioner.

Fostering agencies in Scotland are subject to annual inspections by the Care Commission who published an overview report in November 2007. This report identified that “In general people who applied to become foster carers expressed a high level of satisfaction with the service provided to them when they applied”. “Assessments are generally comprehensive and include all members of the fostering household”.

Concern was however expressed by the Commission about fostering panels in terms of both their composition and training with 47% of inspection reports including a requirement to address this issue. The involvement of foster carers and those brought up in foster care was seen as being important.

## **Task Group Findings**

Areas for further consideration and action:

1. Assessment reports are presented on a range of formats using templates
  - Produced by BAAF or tFN
  - Adapted from templates produced by BAAF and tFN
  - Developed by agencies themselves
2. Panel members who have the task of scrutinising reports expressed concerns that:
  - Reports contain at times considerable amounts of narrative but very little analysis
  - Assertions about applicants’ capacities are not always substantiated by actual evidence/examples

3. Concerns were also expressed to the task group about what constitutes best practice in relation to the following:

- References including making contact with former partners
- Involvement of all family members in the assessment
- Applicants' health and life style particularly weight/smoking/use of alcohol/exercise/mental health
- Expectations of applicants in relation to embracing difference and diversity.
- Attendance of applicants at panels
- Determining for how many children carers should be approved.

4. The group could find no data from across Scotland on the ethnicity of foster carers, or those who have a declared disability. Information was available on strategies used when working with applicants whose first language is not English and seeking specialist advice.

5. After the presentation of the report to the fostering panel, assessment reports do not appear to be used in a proactive way. Foster carer reviews focus on the "remit" of carers rather than on any reflection as to whether the factors that were seen to be important in the initial assessment have, in fact, proved to be so. For those applicants who continue to have their assessing worker as a link worker the knowledge shared during the assessment process is not lost and reflection is likely to occur as part of the ongoing relationship. If a different worker takes over, however, the assessment report could potentially be used as a valuable basis for discussion. Knowledge and awareness of carers' own histories are critical in preventing placements likely to overwhelm the carers.

6. Those conducting assessments benefit from access to ongoing training and development, from opportunities to reflect on their practice, and discuss individual applicants with someone with knowledge and experience of family placement. Practitioners also value access to current literature and research. For example, trauma as it affects children is an area of knowledge expanding exponentially. The recognition of secondary trauma in foster carers is less well known – but assessing workers need to be aware of this and have the opportunity to reflect on what this means for assessment.

7. A considerable amount of literature and research is available on family placement but there is no requirement (other than the basic requirement of the SSSC) for workers to undertake any professional development that is specific to family placement work, and in particular the assessment of carers.

8. There are no agreed standards as to the level of support and supervision that should be available to assessing workers.

9. There are no agreed standards as to the experience and skills which a worker should be asked to demonstrate before undertaking assessments in order to meet the requirements in Care Standard 6.

10. There are no agreed standards as to the skills, experience required by others involved in the assessment process e.g. panel members, or of the training and development opportunities which should be made available to them.

### **Initiatives and developments which contribute to best practice**

The group identified a number of initiatives and developments, which contribute to good practice. The group believes that information about these initiatives should be shared via a robust national framework for disseminating best practice.

- Holding family meetings at which children and other members of the extended family can contribute to the assessment.
- A dedicated worker undertaking sessions with prospective carer's own children.
- Co working- with two workers undertaking an assessment to reduce potential for subjectivity.
- Applicants' children attending preparation groups.
- 'Second opinion' visit to applicants.
- Supervising managers sampling assessment reports across the service.
- Panel members providing feedback on the quality of assessment reports presented to the fostering panel.
- Step by step guides for assessing workers.
- Opportunities for inexperienced and experienced practitioners to have regular development sessions.
- Staff undertaking assessments being supported to attend post qualification courses of study.

The task group were mindful of new developments in assessing carers that will arise from considering applications from same sex partnerships. This will require assessing workers and panel members to review current expectations and models of "who can parent". The focus will remain on identifying those people who can promote children's well being, but applicants may present their evidence in a different way.

Workers and panel members will have to draw on their knowledge and emotional intelligence to analyse and correctly interpret the different histories which applicants will share with them. In these, as indeed all applications, assessing workers and panel members must feel confident to make decisions based on children's welfare without fear of charges of discrimination. The group learned that training materials are available to support practice in this area, and have already been made available via workshops and practice guides.

## **Summary and Conclusions**

The task of being a foster carer is immense and complex. It involves the provision of nurture to children and young people who have experienced abuse, rejection, separation and loss. These experiences can cause children and young people to be rejecting of affection, disobedient, abusive and capable of harm to themselves and others.

Foster carers have to do more than offer nurture; they have to find ways of helping children accept and receive what is being offered. They must be able to draw upon qualities of empathy and compassion as they meet with the parents of the children who are fostered, parents who may be hostile to the plans for their child but whose abilities have been compromised by abuse of alcohol or drugs or impaired by physical or mental ill health.

The foster care task is both a private and public one. Children are being cared for within a family setting, social workers and other professionals are not constantly there to supervise/monitor. They are, however, a vital part of the legal and regulatory framework in which fostering operates. Foster carers have to work as part of this team and be held accountable. They must be trustworthy and responsible.

Operating in such a framework and caring for vulnerable children, inevitably takes its toll on carers' own health and wellbeing and they themselves will need nurture and support. Foster carers require the capacity to reflect on what is happening to them, withstand stress and anxiety and ask for support when needed.

If the task of being a foster carer is a demanding one so is the task of assessment, as the amount of literature on the topic illustrates. It is also a process, which is often misunderstood. Social workers are sometimes portrayed as idealistic excluding well-intentioned people because of weight, smoking or religious and political views, creating difficulties for people who simply want to look after children! Another portrayal is of assessing workers obsessively concerned with the applicant's own history and background rather than on their current abilities.

In reality, the task of assessment is one in which the worker must:

- establish a thoughtful and considered working relationship with applicants;
- draw on his/her skills of assessment, analysis and reflection;
- be sufficiently well informed and prepared so as to work effectively with applicants from black and minority ethnic backgrounds;
- be able to consider any applicant on the basis of his/her merit as a prospective carer without discrimination arising from personal values or attitudes;
- use clear communication and interpersonal skills to sustain the working relationship;
- establish whether applicants have a clear understanding of the fostering task and its likely impact on them and their family;
- balance the positives and potential risks that any child would experience if placed in that family.

As the number of foster carers in Scotland increases, so does the number of workers who undertake assessments and the managers and panel members who scrutinise and quality assure their work. Practice has evolved in response to policy developments, enquiries, inspections and listening to the experience of foster carers, birth relatives, children and young people. Applicants are assessed by one worker, or perhaps by two, asked to complete homework – carry out activities, quizzes, read scenarios, demonstrate competencies, provide evidence, and offer references. The range of approaches and possible intervention is formidable. Knowledge and information is constantly expanding.

The task group at the end of its work has reached the following **conclusions**:

- that the skills, knowledge and confidence of workers undertaking fostering assessment are the critical element of the process;
- the skills and knowledge of workers must therefore be supported by a robust management and training structure;
- an accepted framework for training, support and supervision for these social workers would ensure opportunities for continuing professional development, to sustain and develop skills
- the assessment of prospective carers is not a “stand alone” process but one which must be integrated into ongoing family placement work and informed by placement outcomes for children;
- as carers continue to be drawn from a wide range of backgrounds the manner in which assessments are carried out must be kept under review and best practice widely disseminated to ensure that no-one is disadvantaged by the lack of relevant knowledge and skills on the part of assessing workers or panel members.

## Task Group Recommendations

### Staffing

- Staff undertaking assessments and those supervising them should be adequately trained and supported with opportunities for further training and development as set out in the framework at Appendix A.
- ADSW and COSLA should endorse the framework (Annex A)
- The Care Commission should consider using the framework (Annex A) as a way of evaluating whether fostering agencies meet specified standards in relation to the fitness of agency staff and the fitness of the manager.
- The Scottish Social Services Council should be asked to consider the implications of the framework (Annex A) in particular whether the social workers re-registering have undertaken the suggested post qualification training.
- Those who provide education and training to members of the social work workforce should be encouraged to seek SQA accreditation for their courses, which relate to family placement practice.

### Assessment process

- Assessing workers should be given the time to carry out thorough assessments.
- The recommended time of completing assessments in six months, as set out in care standards should not be adhered to at the expense of rigorous work by the assessing worker which may require more time.
- Assessing workers should be made aware via training and other sources of information of best practice/new information, which they could use, as part of the assessment process.
- The perspective of applicants' children/extended family should be actively sought during the assessment process, using a variety of methods including direct contact, family meetings, group work, books and games.
- Consideration should be given to the establishment of an easily accessible resource (possibly web based) where workers could access ideas/information about different methods/strategies for working with applicants and children.
- No single approach to the assessment task fits all situations, but assessing workers must be able to describe and report how the method of working was adapted to the particular circumstances of the applicants.
- The perspective of applicants on the process should be actively sought and reflected in the assessment report.
- The quality assurance function carried out by supervisors, fostering panels and agency decision makers should be supported by a clear distinction in reports between description, analysis and recommendations.
- Reports should identify why a particular conclusion has been reached so that discussion can take place about the validity/reliability of the final assessment.
- A nationally accepted format for recording the manner and outcome of foster carer assessments would enable clarity of expectation about content and style and facilitate nationally provided training and guidance.

## **Fostering panels**

- Panel members should receive information about the role, expectations of them as panel members and opportunities for training and development. See Appendix A
- Panel members should be drawn from a number of sources and reflect a range of perspectives related to the fostering task. They must be satisfied that the work undertaken by the assessing social worker has been of an acceptable quality and that the recommendation can be supported on the basis of the work done with the applicants.
- Panel procedures should be clearly set out for all concerned and reviewed to consider whether the panel continues to exercise their legal obligations and provide a robust quality assurance function.
- Care must be taken to ensure that the fostering panel does not take on the assessment function which is the responsibility of the assessing worker(s).
- Particular attention should be paid by panels to the terms of approval which are recommended (e.g.) age range of children, numbers of children, type of fostering.
- Where approval is sought for more than one child, panels should ensure that the reports demonstrate capacity on the part of carers and not simply the availability of accommodation.

## **Post approval**

- Greater use should be made of assessment reports when undertaking reviews of foster carers rather than simply the final recommendation about the carers' terms of approval.
- Assessment reports should assist in identifying areas for further training
- Foster carers should be encouraged to use their assessment reports as part of their reflections on fostering when preparing for reviews.
- Agencies should monitor and collate information relating to ethnicity of carers and ethnicity of community/locality – to identify whether particular groups are represented proportionately within the community of foster carers.

Addressing these areas would, the Task Group believes, enhance the assessment and approval process for foster carers and provide the basis for the ongoing work with foster carers.



### **10.2.1 Outcomes - ASSESSMENT OF CARERS**

#### **Outcomes for children from good practice in assessment**

- ◆ Children have positive experiences of growing up in foster care with carers who have the skills, flexibility, empathy, emotional awareness, tenacity, humour and understanding of young people's needs to help them to grow and develop.
- ◆ Children are cared for by foster carers who have been carefully and thoroughly assessed and approved to care for children.
- ◆ Children are placed with carers who can provide skilled and consistent care to them despite challenging behaviour.
- ◆ Children are placed with carers whose background and ability to provide safe care has been carefully checked and have been assessed as safe and fit to care
- ◆ Children are placed in long term placements that promote their well being and meet their needs for stability and certainty by workers who are skilled and experienced in assessing foster carers and are aware of the needs of the child and of the foster carers' skills and approach to care.
- ◆ Children's views are taken into account through the process, particularly when the decision is made about the foster care placement.

**Some of the actions needed to achieve these outcomes are set out in the sections that follow.**

#### **Short term**

- Social workers undertaking assessments are given adequate training to undertake sound and creative work in assessing carers
- Good practice in assessment is shared in local consortia of workers so that carers are assessed most effectively
- Social workers undertaking assessments are given adequate support, time for reflection and opportunities to enhance their skills and knowledge
- First line managers help workers to gather information, coordinate information and analyse the information to prepare their report to the Fostering Panel
- Gather good practice across agencies and develop ways of disseminating it more widely
- Provide Fostering Panel members with opportunities to enhance their knowledge and skills in their tasks
- ADSW, COSLA and SSSC engage in discussions on the development of the framework for training, support and supervision (Annex A)
- Agencies use the assessment report after approval in preparing for Carer Reviews and to identify training needs of carers

#### **Medium Term**

- Further development of the framework for the provision of training, support, supervision and management is undertaken and an assessment made of the resources needed to implement the framework

- COSLA and ADSW are encouraged to endorse the proposed framework
- COSLA, ADSW and training providers explore sources of funding for the development of the framework
- Management continue to support assessment as a specialist task and ensure that staff have the time to complete thorough assessments.
- Corporate parents and planning partners recognise the specialist task of assessment and are prepared to contribute to the assessment as required

### **Long term**

- Agencies evaluate the factors that make foster carers successful and build that learning into assessment considerations
- National standards for the level of support and supervision of assessing workers are developed collaboratively by agencies and the Care Commission
- National standards for the level of experience and skills a worker should be able to demonstrate before undertaking assessments are developed collaboratively between agencies and the SSSC
- Recruitment targets people from a wide range of backgrounds as carers.
- Workers are supported to develop understanding and confidence to value and promote diversity in family placements



## Annex A

### UNDERTAKING FOSTER CARER ASSESSMENTS

A framework for the provision of training, support, supervision and management

POSITION/ RESPONSIBILITY	QUALIFICATION	ACCESS TO	RESOURCE IMPLICATIONS	NCS/Regs *
<p><b><u>SOCIAL WORKER</u></b></p> <p>Undertaking foster carer assessment. Duty is to undertake an assessment, which meets the requirements specified in regulations, guidance and standards. Able to provide applicants with a realistic and informed view as to the potential demands of caring for children separated from birth family who have experienced separation, loss and abuse.</p>	<p>Social work qualification.</p> <p>Experience of childcare/ family placement (suggest 2 years).</p> <p>Other experience as unqualified worker/residential worker or student placement would also be recognised.</p>	<ul style="list-style-type: none"> <li>Experienced family placement practitioner either employed by agency on a full time basis or offering mentoring on a regular basis.</li> <li>Opportunities for joint working.</li> <li>Supervision to reflect on their learning and to the impact of the work on their own lives and functioning and consider specifically anti-discriminatory practice.</li> <li>Peer group discussions.</li> <li>Availability of experienced practitioner/manager to undertake joint visits if required.</li> <li>To specialist consultation when required.</li> <li>Opportunities for training in key issues in family placement practice (minimum 5 days per year).</li> <li>Tools, ideas, strategies, information about different approaches to the task, including involving children/other significant adults.</li> <li>Clarity about framework to be used for the completion of the report and expectations of the panel.</li> <li>Step by step guide/workbook – standardised for all agencies in Scotland.</li> <li>Feedback on progress of applicants and correlation with original assessment.</li> </ul>	<p>Normally available within a family placement team but small service would need to consider making provision for mentoring if these skills are not available.</p> <p>Normally available via health/legal advisers but particular cultural/language advice might be required at a cost to the agency.</p> <p>Consideration to be given to an agreed set of topics or themes to be covered.</p> <p>Would it assist to have a nationally endorsed framework to assist with the development and training aspects referred to above. Cost of installing the facility.</p>	<p>NCS 5.4, 5.8</p> <p>NCS 13.4</p> <p>NCS 6.1 and NCS 11.1, 11.3 Fitness of Employees Regulation 9 (2) (b)</p>

POSITION/ RESPONSIBILITY	QUALIFICATION	ACCESS TO	RESOURCE IMPLICATIONS	NCS/Regs *
<p><b><u>SUPERVISING MANAGER</u></b></p> <p>Responsibility for:</p> <ul style="list-style-type: none"> <li>providing workers undertaking assessments with an opportunity to reflect on their practice and, quality assure the work.</li> <li>advising worker about best practice, relevant research, resources etc.,</li> <li>providing support to the worker including joint visits to applicants and attending the relevant panel.</li> </ul> <p>(Do we need to make a stronger recommendation about these duties and responsibilities in relation to inexperienced staff?)</p>	<p>Qualified social worker with experience in family placement or access to mentoring.</p> <p>Experience in staff supervision.</p>	<ul style="list-style-type: none"> <li>Supervision</li> <li>Peer group discussions (within and outwith the agency).</li> <li>Opportunities for training on specific family placement issues (minimum of 2 days per year).</li> <li>Specialist consultation.</li> <li>Clarity about framework for completed report and panel requirement.</li> <li>Feedback on progress of applicants and correlation with original assessment.</li> </ul>	<p>May not be available within agency opportunities may be required to achieve this by attending meetings/practice fora.</p> <p>Opportunities to seek external advice if not available within agency itself.</p> <p>Availability of clear agency policies and guidance.</p>	<p>NCS 13.4</p> <p>NCS 13.7 NCS 13.3</p> <p>NCS 13.4</p> <p>Fitness of Manager Regulation 7 (2) (d) Regulation 7 (2) (e) Regulation 13 (c) (i) (ii)</p>

POSITION/ RESPONSIBILITY	QUALIFICATION	ACCESS TO	RESOURCE IMPLICATIONS	NCS/Regs *
<b><u>PANEL MEMBER</u></b> Duty to consider applications presented by the agency and to do this in a way which meets the requirements set out in regulations, guidance and standards.	Holds specific qualification: Psychologist, medical practitioner, social work practitioner or representative of either foster carers (their families), birth relatives or young people looked after and accommodated.  Able to read and assimilate complex material and identify relevant matters, participate in discussions	<ul style="list-style-type: none"> <li>• Induction programme to include agency policies and procedures and examples of assessment reports</li> <li>• Opportunities for training and development as a panel (once a year as a minimum)</li> <li>• Opportunities to attend other training provided by the agency.</li> <li>• Opportunities to attend relevant external training</li> <li>• Feedback on applicants progress</li> <li>• Panel chairperson in order to discuss and resolves specific issue arising from work.</li> </ul>	Availability of staff to provide this.   Availability of staff to provide this and financial support in order to take time off work/travel etc.	NCS 12.1  NCS 12.9   NCS 12.8
<b><u>PANEL ADVISER</u></b> Responsibilities for ensuring that the panels function effectively and within prescribed format. Able to offer advice and information to panel.	Qualified social worker.  Experienced family placement practitioner.	<ul style="list-style-type: none"> <li>• Peer group support</li> <li>• Opportunities for training and development (suggest a minimum of 2 days per year)</li> <li>• Clarity about framework and expectations of the panel and agency requirements</li> <li>• Agency decision maker</li> <li>• Chairperson of the panel</li> </ul> Overview of current approved foster carers/children needing placement.	May have to source this outside the agency   Should be provided by agency	NCS 12.9   NCS 12.3 NCS 12.11

POSITION/ RESPONSIBILITY	QUALIFICATION	ACCESS TO	RESOURCE IMPLICATIONS	NCS/Regs *
<b><u>PANEL CHAIRPERSON</u></b> Duty to ensure that the panel does what is required to do and operates within the required statutory framework.	Knowledge of family placement practice and policy.  Experience of and skills in chairing meeting.	<ul style="list-style-type: none"> <li>• Induction programme</li> <li>• Specific training</li> <li>• about role of chairperson</li> <li>• Ongoing training</li> <li>• development opportunities ( min 1 day per year) on family placement issues</li> <li>• Opportunities to attend agency and external training events</li> <li>• Peer group discussions</li> <li>• Agency decision maker</li> <li>• Panel adviser</li> </ul>	May require to attend external courses     May require to attend external courses	NCS 12.1  NCS 12.9  NCS 12.3
<b><u>AGENCY DECISION MAKER</u></b> By using the material considered by the Panel make sound decisions in relation to the approval of prospective carers.	Qualified social worker  Experience/ knowledge of the needs of looked after children.	<ul style="list-style-type: none"> <li>• Relevant information/research about family placement</li> <li>• Peer group discussions</li> <li>• Deputies</li> <li>• Specialist advice</li> <li>• Meetings/liaison with panel chair person/ panel advisors</li> </ul>	May need to access this outwith the agency	NCS 12.5 NCS 13.2, 13.3
<b><u>MINUTE TAKER</u></b> Take clear and concise notes of the meeting.	Experienced minute taker.  Knowledge of family placement.	<ul style="list-style-type: none"> <li>• Induction programme</li> <li>• Specific training</li> <li>• about the role</li> <li>• Panel chair person</li> <li>• Panel adviser</li> <li>• Opportunities to attend relevant training (minimum 1 day per year)</li> </ul>	May need to source this externally	NCS 12.3 NCS 13.2 NCS 13.6  NCS 13.4  Fitness of Employees Regulation 9 (2) (b)

- National Care Standards – Foster Care and Family Placement Services.
- Regs – Scottish Statutory Instruments 2002 No. 114 The Regulation of Care (Requirements as to Care Services) (Scotland) 2002 as amended.
- Regulation 7 Fitness of Managers.

## 10.3 Task Group report - Training of Foster Carers

### The Training needs of Foster Carers

#### Remit and Focus

The remit of the task group was primarily to assess the training needs of foster carers, and consider how the development of their knowledge and skills can be taken forward through training to meet the current and future challenges which carers face. The group focussed initially on gathering information about the current training provision for foster carers across Scotland, and sought views on training gaps, and also the challenges and barriers to delivering and participating in training. It was also important to take account of current knowledge and skills development training programmes which are available to the wider child care workforce, and which could be equally relevant for foster carers.

#### Contacts

The group consulted with a range of relevant stakeholders during the period January to June 2008. These included foster carers, specialist trainers, family placement staff from both local authorities and independent providers, and also representatives from the Care Commission, SIRCC, SSSC, Scottish Government, ADSW (Fostering and Adoption sub group), and AKAMAS.

#### Reference Documents

The group referred to the findings outlined in some key reports and research undertaken in recent years which could be found in Appendix 4.

#### Consultation

In addition to a series of meetings with stakeholders two surveys were undertaken with the assistance of independent staff from tFN. A small sample telephone survey of carers' views on training was undertaken - see Appendix 1. Carers were contacted directly to establish what training they had recently been offered, and also to seek their views on training generally, and some of the possible barriers to participating in training events. A questionnaire was sent to all fostering agencies to obtain an overview of current training provision for foster carers and kinship carers - see Appendix 2. Information and views in relation to possible gaps and challenges in delivering training were also sought.

#### Current Training Provision

Carers involved directly in the consultation indicated an involvement in identifying their training needs, expressed enthusiasm and general satisfaction with the training available to them, and viewed the training as relevant to their carer role. The responses to the agency questionnaires showed a marked consistency in the current training offered. Most agencies place a strong emphasis on an initial preparation training course for carers pre-approval. This is followed by ongoing post approval training covering a range of subjects.

*'Training is speaking to young people and understanding them'*  
Young people, 'Forgotten Voices'

#### Pre-approval Training

The "Skills to Foster" course produced by tFN is widely used. This is a foundation learning programme which focuses on the day-to-day skills required to foster and is divided into seven sessions. The overall aim is to begin to inform applicants about the fostering task, and



to help them decide if fostering is for them and their family. This course is usually delivered on a regular basis "in house" and is co-led by family placement staff and experienced carers, as part of ongoing recruitment programmes within agencies. The sessions are -

- 1) What do foster carers do?
- 2) Who are the children and young people?
- 3) Working Together
- 4) Safer Caring
- 5) Understanding Behaviour
- 6) Moving On from foster care
- 7) Sons and Daughters of prospective foster carers

### **Post - approval Training**

Training offered post carer approval and "on the job" at first can appear to encompass a greater range both in subject and method of delivery, however in many agencies the training content is similar, although the title and approach may differ. Training may be delivered "in house" by specialist trainers, family placement staff and/or carers. In addition external training is regularly purchased in a variety of ways e.g. BAAF or tFN can customise courses to meet particular needs within an agency. Alternatively individual carers and staff can access a range of open courses within annual training programmes offered by a number of independent providers. Some courses may focus solely on developing carer knowledge and skills and are not assessable, while others can lead to formal qualifications in childcare. The main topics\* offered are -

Child Protection  
Sexual Abuse  
Safer Caring  
First Aid  
Health Issues  
Learning With Care  
Managing Challenging Behaviour  
Allegations  
Men in Foster Care  
Attachment  
Separation and Loss  
Life Story Work  
Promoting Anti - Discriminatory Practice

\* topics listed represent those most commonly offered by agencies

In addition agencies enable carers to access individual training sessions to meet specific placement needs which are delivered in response to current issues e.g. neo-natal abstinence; care, control and restraint in foster care; or mental health, and these are offered by a relevant specialist such as an experienced health worker.

### **The Challenges**

The foster care population in Scotland has varying levels of experience and with the increasing complexity of children in placement they need access to a wide range of training programmes to support them in their task. The consultation process identified a number of challenges in taking forward the knowledge and skill development of carers through training -

- Carers who contributed directly to the consultation were very committed to continuous learning and development and to participating in training, but it is

important to also consider the position of the wider carer population, as these views are not representative of all carers. Some carers may lack confidence, have literacy skill issues, have a fear of using new technology, or they may have had poor educational experiences. Any or all of these can be barriers to learning, and agencies require therefore to be sensitive to the needs of individual carers in developing training programmes. In addition well-established carers may need encouragement to embrace a culture of continuous learning, and to see ongoing training as an integral part of their carer role.

- Practical considerations are always of significance in planning and delivering carer training, and assisting attendance. Lack of childcare and the general conflict of the day-to-day demands of fostering featured significantly as concerns and barriers to attending training expressed by carers. The location and timings of training sessions are also a concern. The inclusion of partners is a further challenge in relation to these issues.
- Sons and daughters of carers have an important and often unrecognised role in foster families. Consultation with sons and daughters of foster carers carried out by tFN and the Scottish Throughcare and Aftercare Forum in 2007 reflected a need for a range of different supports. Further exploration by agencies of the contribution of sons and daughters within foster care, their needs and vulnerabilities, and how these might appropriately be met is required, although there will be tensions about boundaries and additional demands on agency staff time.
- Across Scotland agency expectations of carers varies with regard to attendance at and participation in training. Whilst there are differences between agency requirements, several respondents acknowledged the very real tension of putting training programmes in place and ensuring carers attend. Many carers see training and courses as part of their personal and professional development, and others may be "reluctant trainers". This can lead to tensions in working relationships – between workers and carers, and also between carers, and also under subscribed training events leading to increased costs.
- Trainers in many agencies are family placement workers who are involved in developing and delivering training alongside their role in offering individual support to carers. Carers are also increasingly asked to co-lead training in conjunction with their fostering role. There is a need to ensure trainers – workers and carers, are given the opportunity to develop training skills and that this role does not conflict with other roles, responsibilities and relationships.
- Accredited training is available within many fostering agencies, but places demands on agencies to provide course verifiers/tutors. Despite this agencies and carers welcomed further developments in training offered and the opportunity to motivate and reward carers for participating. This ranges from attendance at a number of training events linked to fee payment levels, to more advanced training such as HNC, SVQ and Open University offering formal qualifications. Some, but unfortunately not all, agencies reward the commitment of carers, recognise these qualifications, and offer additional remuneration, resulting in further differences between agencies.

*'Foster carers need the support of their friends and family, especially family living in the household. All family members need training to help cope and support each other in all possible situations.'*

Young people, 'Forgotten Voices'

## Summary and Proposals

Fostering In 2008 is both challenging and demanding, and carers and workers need to be positively supported in their task. Carer participation in training is an essential element in their continuing development, and they need to be motivated, rewarded and enabled to access training alongside the day to day demands of caring for children. It is essential in the years ahead that agencies focus on retaining carers as well as recruiting new carers, and that nationally foster care is recognised as a valued part of the children's sector workforce.

The development and shared ownership of a strategy to consistently deliver comprehensive training for all foster carers is crucial in ensuring the quality of foster care across Scotland, and improving outcomes for children in the longer term. This will require the commitment and engagement of children and young people, foster carers, fostering agencies, social services workforce trainers and Scottish Government, and will require to be appropriately funded.

An implementation plan for the future development of the foster care service would require a short, medium and longer-term timetable. Some short-term issues may be addressed within agencies, in the medium term more significant changes to partnership arrangements are needed, and in the longer term inclusion of foster care in the reform of the children's sector workforce is sought.

- ❖ *'Use success stories to get more foster parents*
- ❖ *Assure support and training are available*
- ❖ *More positivity about fostering'*

Young people,  
'Forgotten Voices'

### Short Term Issues

Agencies need to continue to develop and maintain the consistent delivery of comprehensive post approval carer training programmes, and ensure that these plans are relevant to carers through ongoing identification of their training needs. A number of agencies expressed real concern about the non-participation of some long standing carers in post approval training, and this is noted as a significant challenge to overcome.

Access to training is important - local venues, support with child care arrangements, and times which are convenient for carers are essential as a starting point. The need to include both carers, and also sons and daughters of carers where appropriate, in training cannot be over emphasised.

It is also essential to recognise the barriers to learning which are present for many carers, and for trainers to consider ways in which these may be addressed through offering a range of flexible learning opportunities, access courses at local colleges or online training. It will be necessary to take fresh approaches to helping carers to access learning to enable as many carers as possible to participate.

Agencies must put in place clear contractual arrangements between the carer and service with statements of mutual expectations regarding training, and this should be linked to appropriate increases in remuneration as skills and/or qualifications develop. In return carers will require to embrace a culture of continuous learning, and to take responsibility for their personal development.

### Medium Term Issues

Carers will need a range of different pathways to learning, and skilled trainers will be required to facilitate their development. Experienced carers, young people who have experience of being placed in foster care, and sons and daughters of carers can be valuable contributors to learning and training forums, alongside staff. Carers, young people and workers in fostering agencies need to be trained as trainers in order to appropriately engage

with, and deliver training.

A dedicated trainer role in fostering agencies has shown that a more focussed approach to the organisation and delivery of a range of training and learning opportunities can be ensured. The merits of this however, need to be considered against the more flexible use of staff resources across the range of fostering agency responsibilities.

Accredited training such as SVQ awards place greater demands on agencies to provide course verifiers and tutors, but should be supported as it builds skills, and may offer career pathways into the wider child care workforce.

Joint training opportunities for carers, childcare staff and others involved in fostering are increasingly available. This can offer a richer learning environment and establish and strengthen links and partnership working across services. Further development of local consortia arrangements should be considered which could enable a pooling of skills and experience with appropriate sharing of costs.

### **Longer Term Issues**

There are two aspects to the successful longer term development of foster care – the establishment of a national organisation to plan, develop and deliver training for foster carers, and securing a place for foster carers in the children's workforce, both of which will require Government support and significant additional finance.

A proposal for an organisation with responsibility for foster care training was considered some years ago in Scotland, and has been established recently in England. In addition SIRCC has valuable expertise in training residential workers and also providing courses to support qualifications.

The proposal for a Centre for Excellence presented to the Scottish Executive in 2001 focussed on the establishment of a Federation to develop training and meet the range of needs of the fostering service in Scotland. The approach and issues identified remain valid in 2008, and require to be taken forward.

*'My experience of foster care has been really insightful. It has opened up a lot of doors for me and gave me a greater understanding of the world.*  
Young people,  
'Forgotten Voices'

SIRCC has successfully progressed the development and training of residential workers in recent years. There are many similarities between residential workers' and foster carers' learning starting points, needs, and shared issues and experiences. The expertise, which has been developed in SIRCC could have great relevance for the future development of fostering.

In England the CWDC has introduced Training, Support and Development Standards for Foster Care to ensure carers receive consistent relevant induction, training and support, and continuing professional development. The training is linked to standards for staff working in children's social care, and adapted to meet the needs of foster carers. This development is as yet in the early stages but it would be valuable to monitor the progress of implementing the programme, and also the opportunities offered to carers wishing to make a transition into the wider childcare workforce.

All three of the above proposals and developments have much to offer in the establishment of a national training centre and the detail of the learning and experience would be relevant in devising an implementation plan.

Finally the introduction of a Continuous Learning Framework for the social service workforce, and promotion of Social Pedagogy in the children's workforce are developments nationally and internationally which in the longer term have relevance for the development of fostering. The importance of collaborative working is emphasised and there is much encouragement for integration - the acceptance and inclusion of foster carers as members of the children's workforce is now sought. This will need the support of fostering agencies, but requires to be led by the Scottish Government.

## **Conclusions**

- There is a wide range of high quality training available to some foster carers
- The one off training money has impacted and allowed agencies to develop and offer much more training over the past 6 months
- Workers can feel frustrated that resources are not made best use of due to non-attendance or poor attendance of carers.
- There is a lot of time spent reinventing the wheel and a more national coordinated approach would be supportive to agencies, carers and families

## **Recommendations:**

- A mandatory post approval training programme should form part of the national strategy
- An umbrella organisation (based on the model, expertise and experience of SIRCC) be formed who would plan, deliver and monitor the training provision for foster care

### 10.3.1 Outcomes - TRAINING OF FOSTER CARERS

#### Outcomes for children from active and high quality training for foster carers

- ◆ Children are looked after, educated and brought up by skilled, confident, well-supported carers who are involved in a continuous learning process and who take responsibility for their personal development.
- ◆ Children are well-integrated into the foster family, supported by the all family members in the foster home including the key role of sons and daughters.
- ◆ Children needs are better met, carers are concerned with the well being of the whole child, are able to recognise problems at early stage and find ways of addressing them.
- ◆ Children with challenging behaviour receive consistent responses from trained carers which helps them to cope with living in the community.
- ◆ Children's educational achievements are enhanced by living in a household which values learning and understands the impact of trauma on educational progress.

**Some of the actions needed to achieve these outcomes are set out in the sections that follow.**

#### Short term

- Pre-approval and post-approval training is provided for carers
- Carers are supported by workers to undertake continuous learning and skills development
- Training programmes are available to address the individual training needs of carers
- Consistent, ongoing and regular comprehensive post approval training programmes are developed for all foster carers
- Agencies ensure that training is accessible and carers receive appropriate support to attend it
- Training opportunities are developed by agencies which include both partners in the foster home and the sons and daughters of foster carers
- Foster care agreements set expectations about carers' involvement with training and skills development.
- Agencies address the need for appropriate remuneration to carers related to their skills development and qualifications
- Work is undertaken with carers to help them to take responsibility for their personal development.
- Agencies assess the potential of local consortia for training for foster carers

*'Foster carers must have a good knowledge of the background of kids-what they have been through and how to support them.'*  
Young people,  
'Forgotten Voices'

#### Medium term

- Agencies offer carers a variety of different pathways to learning
- Fostering agencies consider the creation of a dedicated trainer role and encourage more flexible use of other staff training resources for foster carers
- Agencies actively consider collaborating over the delivery of training

- Trainers include foster carers and sons and daughters as trainers and give them the opportunity, time and resources to develop training skills and to be involved with delivering training for other carers
- Agencies offer a richer learning environment by providing joint training opportunities for carers, childcare staff and others involved in fostering
- Agencies take forward the development of local consortia arrangements for training particularly for more specialist topics
- Fostering agency managers initiate discussions with the Government, training providers, agencies and carers to develop a national resource for training foster carers and others involved in foster care services

#### **Long term:**

- The government in Scotland works with Local authorities and registered fostering providers to establish a national organisation to plan, develop and deliver training for foster carers
- Utilise the experience and good practice from the model of training developed by SIRCC and make a commitment to develop a parallel resource for foster carers  
Work is undertaken to ensure recognition of foster carers as a valued part of the children's sector workforce
- A Continuous Learning Framework for foster carers as part of the social services workforce is developed
- Explore the potential of promoting a Social Pedagogy approach in the children's workforce including foster carers.

## **Annex A – Carer Telephone Survey**

3 City authorities - 1 Rural - 2 Independent \*

### **Have you attended any foster care training in the past 2 years?**

Yes – from all respondents

### **Who has provided the training you have received?**

Own Agencies – but some from outside providers i.e. BAAF, TFN, LAC nurses

### **What specifically was/were the training courses about?**

Child protection/Media Training/Child Care Law/Health/Healthy Eating/Anti- discriminatory Practice/Sexual wellbeing/Attachment/Anorexia

### **Have you found the training you received helpful to you as a foster carer?**

Yes very all topics really helpful + speaking to other foster carers

### **In your opinion, what are the barriers attending training?**

Child Care and timings although those we asked were offered a variety of timings – evening and Saturdays and short days 9.30am-2.30pm

\* 2 respondents did not wish to give identifying information

## **Appendix B – Agency Training Questionnaire Responses**

The questionnaire distributed in January/February 2008 brought some interesting and reassuring points back to the Task Group. There were 13 responses from Local Authorities and 6 from Independent and Voluntary agencies.

The width and breadth of training on offer to carers is very encouraging. The main topics were: child protection, safer caring, first aid, managing challenging behaviour, allegations, men in foster care, attachment, sexual abuse, life story and separation and loss. There are many creative models around good practice.

Mandatory training was a challenge to agencies that commented, “it is almost impossible to make any post approval training mandatory and the pick up of training is often not good”. The main topics on offer were: safer caring and related subjects, dealing with challenging behaviour, induction, recording and first aid.

Gaps in training provision were not identified as specific courses/topics, but as encouraging attendance. It highlighted difficulties around venues, geographical areas, time of day, not having training programmes, trainers and difficulties around specialised training for small numbers of carers, e.g. two people. Also it was identified that a more flexible approach is necessary to engage carers in a learning culture.

Training offered over and above their training programmes included mainly external courses and qualifications. AKAMAS, CAHMS, tFN, STRADA, SVQ, HNC, BAAF along with attendance at external conferences.



## **10.4 Task Group Report - Kinship Care**

### **Assessment, approval and support for kinship carers**

#### **Introduction**

The Task Group for kinship care was allocated two areas of work. The first was to produce guidance for agencies about the content and processes for the assessment, approval and support of kinship carers of looked after children. The Task Group extended their work to consider the training/skills development that would be valued by kinship carers. The second area of work was to identify good practice in supporting kinship carers where there was no formal legal relationship with the local authority. Much of the good practice identified is equally relevant to carers for looked after children

#### **What is kinship care?**

Kinship care is an arrangement for a relative or close friend of a child to provide care for that child. Placement may be at the request of the child's parent and be arranged with a member of their family without any intervention of the local authority. This is usually referred to as informal kinship care. Where the child is "looked after" by a local authority and living with kinship carers, this is usually called formal kinship care.

Some of children may have been previously "looked after" by the local authority but the kinship carers have applied to Court and been granted a S11 order, a residence order, sometimes with parental responsibilities transferred to them as well. On the making of this order, the child ceases to be a "looked after" child. Councils can provide discretionary support to informal carers and several authorities have continued to provide emotional and practical support to kinship carers who have taken the step of seeking a S11 order.

For the purposes of this report "Looked after" for children in kinship care means that the child is cared for under a specific section of the Children (Scotland) Act. The relevant sections are, S25 where the local authority provides accommodation for the child (which may be with kinship carers where they have the consent of the parents), S70 (3) where a Children's Hearing places the child on a supervision requirement and the child lives with kinship carers or where the child is the subject of specific other court orders, S57 Child Protection Order, S 86 Parental Responsibilities Orders, or short term warrants from a Court or Hearing. In the future children where the local authority has successfully applied for a Permanence Order will also be "looked after".

The legal responsibilities of a local authority are different for children who are looked after from children living with kinship carers on an "informal" basis. The duties of a local authority to a "looked after child are set out in S17 of the Children (Scotland) Act. The key responsibilities are that the authority's paramount concern must be to safeguard and promote the child's welfare. They must make such use of services available to children cared for by their own parents as appear reasonable and they must also take steps to promote such regular direct contact for the child with his/her parents, as appear to them to be both practicable and appropriate bearing in mind their overarching duty to safeguard and promote the child's welfare

Other obligations to "looked after" children are set out in the Arrangements to Look After Children (Scotland) Regulations 1996 and in the Fostering of Children (Scotland) Regulations 1996. These regulations will be replaced in 2009 and it is expected that they will additionally cover the specific situation of looked after children placed with kinship carers. Local authorities should also be mindful of the values, principles and practice guidance in "Getting it Right for Every Child".

## Background to kinship care

Kinship care in Scotland has long been a very real source of support, love, stability and care for many children who have had to leave the home of their birth parents. For many years decisions about supporting kinship carers, whether the children became looked after or not and what financial support was offered, have been exceptionally varied. The National Strategy for Kinship and Foster Care identified that the kinship carers of “looked after” children were families to whom financial and emotional support should be provided by the local authority. They should be supported by allowances at the rate equivalent to those paid to foster carers. It was recognised that this support would help to ensure that the child had a secure home, recognising “looked after” children as particularly vulnerable.

*"If I didn't stay with nana I'd be where my younger brother and sister are right now - with foster parents! I love my nana to bits".*  
Young person

## The work of the Task Group for Kinship care

The Task Group was one of five set up to contribute to a report to the Government in Scotland about specific aspects of the Kinship and Foster Care Strategy. The Task Group met regularly over the period January to September 2008. It also organised a Policy Consultation day on Kinship Care, which provided a wider perspective on the issues for kinship carers and local authorities and allowed authorities to share how they were coping with the many challenges presented by providing a fair and proportionate response to kinship carers.

The Task group included kinship carers, operational managers from Councils, who had specific responsibilities for kinship care as well as other Children and Families services, staff from Voluntary Organisations, academics and, when requested, staff from Scottish Government and COSLA.

The Group drew on a number of assessment processes developed across Scotland and beyond to prepare the interim guidance on assessment, approval and support for kinship carers. The Group also considered the key research studies that highlight the positives of kinship care placements for many children, which identify the complexities of supporting kinship carers, which highlight the benefits maze and the impact of local authority allowances on the entitlements of kinship carer and children. These studies also explore the types of support that kinship carers need and what is most valued. The Group asked kinship care groups for their views and those of their children about what being part of a kinship care family meant for them and their perspectives and issues will be reflected throughout this report.

During the time the group was working, emerging issues relating to kinship carer allowances and the consequential impact on entitlement to benefits and other central government allowances demanded considerable debate. As the group worked on all these issues they regularly involved other Children and Families Managers to inform them of potentially problematic issues and where available, discussed possible resolutions to problems. The direct experiences of the members of the Task Group as carers or managers of service has been very valuable.

*"We took the kids in out of love- that was our motive"*  
Kinship carer

The interim guidance on the assessment and approval of kinship carers for looked after children was launched on September 16th as recommended good practice for the assessment and approval of kinship carers of looked after children. It also suggested areas where kinship carers want support. The guidance can be accessed through [www.scotland.gov.uk/kinshipassessmentreport](http://www.scotland.gov.uk/kinshipassessmentreport). The interim status of the guidance is to recognise that the legal requirements for assessing kinship carers will be changing as well

as providing time for feedback on the proposals before the guidance to accompany the Looked After Regulations is finalised.

Although our task was to develop an assessment and approval process where the children are looked after, we are clear that the discussion areas identified in the guidance are the areas that would help all kinship carers to think about the task they are undertaking, the potential changes in their relationships with the rest of the family and the commitment that is required when becoming a kinship carer. It also stresses that any assessment must identify the supports that the carers will need to manage the care of the child.

## **The Principles underpinning the work of the Task Group**

The Task Group saw it as important to set out what they saw as key principles underpinning work with children and kinship carers.

- Every child has the right to have their family and friends explored as carers if they need to leave the care of their parents. Unless there are clear reasons why placement within the wider family or with a friend would not be in the child's best interest, care within the wider family or community circle will be the first option for the child.
- Intervention by a local authority should not be required if the arrangements for the care of the child are agreed by all parties and there are no concerns about the safety of the child.
- Family meetings that include as many of the wider family as appropriate are valuable opportunities for the whole family to contribute to the arrangements for the child's plan for their care.
- Any Child and Family Plan developed for a child must address the well-being and safety of the child and satisfy agencies that any child protection issues will be dealt with and the needs of the child will always be put first. This will include support to the wider family to care for the child without formal arrangements with the local authority.
- Many of the children being considered for placement in kinship care will have experienced difficult and potentially neglectful early years care within drug or alcohol misusing families. Because of this, their care needs may be intense and some family placements may not be sustainable. Local authorities have to address the issues when care is not good enough.
- Where a child may need to become formally Looked After, an assessment of the family or friend as a carer must be carried out. The assessment must be tailored to the individual situation, be thorough and fair and must address the needs of the child and the way in which the carer can be supported to meet those needs.
- Articles 8 and 14 of the European Human Rights legislation are relevant. Article 8 is about the right to private and family life and the need to take positive steps to secure respect for it. Article 14 is about freedom from discrimination. In Article 14, differential treatment of carers on the basis of the relationship as family or friend as compared with foster carers could be seen as discriminatory.
- The UN Convention on the Rights of the Child also identifies the right to support for a family to bring up their child

*"I love my nana and grandad and am so happy I stay with them".*  
Young person

## **Key Background Information**

The most recent research in Scotland from Jane Aldgate (2006) highlighted some key areas where kinship carers saw the need for change. They wanted to care for their children but they needed access to services and finances to do that. They needed to be valued and their particular needs identified and met. They wanted support for the child to redress early trauma and recognition of the impact of early neglect or trauma by schools and health services particularly.

'The Family and Friends' report from ADSW and the Fostering Network (2003) identified the needs of kinship carers and proposed an assessment process to reflect the particular tasks that they undertake. More recent studies in England and Wales give the same messages that kinship carers want support, financial security, having workers available to listen to them and the children, and access to services when they need them. Other recent publications consider the assessment of kinship carers (Broad etc., 2005 and Butler, 2005). Kinship carers on the Task Group and others to whom we spoke during the work of the group had similar issues and proposals.

## **Size of the kinship carer population**

There are very few statistics available about the size of the kinship care population. The latest statistics for Scotland for 2006-7 show that kinship carers provide care to 2094 looked after children. The statistics for 2005-6 figures show that kinship carers provided care to 1726 looked after children. This represents a rise of over 20%.

Discussions with Managers of Children and Families Services across Scotland all point to a considerable increase in the numbers of looked after children with kinship carers. The continuing adverse impact of substance and alcohol misuse on children from drug misusing families is seen as one of the main reasons for a child to require care from their wider family.

Many more kinship carers care for children on an informal basis but there are no reliable figures for that number. Figures for the Household Survey (2001) showed 7000 children living other than with parents, step parents or foster carers – the best available estimate of children in some form of kinship care. This survey is not being repeated so it is hard to get true figures for the size of the kinship care population in 2008 but from practice information from across Scotland these figures will be a considerable underestimate.

Many of these carers will have been granted orders by the Court, principally residence orders through S11 of the Children (Scotland) Act 1995 giving the child and the carers security about the continuation of the placement when there may have been parental opposition to the plan or parental behaviour which affected the child's stability. There are likely to be many more kinship carers who have no legal orders in respect of the children yet provide long-term care to children whose parents are unable, for a variety of reasons, to care for their children.

The Task Group believes that it is positive for a child to live as ordinary a family life as possible. Using the underpinning principles of the Children (Scotland) Act 1995 requiring no formal intervention in the life of a child unless it is required for their safety and security, would support the use of informal carers.

Where children do not require to be formally looked after, the local authority may need to provide financial support from time to time in terms of their responsibilities to children "in need". It is important that these carers also have opportunities to receive services to support them in the care of the child.

There is an urgent need for the UK Benefits system to be reviewed to reflect the needs of kinship carers so that they can receive an adequate income for maintaining the child. The Task Group is clear that it is unacceptable for local authorities to provide income maintenance over any extended period for the care of children with kinship carers rather than the carers being able to receive universal UK benefits.

## **Setting the scene**

*“Kinship care is unique. It is not foster care. At the same time it is more than family support. Children Looked After by local authorities need the same safeguards as any other Looked After child but their carers will need a model of support which recognises the child, parents and kinship carers as part of a family system with its own strengths, networks and needs. There is a strong case for redefining kinship care as a separate category of Looked After children”.* Aldgate, J. and McIntosh, M. (2006).

## **The vision for Children in Kinship Care**

The Group identified their vision for Children in Kinship Care at an early stage.

The vision is:

- Children should be cared for and supported within their birth family wherever this is safe and in their best interests.
- If the child has to leave the home of their parents then every effort should be made to ensure that they will be cared for within their wider family wherever this is safe and in the child's best interests.
- Universal services and allowances should be available for all kinship carers so that they do not experience poverty or an absence of the services that they need to ensure the well-being of the child and to provide secure care for the child.
- Kinship carers should be able to access specialist services speedily recognising that the children for whom they are caring may have suffered significant emotional and physical damage during their early years. Many of these children would have required to become looked after and placed with foster carers had the family not stepped in to provide care.
- Formal intervention by a local authority should not be necessary for kinship carers to access the services or allowances that they need to make it possible for them to care for the child.
- The Benefits system and specifically the payments to kinship carers will be simplified and kinship carers will receive universal allowances to help them to meet the needs of the children in their care.

It is very encouraging that the Government in Scotland has initiated discussions at Westminster with The Department of Work and Pensions and Her Majesty's Revenue and Customs about the challenges faced by kinship carers trying to access benefits to support them in the care of the child. Similar issues are being raised by kinship care organisations across England and it is important that this pressure for change is sustained.

Formal intervention in the lives of children and carers should be reserved for those situations where the security and safety of the child requires it.

## Current strategies and related developments

There are a number of strategies and frameworks recently developed where we recommend that attention be given to kinship carers and the children for whom they care. The considerations for kinship carers are listed below:

- Corporate parenting - highlighting that looked after children with kinship carers may be less visible to corporate parents than children placed with foster carers.
- Early years and early intervention - the support given to a child by kinship carers is a positive early intervention if children cannot stay safely with their parents without support.
- Revision of the Looked After Children Regulations - should address the difference in the process for the assessment and approval of kinship carers. The aim should be to ensure that the positives of kinship care are not lost in process and bureaucracy.
- Adoption and Children (Scotland) Act 2007 - the potential of Permanence Orders to enable positive outcomes for children who need a permanent commitment from their kinship carers throughout their childhood and into adulthood.
- The *Getting it right for every child* practice model and tools can be used to complement any specialist assessment materials to assess, plan and review a child's progress both in single agencies and through multi-agency intervention. The assessments of kinship carers should sit within this framework.
- The *Getting it right for every child* values and principles support the view that kinship carers should have easy access to universal services to support them and the child. When specialist services are needed then kinship carers should also have access to these to secure the child's well being. There should always be a child's plan to ensure that children get the services they need. This can be a single or multi-agency plan.
- In November 2007, the Scottish Government and the Convention of Local Authorities signed a Concordat, which set out a number of commitments to specific service outcomes. The government agreed a three-year funding package with local authorities.

One specific commitment within the Concordat is that Councils pay allowances to kinship carers for looked after children at the same level as foster carers in their home authority. This commitment is to be met within the three-year period of the Concordat. Many carers expected these allowances to be paid in full from the 1<sup>st</sup> April 2008 and had not understood that the implementation was to be over a three-year period.

There has been a generally positive response to the commitment but kinship carers are concerned that the commitment is for looked after children only. Many kinship carers feel that this creates divisions in the kinship care population with some carers looking forward to increased financial and emotional support and others realising that there will be minimal benefits and little support guaranteed to them from the Strategy.

The Citizen's Advice Scotland Kinship Care & Advice Project was launched on September 16<sup>th</sup> 2008. The Project Manager joined the Task Group earlier in the year. This has allowed the specialist benefits information to be married with the practice skills and experience of Children and Families Operational Managers. The interim guidance described below stresses the need for a thorough assessment of what financial package will be most beneficial for each kinship care family.

## The Assessment, Approval and Support of kinship carers of looked after children

***The interim guidance prepared by the group provides full information about the recommended assessment and approval process and the key areas to be considered in working with kinship carers to develop and deliver a child's plan.***

The guidance is available through the Scottish Government Website.

[www.scotland.gov.uk/kinshipassessmentreport](http://www.scotland.gov.uk/kinshipassessmentreport)

The guidance also suggests areas where carers should receive support whatever their status as formal or informal carers. The interim guidance reflects the legal position of different children and the different timescales for approval. Councils must work within the current regulations for fostering by family and friends until new Looked After regulations are implemented.

The shape of an assessment of a kinship carer who already knows the child and has an existing relationship with the child should be very different from the assessment of foster carers where a child being placed is very unlikely to have any past or present ties with the foster carers.

In assessing families as potential foster carers the focus is on their competencies and experience to care for a child who is unknown to them and all the challenges that can bring.

In assessing kinship carers the focus is on how they can meet the needs of a child already known to them and the supports they need to provide appropriate care.

*' When I ask for help it is refused because I took them voluntarily and the problems were in other authority. I am at my wits end.'*  
Kinship carer

In kinship care, the *Getting it right for every child* practice model can be used proportionately to assess and plan to provide child and family with the help they need. The starting point is, with child and family, identifying concerns around the eight well-being indicators, then, if necessary, gathering information about the child from the *My World Triangle*, analysing this against the *Resilience Matrix* and constructing a child's plan, detailing needs against the well-being indicators so progress can be reviewed.

Depending on the child and carers' circumstances, this could be a simple single agency plan for help from health but it is more likely to be a multi-agency plan based on the need for help from more than one agency. Certainly, if the child is looked after there will need to be a multi-agency child's plan. Undertaking a more complex assessment and planning process should not prevent help from being put in place for the kinship care family immediately while further assessment proceeds. See <http://www.scotland.gov.uk/gettingitright/publications>

The work with the kinship carers during the assessment process should be focused on how the carers will meet the needs of the child and what additional supports they might need to do that. A key part of the assessment should be family meetings where the wider family are engaged to help to create a safe and beneficial plan for the child's care and agree what supports they may be able to provide from within the family. The guidance recommends that the assessment of the child and the capacity of the kinship carers to care for the child must be addressed together and the supports that the carers will need to provide secure and loving care for the child identified.

This report includes at Annex 1 two charts, which outline the recommended procedures for assessment and approval of kinship carers of looked after children.



In undertaking this work it may become clear that a carer is unlikely to be able to care for the children in the way required as they may have for example, serious health problems, very negative views of the child's parents or may have committed offences which could place children at risk. As for any looked after child, the local authority has to take responsibility for the safety of the child and that may rule out some kinship care placements.

Evidence is emerging from Councils that kinship care placements have a higher turnover rate than people previously thought- this is a statistic that will be important to collect for the future so that fewer children experience disruption of care placement and workers learn more about what kinship carers need to support their care of the child.

The Task Group believes that members of the wider family will continue to be key people in the lives of children whether supporting them at home when their parents are unable to do this, or caring for them when the child can no longer live with their birth parents.

*"Sometimes it's just assumed that all that needs to happen is place the kids with kinship carers and everything else will fall into place - the stress and strain has been unbearable sometimes"*

Kinship Carer

Within the assessment and approval guidance the following recommendations are set out.

- A robust assessment process is essential where the child is formally looked after but should be different from the process used for foster carers (see above)
- Family meetings should be held throughout the process to help to identify who in the family may be able to support the kinship carers and the child.
- An assessment should consider the child's needs and their well-being and the carers' capacity to meet those needs and the support required to make the care safe.
- The impact that substance misuse in the birth family may have had on the child's emotional and physical development needs to be understood by the kinship care family.
- The assessment must cover the key areas where kinship carers may have particular struggles or tensions and where the relationships within families can cause major dilemmas and distress to carers and child.
- Children in kinship care need the security of knowing where they will grow up and permanency discussions should be integral to the child's plan.
- Workers undertaking assessments of the kinship carers or the child need to have skills and the time to spend with children and carers during the process and to continue support after approval.
- During the assessment, kinship carers must have access to specialist advice on financial matters and benefits and the impact of allowances on their entitlements so that a "better off" calculation can be made.
- Agreements with kinship carers should set out what is expected of the carers and what the agency agrees to provide to support the carers.
- Approval processes should provide independent scrutiny of the decisions of the workers.
- Looked after children reviews must consider both the progress of the child with the kinship carer and any changing support needs of the family

## **Supports to kinship carers**

As outlined earlier in the report kinship carers want support to help them deal with the many issues that arise when caring for a child from their wider family – often their grandchild. Relationships with their son or daughter can be put under enormous strain when as the parents of the child they do not agree that they are unable to care for their child appropriately. Coupled with the stress of having a son or daughter who may be abusing



substances, kinship carers want to help all the family members but may have to be strong enough to exclude the parent of the child if they are a risk to the child.

The emotional toll of this decision can be high and support to talk through any tensions is essential.

Many of the carers have underestimated the impact that caring for a young child from their wider family is likely to have on all areas of their life. Many of the carers were looking forward to retirement and time to travel and do things they have wanted to for years.

When they take on the care of a grandchild, they find that they have less money to spend, some are actually getting into debt if they are not receiving allowances or benefits for the child and some carers have returned to work from retirement to make ends meet. Many of the carers are older and feel that they are out of touch with the school curriculum and often computer use. This is an area where sensitive help can be very valuable. Undertaking computer skills training can be helped by doing the training with other kinship carers.

In discussing support with the Task Group the key areas where support was seen as vital were:

- Regular support from social work and from a range of universal services to ensure the well-being of the child.
- Social workers being accessible and reliable
- Social work and key universal services understanding the issues for children in kinship care and for carers.
- Support when contact with birth parents becomes problematic to protect child from adult conflicts
- Support to ensure that safe contact with siblings is maintained
- Social workers with skills in counselling and mediation to help to resolve potential family conflicts
- Specialist support accessed quickly for example, Additional Support for Learning, child and adolescent mental health services (CAMHS)
- Adequate financial help with the costs of caring for a growing child
- Practical help through occasional respite care, befriending, clubs
- Corporate parenting responsibilities taken seriously by all the involved council departments and community planning partners. Education, health, housing and recreation making services accessible and affordable to children in kinship care
- Information about services, rights, benefits and health so that kinship carers can access them speedily when needed. Specialist Benefits advice is essential.
- Advocacy where needed to navigate the carer through legal, educational or health systems
- Skills development for kinship carers- providing an opportunity to get information, discuss issues and learn from others- can be formal or informal, tailored to the kinship carer's individual needs and may be provided jointly with other carers or child care workers-
- Help to develop skills in dealing with challenging behaviour, often as a consequence of early emotional damage from neglect in early years, looking at how to help a child build resilience.
- Help to think through the reasons for a child's anger and how to help the child to express anger without damage to self or others.
- Support to tell children about their early life and why they are living in kinship care

*"What we have learned is that there needs to be a variety of support mechanisms available for these families - respite, training, self help, information and support for the children and young people"*

YANA

- A handbook like a foster care handbook with useful information, contacts and explanation of some of the legal and financial issues

Several carers spoke of the strength that they have felt from being part of a support group for kinship carers. These groups need to be recognised and supported financially so that carers can use them freely and as often as they feel the need. Carers who have been supported by a worker with special interest and knowledge of kinship care have valued their involvement and approach.

*'I always feel lighter when I've been with you folks.'*  
A Kinship Carer at one of Kinsfolk Carers drop-ins.

Kinship carers have spoken about the level of activity when a placement starts but that this tails off and many seldom see a social worker. Kinship carers would value more regular support as well as being able to come back for help and advice as the needs of the child and their own capacities change. Kinship carers wanted practical services like after school clubs, holiday schemes and respite breaks. All these services are important for kinship carers whether or not they have a formal relationship with the Council and whether or not the child is looked after.

Some carers have provided *quotes* that illustrate some of the points about support:

*"I wish sometimes I could let others see what it is really like, I'm glad I have other kinship carers to talk to who understand"*

Kinship carers want recognition for the work that they do with the children in their care-

*"I do not want the world just to be treated equal to the other people (foster carers) doing the same job as us."*

*"The rewards outweigh the hard times. Where would the girls be without us or where would we be without them- worried"*

*"I remember she (social worker) once took us out to the park, it was fun, it helped to take us out."*

*"Quite good he is (social worker). He's the one that got the idea about the Life Story"*

The Task Group asked local authorities about what kind of support they were able to give carers.

Several Councils were moving towards appointing specialist workers with knowledge and experience of kinship care. They may not work directly with every carer but they can provide advice and expertise to other workers about kinship care. One local authority has a specialist worker who visits everyone who asks for advice or support and they have advertised that service in local papers.

Several councils across Scotland work in partnership with Children 1<sup>st</sup> who provide a range of services to kinship carers. Children 1<sup>st</sup> have pioneered Family Group Conferencing which draws on the strengths of the wider family and friends in deciding how best to care for the child. The meetings aim to reach agreement about safe and appropriate plans for children, encourage family members to participate in the planning, explore care options within the family and build partnership between the family and the professional workers. A major strength of Family Group Conferences has been providing a safe environment for a family discussion.

The Task Group supports the use of family meetings to help to agree a plan for the child and appropriate in-family support for the kinship carers. The Task Group acknowledges that family meetings can take several forms but all should involve the wider family in working out a sound and safe family plan for the care of the child.

Some kinship carers wanted the opportunity to review their parenting skills and to learn new ones to help children particularly where they have attachment difficulties or other emotional problems. Access to parenting programmes was found to be positive

Financial support to carers where the child is not looked after varies from Council to Council. Many are supporting carers financially to reduce the pressures on the kinship carer and the likelihood of the child needing care outwith the family. Some Councils are reviewing their support to kinship carers where the child is not looked after. They hope that they can give kinship carers and others more clarity about who is likely to receive payments from the child. These payments would continue to be discretionary and will be dependent on the allocation of funding to kinship care services within that Council.

Kinship carers want access to universal services and to additional support from health and education as well as other partners in Councils, when they and the child need it. One council has commissioned a voluntary agency to provide 1:1 support to kinship carers and groups for general support and advice. Based on an evaluation of the current service, future services will be developed.

Other councils are providing support through groups or commissioning groups from a specialist provider. Kinship carers themselves are able to support other carers giving advice and support. Carers have welcomed these relationships and the level of understanding that another kinship carer can provide.

*"I don't care if the government give me £20 per week. It will mean more if someone has recognised and valued what we are doing"*

68 year old kinship carer who has cared for her grandson for the past 8 years he is 10 years old now.

This limited review of some of the support services provided by Councils to all kinship carers has identified that carers are not looking for extensive services apart from at times of crisis. They want recognition, the chance to meet other carers, to get advice and opportunities to develop skills to care for the children better, as well as financial support to prevent poverty and placement breakdown. Support from universal services is valued as it helps to keep the normality of being cared for in your family rather than "in care".

We would recommend that each Council reviews the supports they are providing for carers- some of the smaller authorities may be able to combine their support service. The skills of the practitioners will be the key to successful support as well as an appreciation of the additional positives of kinship care.

Some carers worry that without a dedicated service for kinship care their needs may remain eclipsed by child protection and foster care. The group recognises that working with kinship carers is specialist and family placement teams have many of the skills needed to support kinship carers although their availability may be problematic in terms of current workloads.

The Group recommends that each Council should identify a manager who will be responsible for developing kinship care services and for monitoring needs so that carers do get access to services that meet their support needs and those of the children.

## Conclusions

The Task Group recognises that many services at Government and local authority levels need to address the issues raised in the report. Some improvements will be achievable with minimum extra resources and are dependent on good practice becoming the norm. As the numbers of children living with kinship carers increases, the workforce and financial pressures become more acute and corporate parents need to address how resources can be allocated to children in kinship care.

A resolution of some of the anomalies of the Benefits and allowances issues could make an enormous difference to kinship carers. For the future we believe that more kinship carers should be supported by universal services and benefits so that the child has as ordinary a family life as possible. All work must address the needs of the whole child and ensure that kinship carers have the resources to meet those needs.

Children can thrive in kinship care placements if given the right support and services. The Task group believes that there is a lot of good practice in the country and that consistency, reliability and diversity of workers, services and supports can lead to positive outcomes for many more children in kinship care placements.

The views of two children living in kinship care show what it can mean to a child:

*"Nana and granddad  
make me happy!  
"Grandad a great cook"*  
Young person

*'This is my home and I am safe  
here- they spoil me'*  
Young person

## **10.4.1 Outcomes - KINSHIP CARE**

### **Outcomes for children from effective assessment and support of kinship carers**

- Children have continuity of care in their own home or within their wider family.
- Children can live with kinship carers without formal legal intervention unless their needs require a level of protection that can only be gained through formal measures.
- Looked after children in kinship care live with carers who have been involved with workers in creating the child's plan, in discussing how they can meet the needs identified in that plan and what supports they will need to do this.
- Children have their identity, heritage and family ties enhanced by kinship care.
- The particular needs of children who live in kinship care are recognised in service planning.
- Children achieve positive placements as the result of support from the corporate parents and effective community planning
- Children are successful learners within a learning household which improves their educational outcomes and enhances their well-being
- Children live with kinship carers who have sufficient resources to meet children's needs
- Children living with kinship carers receive help to deal with early trauma, learning deficits or neglect to enable them to build resilience and succeed in adulthood.
- Looked after children in kinship care have regular multi agency reviews of their progress and decisions are taken about what long-term care will be best for the child.

**Some of the actions needed to achieve these outcomes are set out in the sections that follow.**

#### **Short term**

- Local Authorities use the assessment and approval guidance and discuss with carers whether they feel supported by the process.
- Workers explore with kinship carers what caring for the child is going to mean for them.
- Workers ensure that the child's plan is in place and their well-being given attention.
- Councils promote the positives of kinship care placements and the importance of an assessment including finding out what care the carers can provide.
- Universal services identify children where early intervention and support services can make care at home safe and positive.
- Councils introduce allowances for kinship carers for looked after children and explain their plans for the full implementation of allowances.
- CAS service is accessible to all kinship carers and agencies.
- Workers use Family meetings as part of the planning for the child's care when they may have to leave home.
- Workers give kinship carers support to help to maintain the child's contact with siblings.

#### **Medium Term**

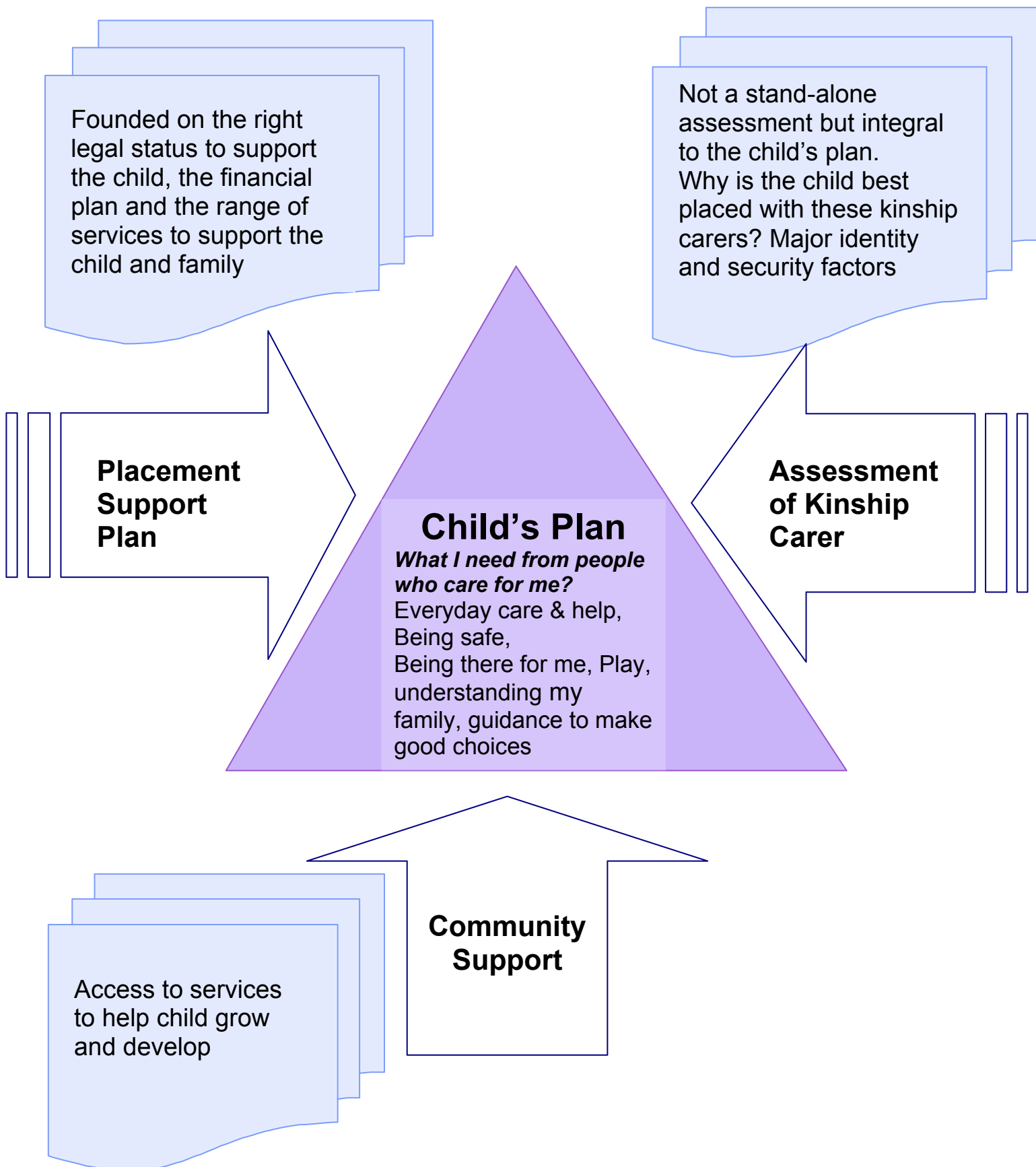
- Councils and Community Partnerships develop services which are available to all kinship carers not only those with a child who is "looked after"
- Universal services support an increasing numbers of kinship carers to meet the child's needs
- Specialist services to support kinship carers with the child's care recognize their specific needs

- Universal services identify children where early intervention and support services are needed to make care at home safe and positive.
- The Scottish Government Universal continues to press for universal benefits for kinship carers and the children living with them to ensure that allowances from the DWP and HMRC are available to meet the care costs for the child.
- Local authorities have in place clear guidance about discretionary payments for kinship carers.
- Workers acquire skills to help the child and carers understand and respect the child's heritage and to maintain contact with their parents and siblings which is safe and in the child's best interests.
- Local authorities promote long term planning for all looked after children living with kinship carers.
- Corporate parents, community planning partners and senior managers in health and other agencies outwith the Council who contribute to the Children's Services planning processes participate in awareness raising events about kinship care and its special strengths and tensions
- School staff are informed about and encouraged to recognize the specific needs of children in kinship care and provide children with extra support to achieve their potential.

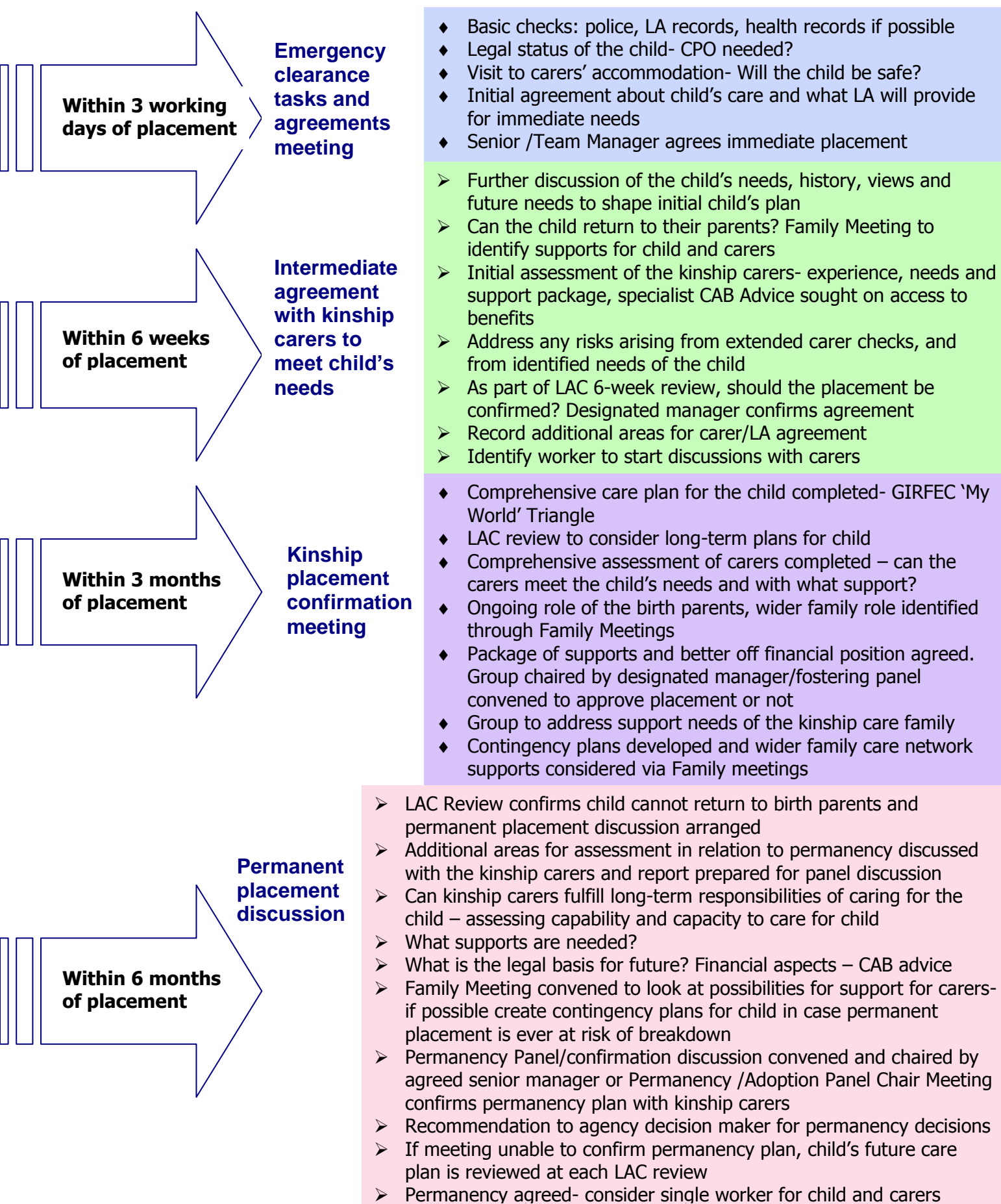
### **Long term**

- Corporate parents and community planning partners consider actively what they can do to invest in additional supports for children in kinship care recognising the benefits of kinship care.
- Corporate parents support the allocation of additional finance when needed to give the child extra supports in their family, community and in school.
- Statutory and voluntary services support kinship carers to create a learning household, including carers having opportunities to develop new skills that will help them to care for the child in the short and longer term
- Councils promote multi agency discussions to ensure that resources are supporting the child and carers.
- Regulatory agencies as well as managers in services identify how to collect data about the outcomes of placements with kinship carers to ensure continuous improvement in services to kinship carers and the children in their care.
- Training institutions, Councils and their partners provide resources to promote a skilled well-resourced workforce drawn from a range of professions to work with children and their kinship carers to ensure the child's safety and well being.

**Chart 1: CHILD'S PLAN IN KINSHIP CARE based on  
'MY WORLD' ASSESSMENT TRIANGLE**



**Chart 2: THE CHILD'S PLAN & THE KINSHIP CARER ASSESSMENT**





## **10.5 Task Group Report - Organisational arrangements to promote best practice in decision-making for looked after children**

### **Introduction**

The Task Group was tasked with examining what organisational arrangements support better outcomes for children and young people in foster and kinship care, particularly in relation to achieving permanence or at least stability of care. The Task Group met 4 times and held a policy consultation day to consult more widely on the recommendations it was considering. The membership of the Task Group is attached as an appendix to the report.

Throughout this report “permanence” is used to refer to a permanent solution for the child, whether that be within the birth family or in alternative care.

The Task Group was mindful of recognising that it could, and should, not be prescriptive. We recognised that local solutions are needed for local problems and that different areas will have equally effective ways of addressing some of the issues we explored. However, we also recognised that there was a need for consistency in the quality of service which looked after children in foster and kinship care, and their families, should expect and that ultimately, we are all striving to achieve the same outcomes – that children and young people are in safe, stable, loving homes where they can flourish into successful, happy adults.

This report will identify the themes we discussed and make specific recommendations. The recommendations are incorporated within the report and then summarised in Annex 1. We have also included a model of effective decision-making as we quickly realised that effective decision-making is central to achieving the desired outcomes.

### **Over-Arching Themes**

- Training and development

Throughout our discussions in the working group and at the policy consultation day, the need for confident, competent professionals and carers kept coming up. In this report, we make specific recommendations about training, but there was an over-arching recognition of the importance of joint training across professional boundaries, particularly around permanence. Such training should include not only professionals and carers working directly with children and young people, but legal staff, and those involved in the courts and the children’s hearings system.

- The role of courts and children’s hearings

We agreed that it is important for those involved in the courts and children’s hearings system, sheriffs, reporters and panel members, to fully understand the importance of planning for permanence. While courts and children’s hearings must be aware of the impact of their decisions on children and young people in the longer term, it is equally important that professionals who appear in court or at hearings present robust, well-argued information. There was concern that sometimes the trust of panel members in the plans for a child was not evidenced. Greater understanding of the respective responsibilities of panel members and workers in progressing a child’s plan would be useful. Joint training to identify the tensions and to encourage greater collaboration would be positive.

- Assessment

Again, throughout our discussions, the importance of high quality, multi-agency assessment supported by good IT systems was highlighted as a crucial element of effective decision-making to improve outcomes for looked after children and young people.

- Multi-Agency working/co-ownership

The importance of all agencies and individuals taking ownership of improving outcomes for looked after children in foster and kinship care cannot be underestimated. Partners must work effectively with each other and with carers, young people and their families to ensure that children receive the best possible care. Services working with adults should remember the needs of the children involved as well as considering the impact of the adult's behaviour on a child and services working with children should be must take into account issues relating to their parents' ability to parent.

## Planning

Effective planning emerged as a key theme in our discussions. The task group agreed that sequential planning could lead to unnecessary delays, and a lack of integrated planning makes for a disjointed, unsatisfactory experience for children and their families. We also recognised that the terms "parallel planning" or "concurrent planning" have quite specific connotations which were not always welcomed by professionals. However, the needs of children are best served when there are good, integrated and agreed plans, exploring a range of options, in a transparent manner.

- Recommendations
  1. Looked After Reviews or child's plan meetings must happen for all Looked After children and young people.
  2. Professionals involved with Looked After children and young people should not think or plan sequentially, but consider a variety of options in tandem. Options for rehabilitation or permanent substitute care need to be explored at the same time, so that if rehabilitation doesn't happen, other options are able to be progressed at a very early date having already been considered. The options being considered should be shared with the child and their family so that they are clear about what is being considered and why.

## Quality Assurance

Services and managers need to ensure that both the processes and the work of individuals in providing services to looked after children and young people in foster and kinship care are of a consistently high quality and therefore be subject to scrutiny both internally and externally. Clear lines of accountability are essential to delivering high quality services.

- Recommendations
  3. There should be independent reviews of the child's plan. Independent review, by whatever mechanism suits the local authority, is essential and the person leading the review must be independent of the immediate line management of the worker(s) responsible for the child or the family. In conducting the review, the responsible person should have the authority to ensure that issues they identify are addressed. The review should provide constructive challenges to decisions and plans.

4. Inspectorates should include processes and practice to support planning for permanence in their inspection of services for looked after children and young people.
5. Scottish Government should produce a toolkit similar to How Good are Our Young Carers Services? in respect of services for looked after children and young people to assist with self-evaluation and quality assurance

### **Skills and capacity-building**

It is essential that professionals and carers working with looked after children are competent and confident in their roles. The task group did not address the generic skills required but focused specifically on those aspects of skills development and capacity building which are pertinent to organisational arrangements to support permanence. Key Capabilities in Child Care and Protection published in December 2006 by the Scottish Government sets out a range of capabilities which qualifying courses must address. These include knowledge of the range of substitute care, placing the child at the centre and permanence. These requirements have only just become embedded in qualifying courses so it will be some time until the impact of these requirements on the capabilities of workers is able to be measured.

- Recommendations

6. In the context of permanence, social workers should be equipped with skills and knowledge in the following areas: good assessment and analytical skills, giving evidence in court, including court proceedings relating to the children's hearing; appearing at children's hearings; dealing with cross-examination; writing reports; and legal processes.
7. Similarly, people giving evidence in court should be offered appropriate support before, during and after the court appearance. Lessons from Court and Children's Hearings cases should be considered by the organisation, its partner agencies and individuals to enable better handling of future cases.
8. Social workers and other professionals should have access to research evidence from journals and academic sources; new developments, case law, good/improved practice, or how other organisations have dealt with similar issues. Continuing professional development resources, including on-line resources, should be available to support this recommendation, perhaps including a similar shared resource to MARS which supports workers and others involved in child protection services.
9. Pre-qualifying training for children's services workers (not just social workers) and children's panel members should include permanence planning. Education providers should ensure that the key capabilities of newly qualified workers include an understanding of the needs of Looked After children and young people and the need for stability to improve their outcomes. The publication "Key Capabilities in child care and protection" Scottish Executive 2006 highlights these areas in the requirements on social work programmes for their students. These requirements are in their initial stages and we recommend that the impact on the capabilities of workers when they begin their career should be monitored.
10. The Changing Lives change programme should recognise the need for a well-qualified, competent workforce to engage in effective permanence planning. That workforce needs to be supported to manage caseloads effectively, and encouraged in reflective practice.

## **Management and Leadership**

The task group sees good management and leadership underpinning everything we discussed, and this was strongly supported at the policy consultation day. We believe that a culture of positive leadership which puts the needs of children first promotes an environment in which staff and systems will work proactively to make sure that everyone is working to the same goal – the best possible outcomes for children and young people. Where drift occurs or decisions are not implemented, it is important to find out the reasons and address any systems issues which could prevent this arising again. Strong, supportive management, including clear accountability, is essential to make sure the other elements described in the sections above happen. In addition to enabling recommendations 1 – 7, we make the following recommendation:

- Recommendations

11. It is essential that services have sufficient administrative capacity, which is vital for keeping good records of reviews, and preparing for and servicing Fostering and Adoption Panels, and court proceedings. Sound record keeping at every stage is essential to support the decision-making processes.
12. Early legal advice has a significant positive impact on how cases progress. As soon as permanency is being considered, legal advice should be provided and thereafter consistently available throughout the process.

## **Links with adult services and family support**

The importance of those working with families and adults with children to recognise the needs of children was a topic to which we returned at every meeting. The task group believes that there is a need to raise awareness amongst those undertaking work with adults who are also parents on issues such as addiction, homelessness or mental health to remember the impact on the children both of their parents' issues and the results of their interventions. The nature and timing of those interventions should take the needs of the child into account. We also believe that those providing specialist services to adults or families as a whole should be expected to contribute to the multi-agency assessment process by providing information about the capacity of the adult to parent a child. There are inevitable tensions in supporting the adult but workers must be prepared to recognise the serious gaps in the ability to parent a child or where the adult is unlikely to be able to meet the needs of the child within the child's timescales.

- Recommendations

13. Policy and service provision for adults (e.g. where substance misuse or mental health difficulties are present) must reflect the need for positive support to parents without delays that could undermine attempts to enable children to remain in their parents' care or to rehabilitate children who have been looked after away from home. Assessments of the capacity of parents to provide quality care at the time the child needs it, must be thorough and realistic.
14. Support for the family is an essential element of achieving the best outcome for the child.

## **Other recommendations**

The context within which services plan, make decisions and take action for looked after children and young people must be supportive, and the task group considered that the following recommendations would help set that context. Minimising drift was a recurring theme in the task group because of the negative impact drift has on children, particularly when they are very young. Timescales for decision-making, and then implementing those decisions are necessary to prevent drift. There was considerable debate around whether timescales ought to be mandatory at a national level or whether there should be local flexibility. We also recognised that transparency and genuine engagement were important for children and their families and carers; task group members were of the view that families felt more genuinely engaged when they had good, independent representation in formal processes.

- Recommendations

15. The implementation of the fostering and kinship care strategy should sit comfortably within GIRFEC, and the Early Years/Early Intervention framework, and that our work should inform the development of those policies particularly in relation to planning for permanence.
16. Timescales should be meaningful, achievable useful and quality-assuring. Timescales for decision-making should be set out in guidance, setting a benchmark of how long is long enough, albeit recognising that each individual child's needs are different. When a decision about permanence has been reached, it is imperative that that decision is implemented as quickly as possible to meet the evidenced needs of the child.
17. Decisions, for example, in relation to contact with the birth family should be consistent and focused on the evidenced needs of the child. Contact should be a positive resource for the child.
18. The family should have access to effective independent representation during any meetings which are considering the arrangements for their child.

## **Effective Decision-Making for Looked After Children and Young People**

The task group identified the following elements of effective decision-making in relation to Looked After children and young people. We recommend that these principles are embedded into guidance and policy relating to Looked After children and young people and early intervention.

### **Over-arching principles**

- The overall objective is to meet the needs of the child, particularly in terms of stability, well-being and security. Planning for the long-term is essential to achieving a sense of stability for the child.
- The aim of effective decision-making in this context is to identify issues early with a view to early intervention to prevent escalation and achieve a permanent solution as soon as possible.

- Decision-making must be focused on the needs of the child, and must recognise the impact of early experience on longer-term outcomes. While we cannot ignore that there are other interests which need to be taken into account, they are secondary to the needs of the child or young person.
- The child or young person should be supported to understand the system they are involved in, why different people are involved, what will happen, what the purpose is and what the possible implications are for them. This must be done in an age appropriate way.
- Effective decision-making is dependent on sound assessment, clear evidence, genuine consultation, and consideration of a range of options and good analysis of all the available information. Sound assessment skills and knowledge of the child or young person, including the child and their family's capacity to engage, are essential.

## **Leadership**

- Strong leadership and direction are essential to ensuring that professionals and carers feel empowered and supported in making decisions and have the necessary skills. The capacity and empowerment of first line managers to make decisions is a key element.
- We must set out clear, explicit expectations of everyone involved – professionals, the young person, the family, backed up by a clear understanding of the consequences of those expectations not being met.
- Multi-agency teams working around the child must reach a collective understanding about the options which are available and their implications.
- Everyone involved should be clear about what will be done to prevent or address drift, for example clear measures of accountability, or the consequences of a lack of action for the child and their family.
- There must be clear accountability for all those involved in the decision-making process. As corporate parents, elected members and senior managers are responsible for ensuring the needs of their children are being met in the best way possible. Contingencies must be in place for when plans run into difficulties.
- Managers must ensure that systems are in place to identify and address drift, and to explore the reasons for it to prevent it happening in other cases.

## **Implementation of Decisions**

- Good, timely decisions must be supported by resources; those may be financial resources but may also be human resources (e.g. therapeutic intervention or legal advice), physical resources (e.g. equipment) or training. Those resources will often be drawn from the public sector (e.g. education, social work, housing or health services), but we should consider wider options such as the voluntary sector or the community.
- Corporate parents should be responsible for ensuring that resources are available to enable workers to meet the needs of their children.

- Decisions about children should be needs led, not resource-led and must take into account the consequences of unmet need.
- When considering the options to implement the child's plan, all possible outcomes for the child should be identified and considered. At the point of decisions being made, recommendations should be clearly set out and explained to everyone concerned.
- Everyone involved must have a shared understanding and commitment to agreed timescales. It must be clear what is fixed in statute or regulation, what is flexible to suit local circumstances and what is specific to that child or family. Some delays may be inevitable in legal processes to take into account the rights of the family to appeal decisions. Each decision-maker must be mindful that their decisions may be appealed.
- Reports and recommendations to any decision-making forum should be well-structured, showing clarity of purpose so that any information being used to support a case going into the Children's Hearings or courts systems is robustly evidenced with sound analysis of the information used.
- Plans must be regularly reviewed both in terms of the process and in terms of the impact on the child or young person. Those reviews should be carried out by someone independent of the immediate line management of the professionals involved and should be proportionate and child-centred.
- Services should have in place robust quality assurance processes which continually assess whether their children's planning processes are fit for purpose and achieving the desired outcomes in a proportionate, timely, child-centred way, including exploring all possible options and continually reviewing need.

### **People and Organisational Capacity**

- Children, young people and their carers should be consulted and involved throughout the decision-making process. Consideration should be given to family meetings from an early stage, and to the support which family members might need to help them to engage.
- There should be a clear understanding from the outset as to who needs to be involved both directly and indirectly and who should be asked to provide input at particular stages.
- It is essential that everyone involved in assessment and decision-making processes has the skills and information to fulfil their role.
- The right people must participate in the decision-making process, particularly if meetings are required, and only those people. Frontline staff and carers need to have the delegated authority to make appropriate decisions and feel supported by their managers.
- Everyone involved must have the capacity in terms of skills, resources, time and support to be effective in their roles, and must be able to exercise confident, competent, empowered professional judgement.

## **Conclusion**

The task group heard evidence of a variety of good practice across the country, and about different solutions created in different areas, but we are concerned that achieving permanent, or at least stable long-term, solutions for children and young people within acceptable timescales is a long way from being the norm.

The children and young people who come into the care system are damaged by their early life experiences; they have often experienced trauma, have problems with attachment and most have been living in chaotic, challenging circumstances. Therefore, their need for stability, support and love is even greater than that of other children. Time feels very different for children and young people from how it feels for adults. What feels like a short time to an adult can be a very long time for a child, particularly if they are very young. Working with children and young people means that everyone must be reminded to consider things from the child's perspective, to put their needs first and to focus on achieving the very best outcome for the child that is possible.

We believe that our recommendations and the model for effective decision-making will go some way to achieving those goals. We would encourage professionals and carers to access the Looked After Children Web-site to share information and experience, and use the on-line discussion forums to access peer support and advice.  
[www.LTScotland.org.uk/lookedafterchildren](http://www.LTScotland.org.uk/lookedafterchildren).



### 10.5.1 Outcomes - ORGANISATIONAL ARRANGEMENTS

**Outcomes for children when decision-making for Looked After children and young people is effective.**

- ◆ Children have their needs for permanence, or at the very least stability, met within a timescale which best suits their needs, and which they understand.
- ◆ Children are spared the uncertainty and anxiety created by drift, delay and hesitation.
- ◆ Children can be assured that practitioners dealing with their case have timely, appropriate legal advice.
- ◆ Children are involved with practitioners who understand their needs for stability and feeling safe, nurtured and loved, who will help them to become successful and happy adults.
- ◆ Children are supported by practitioners who are well supported by their manager and whose agency recognises the workers' needs to have time to meet the children's needs.
- ◆ Children are supported by skilled practitioners who have up to date and comprehensive knowledge and skills in assessment and analysis and who are able to present evidence to Children's Hearings, courts to achieve the desired outcomes.
- ◆ Children are involved in a way, which suits their individual needs to help them to shape and understand the plans being made.
- ◆ Children living at home in households where their parents have significant drug, alcohol or mental health problems have their needs recognised by all practitioners and adult needs are not given priority over the child's needs.

**Some of the actions needed to achieve these outcomes are set out in the sections that follow.**

#### **Short term**

- Managers support practitioners in reflective practice and maintain a focus on permanence or long-term stability for all looked after children
- Managers encourage workers to use research and practice evidence to analyse the needs of children and how they can best be met and to develop confidence in presenting their analysis to courts and Hearings
- Councils recognise the value of independent input to and/or scrutiny of all LAC Reviews to sustain the momentum of planning for permanence or long term stability
- Through discussion with training providers and agencies agreement is reached about the desired key capabilities for practitioners who work with children, and the need for permanence planning to be robust
- Councils ensure that early legal advice at the start of the permanency decision-making process is available to social workers
- Managers encourage planning for children is not sequential to help minimise delays if one plan does not work

- Managers in adult services ensure that their staff make decisions that put the child's needs at the centre of their intervention.

### **Medium term**

- Corporate parents gain greater understanding of the importance of permanence decisions being timeous and well evidenced.
- Seniors and workers identify a range of options for achieving permanence as a standard part of planning for permanence.
- Corporate parents address the resource implications of planning permanence and the work required by practitioners to achieve permanent solutions for children.
- Scrutiny and quality assurance mechanisms are built into permanence planning- development of a toolkit for this scrutiny should be considered by national bodies- COSLA, ADSW, SCRC.

Practitioners and managers in decision -making agencies, courts and children's hearings train together to reach a common understanding of the importance of permanency for looked after children

### **Long Term**

- All agencies establish models for decision making for children needing permanence which has a multi-agency approach embedded in it
- Agencies, courts and children's hearings work together to build trust and respect to enhance decision making for children
- The Government in Scotland recognise the costs and the skills involved in undertaking complex permanence work with children and work to financial settlements which can achieve best practice in planning for permanence for children, in children's timescales
- Council budget setting recognises the key importance of achieving permanence for children for whom they have a corporate parenting responsibility
- The Government in Scotland, local authorities and training institutions engage in discussions to consider the development of a resource service along the lines of MARS for permanency planning which could be accessible to all practitioners and managers for advice, research evidence and new thinking.

## **Annex A**

### **Summary of Recommendations**

1. Looked After Reviews or a child's plan meeting must happen for all Looked After children and young people.
2. Professionals involved with Looked After children and young people should not think or plan sequentially, but consider a variety of options in tandem. Options for rehabilitation or permanent substitute care need to be explored at the same time, so that if rehabilitation doesn't happen, other options are able to be progressed at a very early date having already been considered. The options being considered should be shared with the child and their family so that they are clear about what is being considered and why.
3. There should be independent reviews of the child's plan. Independent review, by whatever mechanism suits the local authority, is essential and the person leading the review must be independent of the immediate line management of the worker(s) responsible for the child or the family. In conducting the review, the responsible person should have the authority to ensure that issues they identify are addressed. The review should provide constructive challenges to decisions and plans
4. Inspectorates should include processes and practice to support planning for permanence in their inspection of services for looked after children and young people.
5. Scottish Government should produce a toolkit similar to How Good are Our Young Carers Services? in respect of services for looked after children and young people to assist with self-evaluation and quality assurance.
6. In the context of permanence, social workers should be equipped with skills and knowledge in the following areas: good assessment and analytical skills, giving evidence in court, including court proceedings relating to the children's hearing; appearing at children's hearings; dealing with cross-examination; writing reports; and legal processes.
7. Similarly, people giving evidence in court should be offered appropriate support before, during and after the court appearance. Lessons from Court and Children's Hearings cases should be considered by the organisation, its partner agencies and individuals to enable better handling of future cases.
8. Social workers and other professionals should have access to research evidence from journals and academic sources; new developments, case law, good/improved practice, or how other organisations have dealt with similar issues. Continuing professional development resources, including on-line resources, should be available to support this recommendation, perhaps including a similar shared resource to MARS which supports workers and others involved in child protection services.
9. Pre-qualifying training for children's services workers (not just social workers) and children's panel members should include permanence planning. Education providers should ensure that the key capabilities of newly qualified workers include an

understanding of the needs of Looked After children and young people and the need for stability to improve their outcomes.

10. The Changing Lives change programme should recognise the need for a well-qualified, competent workforce to engage in effective permanence planning. That workforce needs to be supported to manage caseloads effectively, and encouraged in reflective practice.
11. It is essential that services have sufficient administrative capacity, which is vital for keeping good records of reviews, and preparing for and servicing Fostering and Adoption Panels, and court proceedings. Sound record-keeping at every stage is essential to support the decision-making processes.
12. Early legal advice has a significant positive impact on how cases progress. As soon as permanency is being considered, legal advice should be provided and thereafter consistently available throughout the process.
13. Policy and service provision for adults (e.g. where substance misuse or mental health difficulties are present) must reflect the need for positive support to parents without delays that could undermine attempts to enable children to remain in their parents' care or to rehabilitate children who have been looked after away from home. Assessments of the capacity of parents to provide quality care at the time the child needs it, must be thorough and realistic.
14. Support for the family is an essential element of achieving the best outcome for the child.
15. The implementation of the fostering and kinship care strategy should sit comfortably within GIRFEC, and the Early Years/Early Intervention framework, and that our work should inform the development of those policies particularly in relation to planning for permanence.
16. Timescales should be meaningful, achievable useful and quality-assuring. Timescales for decision-making should be set out in guidance, setting a benchmark of how long is long enough, albeit recognising that each individual case is different. When a decision on permanence has been reached, it is imperative that that decision is implemented as quickly as meets the evidenced needs of the child.
17. Decisions, for example, in relation to contact with the birth family should be consistent and focused on the evidenced needs of the child. Contact should be a positive resource for the child.
18. The family should have access to effective independent representation during meetings, which are considering the arrangements for their child.
19. There is a relationship of trust and mutual respect between all of those involved in decision-making: agencies, courts and children's hearings.

## **11. CONCLUSIONS OF THE REFERENCE GROUP'S REPORT**

Many children are thriving in skilled and dedicated foster and kinship care placements. There remain however many challenges in delivering high quality kinship and foster care and these are identified in the report. We have also identified actions that we believe will help agencies and all involved with the care of looked after children to help those children to become resilient and to have their needs met by carers who recognise their individuality and potential. Meeting the needs of the whole child must be the goal of all those involved.

*Section 10* of the report sets out those actions that we believe agencies, carers and legal systems must take to achieve positive outcomes for looked after children in kinship and foster care.

Children need high quality services from agencies and they need committed carers who are prepared to be strong advocates for them and will help them to develop resilience which promotes their well being. No child should be without someone who supports them through their childhood and into adulthood and who believes in their capacity to grow and develop.

During the Policy Consultation Day considering effective decisions for children needing permanence, Barbara Hudson of BAAF spoke about each child needing an "irrational" advocate. This was someone who would be there for the child advocating for them in sometimes very difficult situations. Those "irrational" advocates need the support of the child's corporate parents and working together, we believe that, as partners, they have the capacity to help all looked after children to become responsible citizens, effective contributors, successful learners and confidential individuals.

## Appendix 1

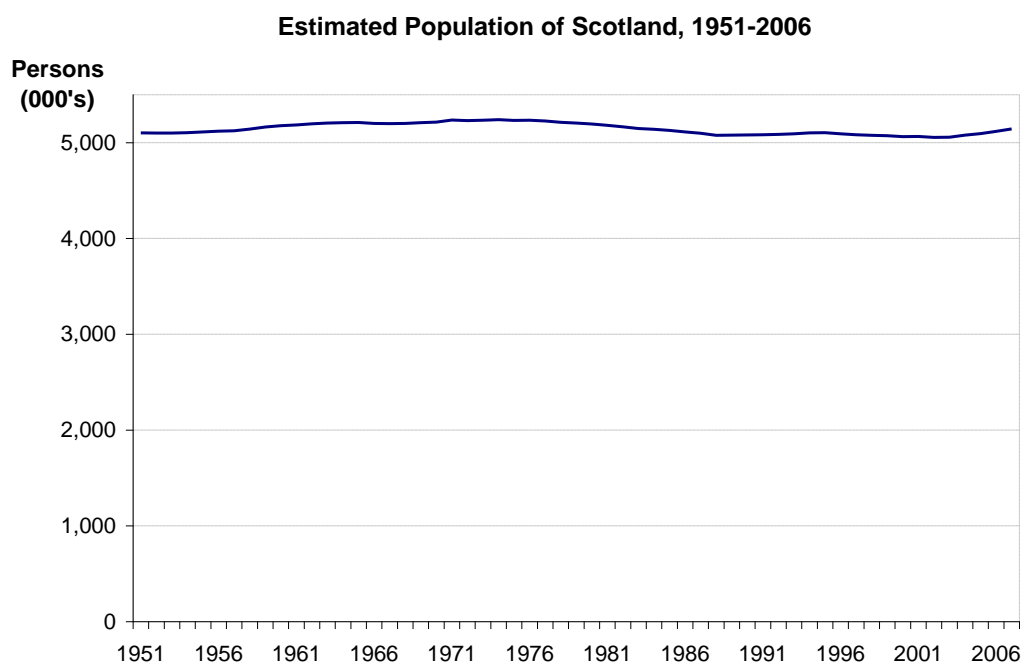
### Additional Information to the Analysis of the National Evidence and Trends

The following appendix provides more charts and detail to supplement the analysis chapter. The analysis generally covers fostering at a national level. Experience may be very different at a sub-national level and The Fostering Reference Group would encourage partners to consider such analysis at a local level.

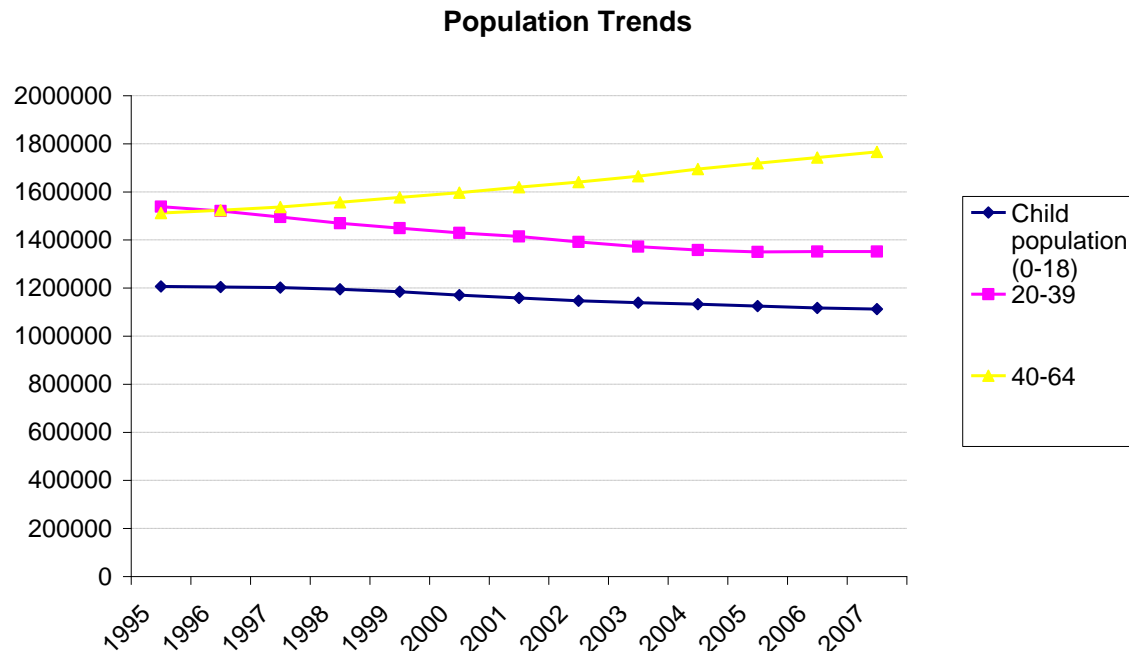
### Population Trends/Projections

The graphs below are based on information from the General Register Office for Scotland (GROS).

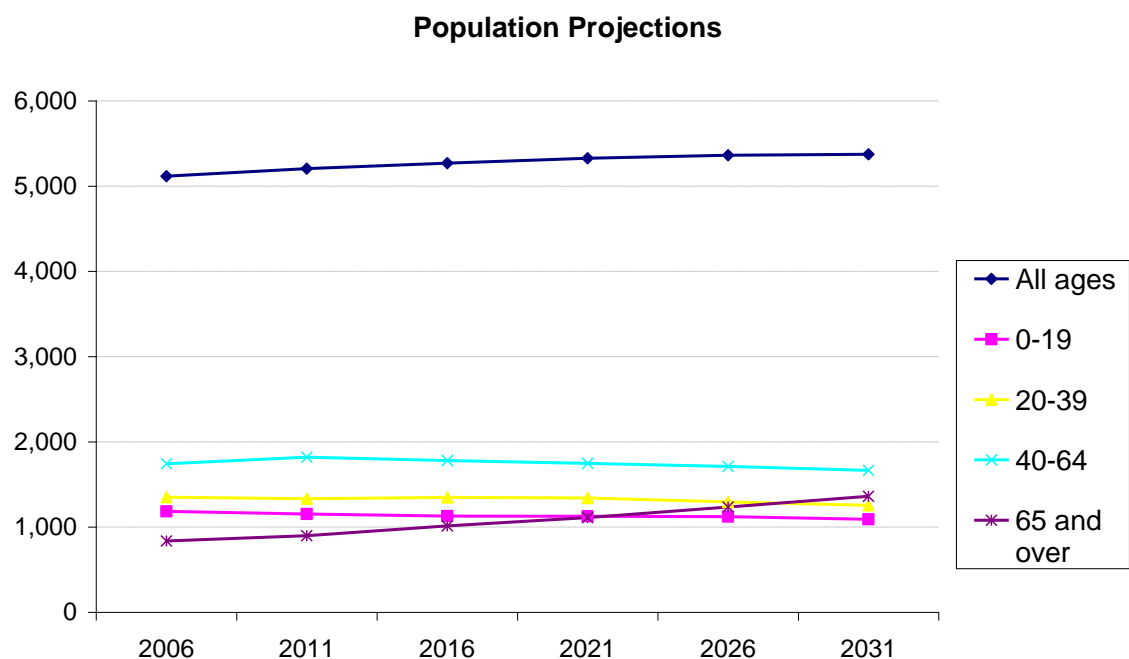
Starting at the very broadest level, the graph below shows the total population of Scotland over the last 55 years. As can be seen the population has been fairly steady at around 5.1m although the most recent year shows a slight increase after a period of gradual decline since the early 1970s.



This national trend masks differences in the demographic profile of the population. In relation to the work of the fostering reference group it was useful to look separately at the child population (who make up foster children) and the working age population (who make up foster carers). The graph below shows that over recent years there has been a decline in the number of children and adults under 40s and an increase in the 40-64 age cohort.



The graph below shows population projections, again taken from the GROS. The decrease in the population of children and 20-39 year olds that has been seen over the last decade is projected to continue. The number of 40-64 year olds is projected to remain relatively static but the number of people aged over 65 is projected to increase markedly. The population as a whole is projected to increase slightly.



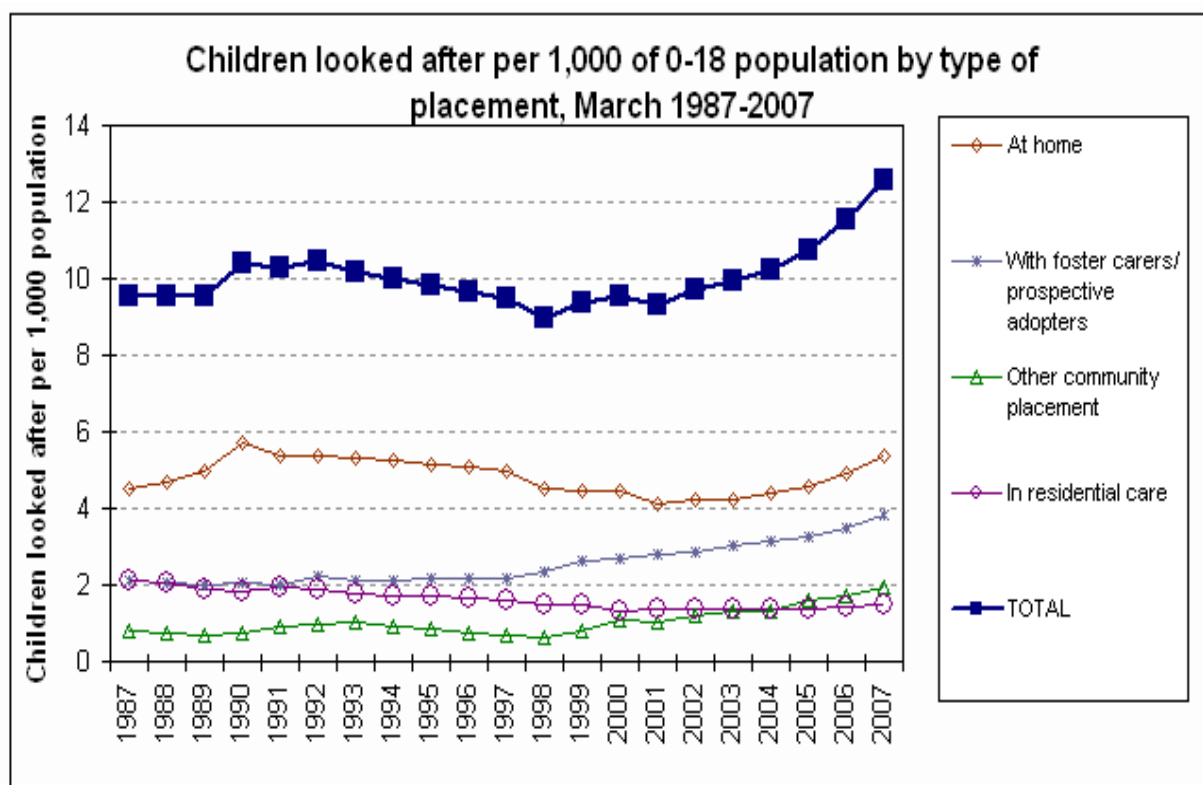
When considering these projections it is important to recognise that there is a great deal of uncertainty regarding the actual size of the future population with a number of complex interactions at play. However, there is greater certainty around the demographic profile regardless of which assumptions are adopted in relation to factors such as mortality and birth rates. In line with almost every country in Western Europe, the population of Scotland will continue to age and this will have implications for fostering and other social work services.

It is highly unlikely that these project trends would be consistent across Scotland with some authorities experiencing an increasing population while others will see a decline. Equally it is possible that some authorities see their population ageing more quickly while others age less quickly and understanding these relationships at a local level will be essential for authorities planning their social work services.

## Looked After Children

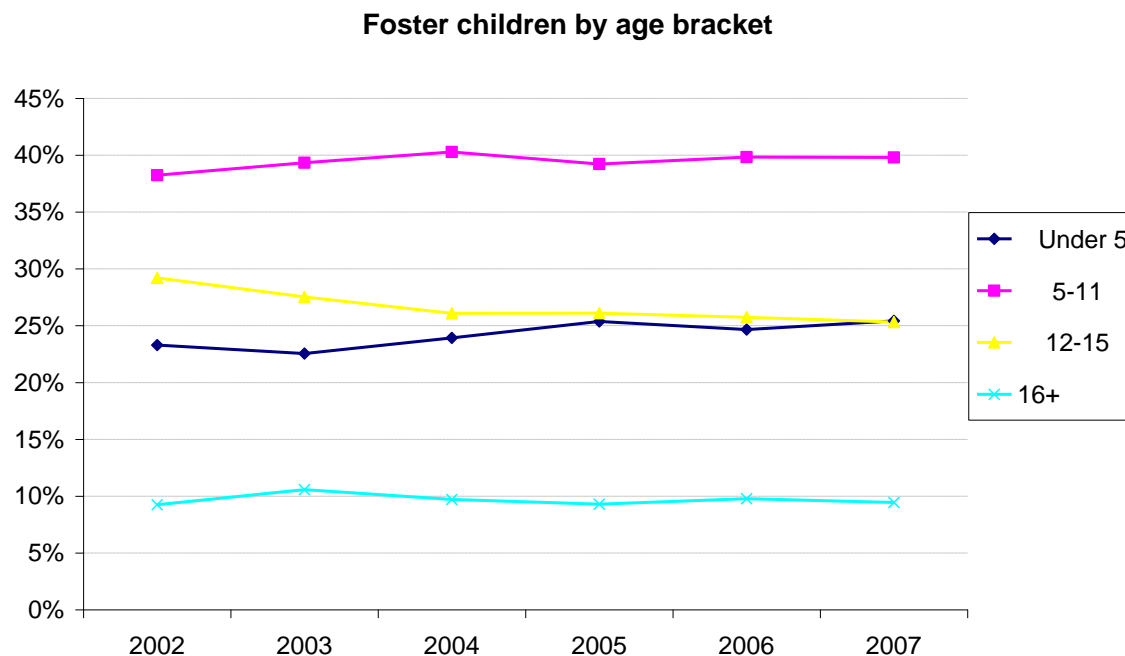
The graph below shows the number of LAC (Looked After Children) and specific LAC groups as a proportion of the 0-18 population over the last 20 years (Source: Scottish Government LAC statistics). As can be seen, total LAC has remained fairly constant over the last 20 years, with the exception of the last 5-6 years which have seen a marked increase.

The main driver underpinning this trend has been the use of foster placements. From 1987-97 the number of foster children, as a proportion of 0-18s remained constant. However, over the last 10 years the proportion of children in foster placements has almost doubled.





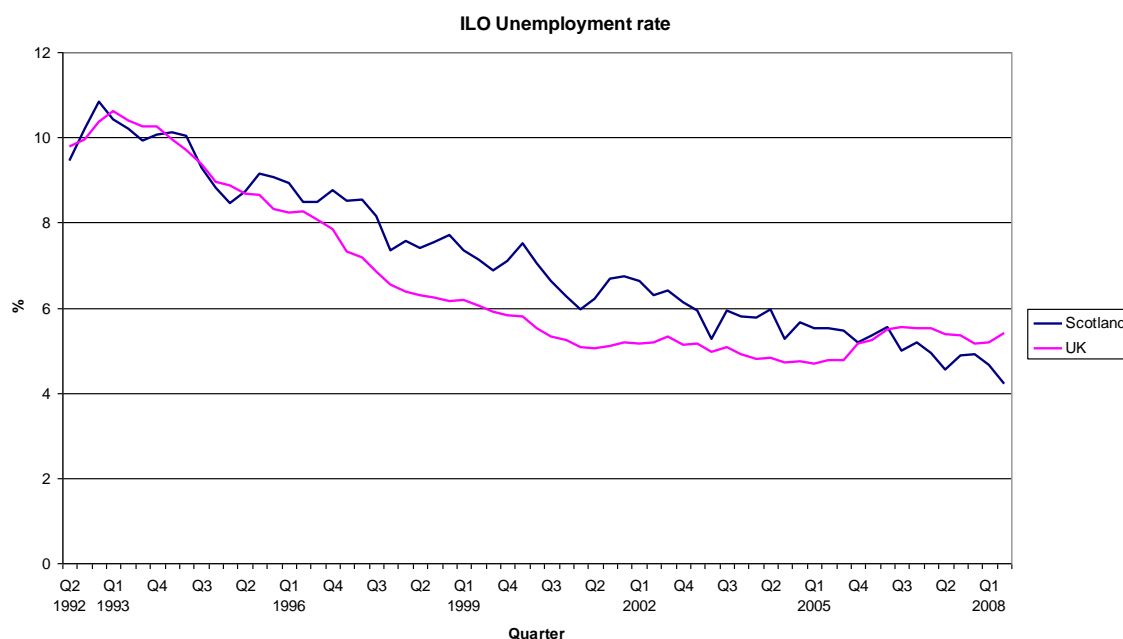
It is interesting to see whether the increase in fostering numbers differs between particular age cohorts. The graph below shows the proportion of foster children in each cohort over recent years. It can be seen that the composition of the foster child population has remained fairly stable over this period. In terms of absolute numbers, all age categories have seen an increase in recent years. This may have implications for recruitment strategies if carers have a preference on the age of the children that they foster.



## Employment

It is not possible to consider strategies for the recruitment of foster carers without the context of national employment trends to see if there are significant challenges/opportunities emerging. At a Scotland level unemployment rates are low and employment rates are high against historical comparisons. The graph below shows the official International Labour Organisation (ILO) unemployment rate for Scotland and Great Britain.

To qualify under the ILO definition a person needs to be unemployed but looking for and available to start work. This low rate suggests there are a relatively small number of unemployed people actively looking for employment. This has broad implications for any recruitment strategies because it suggests that there isn't a large 'pool' of unemployed labour to target.



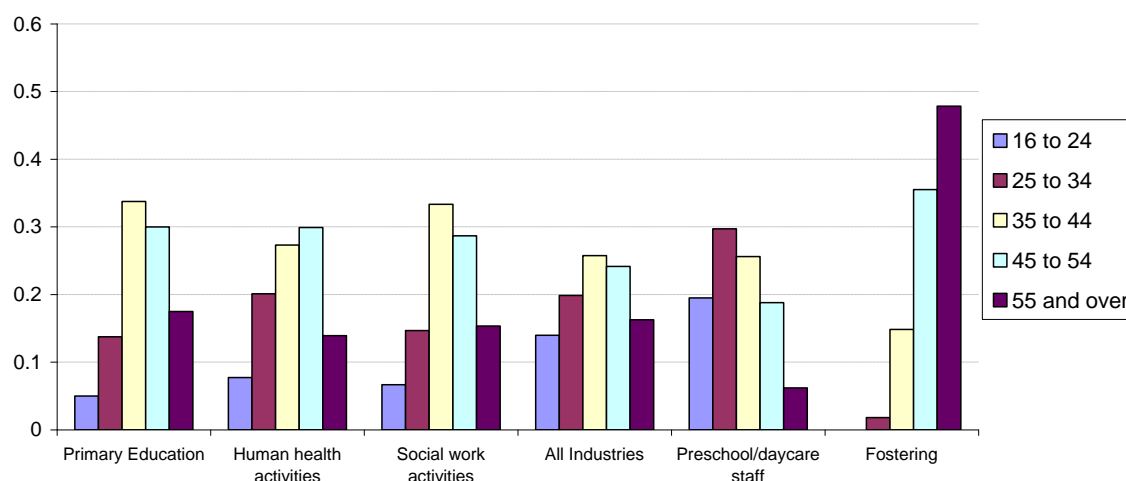
The employment rate is also high in Scotland (both historically and compared to the rest of the UK). An economy with historically low unemployment and high employment levels will continue to present a challenge to those looking to recruit foster carers.

In addition to the relatively small pool of unemployed, there may be scope to promote fostering as a career option to those working in other sectors of the economy whether they be in other care professions altogether. The nature of the career may also present an opportunity to target those who are 'economically inactive' and technically not in the labour market such as students or home makers.



The age profile of different occupations also yields some interesting results to inform recruitment strategies. Social work activities tend to have a larger proportion of their workforce in the 35-54 age group than the industry average across Scotland. Based upon a 25% sample of carers from The Fostering Network database, the age breakdown of foster carers tends to be far older, with nearly half over 55 and very few below the age of 34.

### Occupations by Age Category



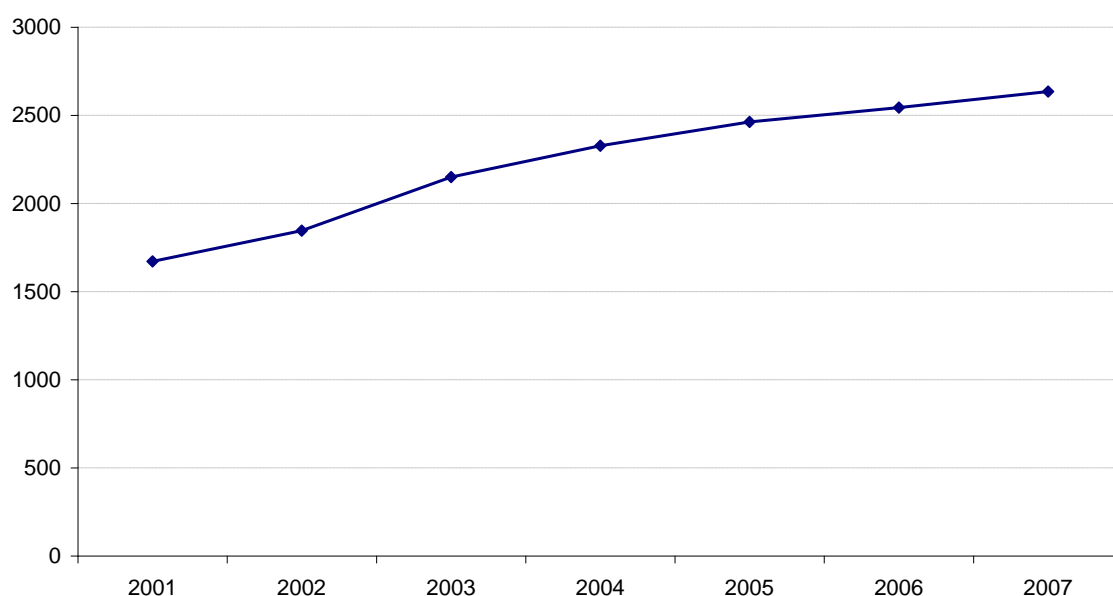
On linking this finding with the fact that Scotland has an ageing population this appears to present both challenges and opportunities to the fostering sector. Given that foster carers have historically tended to be older, the ageing population could mean a potential increase in the pool of prospective carers.

However, the ageing population also presents some significant challenges to the sector. Firstly, it could put additional strain on social services budgets as the ageing population require care services thus potentially detracting from child focused services such as foster care. An additional challenge may be that the ageing population may require increasing levels of informal care diverting potential foster carers towards looking after older relatives instead.

## Expenditure

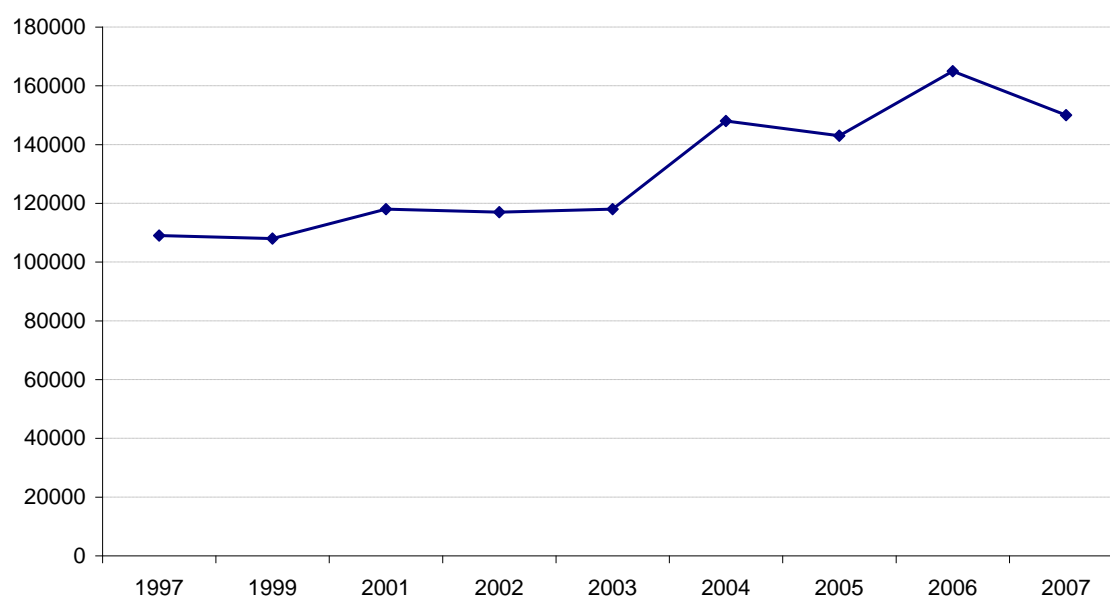
Of key importance throughout the analysis for the recruitment task group was the impact of the resources available to social work departments on the demand for services. The following graphs highlight expenditure trends over recent years. While resource constraints remain, spending on all public services has increased to record levels over the last 5 years (in real terms) and local authority expenditure on social services (including fostering) has increased at even greater rate.

**Real Gross Spend on SW in Scotland (£m)**



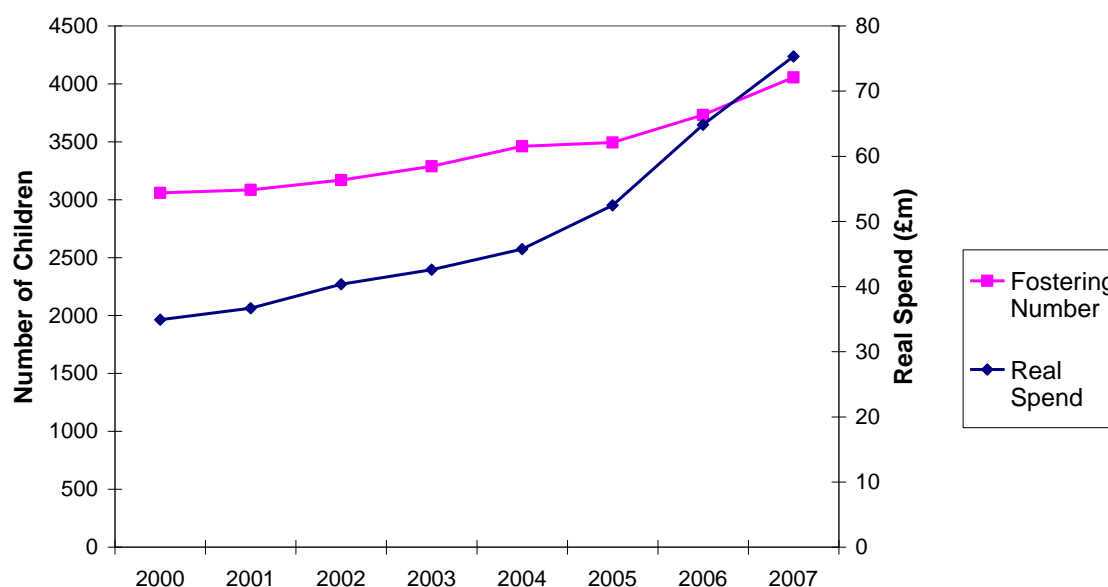
The majority of social work expenditure is accounted for by expenditure on salaries. Given this relationship it is unsurprising to see that the number of staff employed in social work activities has followed a similar pattern. The chart below shows a significant upwards trend over the last decade although individual years show fluctuations both upwards and downwards (Source: Labour Force Survey).

**Number of Staff in Social Work Activities**



While expenditure on social work has risen, expenditure specifically on fostering services has seen an even more dramatic increase, doubling in the last 8 years in real terms. It has been shown that the number of children in foster care has risen over recent years but expenditure on fostering has increased by a greater proportion. This emphasises that the increase in spending is not due solely to increased numbers of children in care but also factors such as increased allowances or training for carers intended to improve the quality of care and/or support retention.

**Fostering Spend vs Number of Children**



The relationship between expenditure and demand remains a contentious issue and ultimately it is not possible to say whether the increase in fostering numbers has led to the increase in expenditure or vice versa. It could be that increased need has led to more foster care spending. Alternatively it may be that the increased resources available to social work departments has enabled more need to be identified and addressed.

### **Location of Carers**

While location of individual foster children is not yet collected centrally, The Fostering Network member database does contain information on the home location of carers and also the local authority where they are registered. Analysis of this data showed some interesting relationships and confirmed what the experts on the recruitment task group had previously anecdotally believed to be the case.

The analysis showed that while authorities tended to recruit locally, this was not always the case and on occasion carers could reside hundreds of miles from the authority that they were registered with. It was felt that this may result from a registered carer moving home and not de-registering with the original authority but there were still less extreme examples of out of authority placements.

The analysis also emphasised that some authorities appeared to have less carers than required while others were essentially net exporters of carers. This typically manifested itself as the large urban authorities seeing excess demand for carers while neighbouring authorities were often better placed with more carers than required for their internal needs. The map contained within the analytical chapter of the main report shows this visually for the city authorities of Aberdeen, Glasgow and Edinburgh.

This again reinforced the benefits from continued, and improved, collaboration between neighbouring authorities to ensure the needs of vulnerable children across Scotland are met as efficiently and effectively as possible.

### **Conclusion**

The analysis provided to support the development of the recommendations of the Fostering Reference Group focussed on a number of key areas and trends related to care in Scotland. The group was advised that the size of the population of Scotland is relatively static but ageing over time. The evidence shows that the national labour market remains quite tight with limited excess capacity and it appears unlikely that significant increases in resources will be available to Scottish Government in the immediate future. With this as context, as long as demand for care services remain at the currently high levels, the need for effective and efficient use of resources is greater than ever.

The analysis presented to the group focused primarily on the national situation but the presentation of the results at the policy consultation event in Perth was well received by all and exposed a great deal of appetite for local analysis. The process of taking forward the analysis also highlighted the importance of partnership. No one component of the care system holds all the required information and the work of the recruitment group was only possible through partnership working between central and local government and private and third sector agencies. The Fostering Reference Group would encourage delivery partners to consider similar collaborative analysis in local areas since much of the intelligence required to drive forward effective local solutions is only held locally.

## Sources

The population statistics were obtained from the General Register Office for Scotland (see the website: <http://www.gro-scotland.gov.uk/statistics/index.html>). The website contains the data used for the current/past population charts as well as population projections.

The statistics on the number/age of looked after children are available from the Scottish Government website (see: <http://www.scotland.gov.uk/Topics/Statistics>). The social services/fostering expenditure analysis was also based on Scottish Government statistics. The estimate of the total number of kinship carers in Scotland was based on analysis of the Scottish Household Survey which can also be found in the statistics section of the Scottish Government website.

TFN provided anonymous information on carers (age, location etc.) from their membership records. This information was compared with statistics from the ONS (Office for National Statistics) on the age profile of other occupations within Scotland (see: <http://www.statistics.gov.uk>). The employment/unemployment charts and social work employment figures were also obtained from the ONS.

## **Appendix 2**

### **Membership of the Reference Group and the five Task Groups**

#### **Reference Group**

Anne Black, Reference Group Chair  
Mary McKenna, The Fostering Network  
Debbie Booth, Dundee City Council  
Maureen Keough, Highland Council  
Anne Hampton, West Lothian Council  
Margaret Bruce, SSSC  
Penny Curtis, Scottish Government  
Barbara Hudson, BAAF  
Maggie Mellon Children 1st  
Margaret Moyes, Scottish Adoption  
Euan Davidson, Scottish Government  
Dorothy Bremner, Kinsfolk Carers Edinburgh  
Jonathan Sher, Children in Scotland  
Judith Tait, SWIA  
Sara Lurie, Chair, Independent Fostering Providers Group, latterly Director tFN Scotland  
Sarah Crangle, The Fostering Network  
Jackie Brock, Scottish Government  
Ian Storrie, Scottish Government  
Anil Gupta, COSLA  
Matthew Elton, CAS  
Kay Jackson, Barnardos foster carer  
Marian Martin, HMIE  
Natalia Duncan, support project worker

#### **TG Organisational Arrangements**

Anna Fowlie, Scottish Government (Chair)  
Anne Black, Reference Group Chair  
Penny Curtis, Scottish Government  
Penny Simpson, Independent Chair of Fostering and Permanence panel Aberdeen  
Pat Preece, Stirling Council  
Pat Hutchison, BAAF  
Maureen Keough, Highland Council  
Margaret Moyes, Scottish Adoption  
Rhona Pollock, SCRA  
Jennifer Crowson, SWIA  
Judith Tait, SWIA  
Romy Langeland, ADSW  
Alison Jamieson, Care Commission  
Natalia Duncan, support project worker

Specific input from:  
Sheriff Peter Gillam  
Sarah Rodger, Perth and Kinross Council  
Gail Aboim, Dundee City Council  
Linda McLennan, Highland Council



## **TG Kinship Care**

Anne Black, Chair  
Jonathan Sher, Children in Scotland  
James Crombie, Kinship Care Network  
James Cameron, Kinship Care Network  
Matthew Elton, CAS  
Jane Aldgate, Open University  
Irene Miller, Perth and Kinross City Council  
Dorothy Bremner, Kinsfolk Carers, Edinburgh  
Gail Aboim, Dundee City Council  
Sharon McAlees, Inverclyde City Council  
Maggie Mellon, Children 1<sup>st</sup>  
Yvonne Ramsay, Kinship Care Network  
Natalia Duncan, support project worker

## **TG Recruitment**

Mary McKenna, Chair  
Sarah Crangle, The Fostering Network  
Kirstie MacLean, Edinburgh City Council  
Suzanne Higgs, Barnardos Family Placement Services  
Debbie Booth, Dundee City Council  
Heather Gray, Who Cares? Scotland  
David Dunne, Who Cares? Scotland  
Ian Storrie, Scottish Government  
Euan Davidson, Scottish Government  
Rosie Telford, Scottish Government  
Sam Coope, Scottish Government  
Laura Mulholland, Scottish Government  
Morag Darnborough, Glasgow City Council  
Val Smith, Glasgow City Council  
Audrey Gilfillan, Glasgow City Council  
Joanne MacDougall, Edinburgh City Council  
Carol McGinley, FCA  
Marie Amelie Viatte, Scottish Government

Some participants gave specific input only

## **TG Training**

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## Appendix 3

### GLOSSARY OF TERMS USED IN THE REPORT

**Adoption** is the permanent transfer of all parental rights and responsibilities of the birth parents to another individual or partners. Adoption Orders are granted by a Court and the Court must be satisfied that adoption will meet the needs of the child throughout their childhood and life.

#### **Child in Need**

The Children (Scotland) Act 1995 defines a child as being in need of care and attention if:

- he or she is unlikely to achieve or maintain a reasonable standard of health or development unless services are provided by the local authority
- his or her health and development is likely to be seriously impaired or further impaired without such services
- he or she is disabled
- he or she is affected adversely by the disability of a member of the family.

A local authority must provide a range and level of services to safeguard and promote the welfare of children in its area who are in need and to promote the upbringing of children in need by their families.

#### **Children's Hearing**

A lay tribunal composed of three panel members one of whom chairs the proceedings. Both genders must be represented. The hearing is charged with deciding if a child requires compulsory measures of supervision.

**Contact** - Contact between children and their parents (and brothers, sisters) is a basic right which should only be regulated if the welfare of the child might be compromised. Contact includes face to face meetings, letters, phone calls etc. Requirements for contact may be stated in supervision requirements. Contact should contribute to the well-being of the child and helps to retain active links with his/her family.

**Corporate Parenting** - the formal and local partnerships needed between staff in all local authority departments and services, and associated agencies who are responsible for working together to meet the needs of Looked After children and young people. (Looked After Children and Young People: We Can and Must Do Better, Scottish Executive 2007) Corporate Parenting offers the opportunity to improve the futures of Looked After children by all parts of a Council and partners making their contribution to the well being of the children.

**Family Group Conferences** – the process brings together parents, relatives, grandparents and other concerned family members to decide on and take responsibility for a family plan for the care and protection of the child or young person. Children 1<sup>st</sup> has pioneered the use of FGC in child welfare and protection since 1998. Evaluations have demonstrated the value of this formal process in reaching decisions.

**Family Meetings** – these may take a variety of shapes but the basic purpose is to bring together wider family members and friends to develop a plan for the care of a child either at home with parents or away from home. The goal is to identify the supports that the wider family can provide for the child and his/her carers.

**Foster Care** - involves looked after children and young people living and being cared for in an ordinary family home by carers who are not their parents. Foster carers are assessed and approved by agencies and must have the skills and capabilities to care for the whole child and promote their well-being.

**Foster Care Allowances** are paid to cover the costs of the care of the child and many agencies also pay a fee to reflect the time and skills the carers devote to the child. Foster carers are regularly reviewed to ensure that they are continuing to provide safe and nurturing care to the child.

**Freeing Order** is made by a sheriff on application of an adoption agency (which includes local authorities' adoption services) for the child to be freed for adoption by all parental rights and responsibilities with regard to the child being transferred from the birth parents to the adoption agency.

**GIRFEC (Getting it Right for Every Child)** - is the programme that aims to improve outcomes for all children and young people by promoting a shared approach that builds solutions with and around children and families. It enables children to get the help they need when they need it; supports a positive shift in culture, systems and practice; involves working together to make things better.

**Independent Reviewing Officers** – workers specifically appointed in some agencies to chair Looked after children Reviews. They are independent of the line management for the child or carers. Some agencies have built in scrutiny of reviews by a senior manager/s rather than appointing Independent Reviewing Officers.

**Kinship Care** - this is the term used to describe care provided by the wider family members or friends of a child when they have to leave the care of their parents.

**Informal kinship care** is where the child lives with kinship carers with no formal intervention of the local authority.

**Formal kinship care** is where the child is looked after and accommodated by the local authority and placed with kinship carers or where the Children's Hearing make a supervision requirement that a child lives with a kinship carer.

### **Looked after children**

Children who are looked after are those who are:

- provided with accommodation by a local authority under s.25 of the Children (Scotland) Act 1995
- subject to a supervision requirement (whether living at home or away from home)
- subject to an order, warrant or authorisation under which the local authority has responsibilities for the child.

The local authority has a duty to looked after children to:

- safeguard and promote the child's welfare
- provide family support services where the child is living at home
- promote contact between child and parents
- ascertain and take account of the child's views and views of parents and other relevant adults
- have regard to the child's religion, race, culture and linguistic background
- review the child's case at regular intervals.

**Looked after at home** - this will be where the child is the subject of a supervision requirement but continues to live at home Supervision requirements can impose a number of measures on the child, for protection, guidance, treatment or control. The local authority is required to provide supervision of the child and his welfare and access services for the child as required.

**Looked after and accommodated** - where the local authority arrange for a child to be live away from home and place the child in alternative care. Some looked after and

accommodated children will be subject to supervision requirements which include the child being placed in a particular foster home, residential home or other place. Other placements may be made at the request of the parents of the child when they are prevented from providing care.

***Looked after child in kinship care*** - this is where a child has been placed by a local authority with a kinship carer or a Children's Hearing has made a supervision requirement including the child being cared for by kinship carers.

**Parallel/contingency/concurrent Planning** - the development of different options for the care of a child at the one time rather than sequentially. The goal is to reduce drift for children but to have an open agenda with parents about the options so that they are aware of the outcomes of different actions they take or fail to take.

### **Parental Responsibilities**

Under the CS Act, parents have the following responsibilities towards their children:

- to safeguard and promote child's health, development and welfare until the child is 16
- to provide appropriate direction until the child is 16 and guidance until 18
- maintain good personal relationships and contact with the child until 16
- to act as a legal representative until child is 16.

### **Parental Rights**

Under the Act, parents have rights to:

- regulate the residence of a child under 16
- direct the child's upbringing
- maintain contact
- act as a legal representative

where this is in the child's best interests.

### **Parental Responsibilities Order**

A sheriff may transfer parental responsibilities to a local authority where a parent has:

- persistently failed, without reasonable excuse to fulfil their parental responsibilities
- has seriously ill-treated the child and return home is unlikely.

This order lasts until the child is 18.

**Pedagogy** - The principles of pedagogy are that people working with the child focus on "the whole child, their body, mind, feelings, spirit, creativity and the relationship of the child to others- their connectedness" (Petrie 2001).

The goal of developing pedagogy in Scotland is to create a workforce which can address the needs of the whole child and contribute their different skills to that process but all sharing common values and principles.

**Permanency** - involves making decisions about the long-term future of children who have been removed from their families' care. Its purpose is to ensure that the child has a permanent, stable and secure upbringing either with their original family or with alternative high quality care. Permanence is a permanent solution for the child whether in their own family or in alternative care.

### **Permanence Order**

This order will be implemented within the Adoption and Children (Scotland) Act 2007. A permanence order is an order made by a court on the application of a local authority. If granted, the order will specify what parental rights and responsibilities are given to the local authority and which are given to another person, for example, a foster carer or kinship carer. A permanence order can include authority for the child to be adopted.

## **Residence Order**

An order made by a court which regulates the arrangements about where, and with whom a child will live. If an order is made in favour of someone who does not have parental responsibilities and rights (e.g. grandparents, aunts) then that person will hold responsibilities and rights until or unless the order is changed. This lasts until the child is 16.

## **Abbreviations**

**ADSW** Association of Directors of Social Work  
**BAAF** British Association for Adoption and Fostering  
**CAMHS** Children and Mental Health Services  
**COSLA** Convention of Scottish Local Authorities  
**DWP** Department of Work and Pensions  
**FGC** Family Group Conferences FM family meetings  
**HMRC** Her Majesty's Revenue and Customs  
**MARS** Multi Agency Resource Service recently set up to provide support and information and advice in relation to child protection services  
**PRO** Parental Responsibilities Order  
**SCIE** Social Care Institute for Excellence  
**SIRCC** Scottish Institute for Residential Child Care  
**SR** Supervision Requirement  
**SSSC** Scottish Social Services Council  
**SWD** Social Work Department  
**TFN** the Fostering Network  
**The Act /CSA** Children (Scotland) Act 1995

## Appendix 4

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