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Outcomes for children of shorter court decision-making processes:

A follow-up study of the Tri-borough care proceedings pilot

Final Report

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1. Introduction

This report is a follow-up to the original evaluation of the Care Proceedings Pilot in the Tri-borough authorities in London (Hammersmith and Fulham, Kensington and Chelsea, Westminster: Beckett et al., 2014a). That study compared the complete cohort of care proceedings taken by the authorities in the pilot year (2012-13), when they introduced the target of completing care proceedings within 26 weeks (ahead of its introduction across the rest of the country from mid-2013 onwards), with the complete cohort of care proceedings from the previous year (2011-12, referred to hereafter as the pre-pilot). By coincidence, there were 90 cases in each year, comprising 125 children in the pilot year, and 131 in the pre-pilot year. This means that there is a database of 180 cases (256 children) who started care proceedings in 2011-13, half under the old approach and half under the new more focused and explicitly delay-conscious regime. This gives a unique opportunity to track and compare the progress and outcomes of the cases. The care proceedings pilot achieved its goal of reducing the duration of care proceedings, but it is important to assess what impact the new regime may have had on what happens to the children afterwards.

Care proceedings are one of the most intrusive state interventions into the lives of children and families. There is international and interdisciplinary interest in ensuring that proceedings are brought in appropriate cases, conducted in a fair, thorough and timely manner, and that the outcomes are as beneficial as possible for the children (e.g. see Brown and Ward, 2012; Courtney and Hook, 2012; Dickens et al., 2014, 2016; Mulcahy et al., 2014). But it is not easy to satisfy all these requirements and, in particular, there can appear to be tensions between the imperatives of thoroughness and speed. In England and Wales, recent years have seen major reforms to care proceedings, particularly to reduce the length of time taken to complete the court case. The average duration of proceedings has fallen notably, from 56 weeks in 2011 to 28 weeks in early 2016 (MoJ, 2016). But are the outcomes for children any better?

This study addresses that question by tracking what happened to the two cohorts of children in the Tri-borough pre-pilot and pilot years, for the first two years after each child's final hearing. The research also included a questionnaire for parents and carers of the children, to obtain their views on the child's progress and the support they received, and interviews with practitioners in the Tri-borough authorities to get a picture of how the new approach to court proceedings is perceived to be working, four years on.

The original evaluation

The original evaluation (Beckett et al., 2014a) showed that the pilot had been successful in its primary aim of reducing the length of care proceedings, from a median duration of 49 weeks in the pre-pilot year to one of 27 weeks in the pilot. It also found that the reduction in the length of care proceedings

had not been achieved by pushing delay back to the pre-court period; in fact, it showed that the opposite had happened, and delay had also been reduced there. Pre-court delay is more difficult to measure than court delay because there is no clearly defined start date, and it can be hard to differentiate between 'delay' and appropriate opportunity for families to engage and change. The evaluation used two different proxy measures: (a) the length of time between initial child protection conference (ICPC) and issue of care proceedings (b) the length of time between the legal planning meeting (LPM) and the issue of care proceedings. The median number of weeks between ICPC and issue date had reduced from 17 weeks in the pre-pilot to 9 weeks in the pilot year. The median number of weeks between LPM and issue date had reduced from 8 to 5 weeks. Both measures had increased for children where the ICPC and LPM were held before they were born, also suggesting more pro-active decision-making and planning.

The original report also, though more tentatively, concluded that the quicker process had not led to a drop in the thoroughness and fairness of decision-making. This was based on the views of a sample of professionals (including social workers, lawyers representing families and local authorities, social work managers, judges, children's guardians and court officials), collected in interviews and focus groups. There were some differences of opinion, but overall the views were highly positive. Furthermore, the pattern of orders made at the end of proceedings was broadly similar between the pilot and pre-pilot years. There had been an increase in the number of cases ending in special guardianship orders, and a decrease in care orders only, but these differences were not statistically significant.

Finally, a focus group with young people in care confirmed that court delay is not just an issue that concerns professionals, but is a live and important one for children and young people, for whom long periods of uncertainty about their future care are difficult and worrying. However the young people, just like the professionals, were also concerned that shorter proceedings should not be achieved at the expense of thoroughness and justice.

The present study

The original evaluation did not have the opportunity to follow the two cohorts into the post-court period and look at what happened to the children after proceedings, or to establish whether there was increased or reduced delay between final hearing and permanent placement (or post-court delay, as it will be called here.) Nor was it possible to say anything about the relative stability of the placements resulting from the two regimes. Those are the primary issues that this study addresses.

Chapter 2 sets the findings in a wider context of developments in policy and law, and research into outcomes for looked after children, particularly those who have been subject to care proceedings.

Chapter 3 describes the methodology of the study.

Chapter 4 presents the statistical findings about the outcomes for the two cohorts, their placements and timing of any moves, and whether any further problems have arisen.

Chapter 5 presents the findings from the questionnaire for parents and carers.

Chapter 6 presents the findings from the interviews with practitioners.

Chapter 7 draws the conclusions.

Chapter 8 provides a summary and makes recommendations.

2. The wider context

This chapter sets the findings in a wider context of developments in policy and law, and research into outcomes for looked after children, particularly those who have been subject to care proceedings.

As regards policy and law, three elements stand out. First is the overall reduction in the average duration of care proceedings across England and Wales since the reforms of 2013-14; second, the substantial national increase in the volume of care proceedings and in other areas of work for local authority children's services; and third, the drop in the number of care proceedings ending with adoption plans and the increase in those ending with children placed with 'connected persons' under a special guardianship order.

As regards outcomes for looked after children, the key message is that these are, generally, more positive than often portrayed in the media and political debate. Local authorities do genuinely try to implement the care plans agreed in court, but may face challenges of delay and unsuccessful plans, for various reasons. Good assessment and ongoing support are crucial, whatever the child's placement.

Duration of care proceedings

The average duration of care proceedings across England and Wales has fallen from 56 weeks in 2011 (FJR, 2011) to a mean of 28 weeks/median of 25 weeks in the quarter January-March 2016 (60% of cases ending within 26 weeks). Having said that, there are still some extremely long running cases and there is considerable variation between different court areas (MoJ, 2016). The median duration for the Tri-borough authorities in 2015-16 was 26.5 weeks (TCPP, 2016).

The Children and Families Act came into force in April 2014, making it a legal requirement that all but 'exceptional' care cases should be completed within 26 weeks; but the court guidelines for achieving that, the revised Public Law Outline (PLO), had been implemented on a phased basis from summer 2013. The Tri-borough pilot was influential in showing that 'it could be done', and offering ideas on how (for example, it was quoted by Sir James Munby in his 'View from the President's Chambers', number 6: Munby, 2013). New statutory guidance for local authorities on care proceedings and pre-proceedings work was published in 2014 (DfE, 2014). The ADCS and Cafcass produced a 'social work evidence template' in 2014 (revised in 2016) to assist in compliance with the PLO and clear and analytical report writing for court. It is not compulsory, but it, or a variation of it, is now used by most local authorities (ADCS and Cafcass, 2016a).

Evaluations of the operation and impact of the PLO have been undertaken by Ipsos MORI (2014) and Research in Practice (Bowyer et al., 2015a, 2015b, 2016). The Ipsos MORI study focused on Local Family Justice Boards, and respondents were mainly judges and lawyers. The RiP studies focused on the views of local authority staff. The 2015 studies took views in six authorities, the 2016 study took

views from 21. There have been other evaluations of local authority programmes to meet the 26 week deadline – the ‘Bi-borough’ care proceedings project (London boroughs of Camden and Islington: Rothera and Ryan, January 2014 and January 2015) and the ‘South London Care Proceedings Project’ (Greenwich, Lambeth, Lewisham and Southwark: SLCPP, 2014).

There are shared messages from these studies that echo those in the Tri-borough evaluation (Beckett et al., 2014a). There is widespread support for the focus on timeliness and the 26 week deadline, but some concerns and dissatisfactions. Effective pre-proceedings work is seen as essential, but there were concerns from local authorities that this was not always valued and proceedings sometimes took too long because of courts ordering additional assessments (in their view, unreasonably). There were also concerns that sometimes the courts required assessments to be undertaken in very short timescales, even by the next day. Local authority and legal respondents emphasised that there should be sufficient flexibility for cases which needed to take longer, appropriate opportunities and support for parents to make any required changes, and time for prospective family carers to come to terms with the new situation. There are concerns from staff in all agencies about the capacity of the services to maintain performance in the context of high demand, limited resources and staff shortages/turnover. Although there are differences of opinion between the different professions and agencies involved, there is a recognition that the reduction has been achieved through committed endeavour and good cooperative working, recognising the different roles of all involved. Even so, as will be discussed below, at the highest policy level there have been considerable tensions between the courts, local authorities and central government, notably regarding the place of adoption and the use of s 20 accommodation.

Increase in volume of care proceedings and other work

The second contextual factor is the substantial increase in the volume of care proceedings in England and Wales, which rose to 12,871 cases (over 21,000 children) in the year April 2015-March 2016, compared to 11,110 cases in 2012-13 (Cafcass, 2016). This has been accompanied by other substantial increases in demand and workload for local authorities, notably the number of children in need, subject to s 47 enquiries, on child protection plans and looked after. Reasons for this include rising levels of economic hardship for families, new legislative requirements and sharper awareness of safeguarding issues (e.g. sexual exploitation) (ADCS, 2014). Whilst the national trends are up, some local authorities have reduced the numbers in their areas.

The number of children looked after by local authorities in England on 31 March 2015 was 69,540, compared to 65,510 on 31 March 2011 (DfE, 2015b). The Tri-borough authorities, however, have all reduced the number of children looked after since 2011 (Hammersmith and Fulham 250 to 185 on 31 March 2015; Kensington and Chelsea 130 to 105; Westminster 210 to 180: DfE, 2015b: Table

LAA1). In terms of numbers starting to be looked after over the year, there is some year by year fluctuation in the Tri-borough figures, but they are broadly level since 2011 (DfE, 2015b: Table LAC1). The factors that help keep children out of care have been identified by the ADCS as more specialist early intervention services, better inter-agency working, better screening and assessment processes, and the use of strategies that build on family strengths and resilience (ADCS, 2012).

The number of cases starting care proceedings in the Tri-borough authorities in 2015-16 was 93 (149 children), almost exactly the same as the pre-pilot and pilot years (2011-12 and 2012-13), when it was 90 each year (TCPP, 2016).

In March 2016, Kensington and Chelsea, and Westminster became the first local authorities to have their children's services rated 'outstanding' under Ofsted's new single inspection framework. Hammersmith and Fulham was rated good. Key features that were praised were strong and able leadership, a stable workforce, manageable caseloads and the high value placed on good relationships between social workers and children. There was a good range of services and the Tri-borough arrangements were seen to offer good economies of scale.

One development that is seen to be driving the latest increase in care proceedings nationally are Sir James Munby's remarks about s 20 accommodation in his judgment in *Re N (Children) (Adoption: Jurisdiction)* [2015] EWCA Civ 1112. He warned local authorities about the 'misuse' of s 20, emphasising that there must be fully informed and competent agreement from the parents, that they have the right to remove the child at any time and that local authorities must not use s 20 for lengthy periods 'as a prelude to care proceedings'. It led the ADCS and Cafcass to issue a joint statement, accepting the concerns about undue drift, but defending the value and appropriate place of s 20 (ADCS and Cafcass, 2016b).

Drop in adoption plans, increase in use of special guardianship

The third key change has been the drop in the number of children on adoption plans, and an increase in those on special guardianship orders. A key factor here is considered to be the *Re B* and *Re B-S* court judgments in 2013. (*Re B (A Child)* [2013] UKSC 33; *Re B-S (Children)* [2013] EWCA Civ 1146). In *Re B-S*, Sir James Munby echoed the comments in *Re B*, that non-consensual adoption is 'a very extreme thing, a last resort', only to be made where 'nothing else will do', 'only in exceptional circumstances'. He said that to satisfy this standard, there must be a full analysis by the local authority of all the realistically possible alternatives, with arguments for and against each (para. 34). (The ADCS/Cafcass court template was drawn up to meet this 'balance sheet' requirement.)

The number of placement orders fell dramatically after the judgment, as did the number of decisions made by local authorities to pursue adoption (DfE, 2016a: 15, 20). In November 2014 the National

Adoption Leadership Board published a ‘mythbuster’, to try to clarify what the judgments ‘really said’ and re-assert the option of adoption (NALB, 2014). Sir James Munby clarified that *Re B-S* had not changed the law about adoption, in his judgment in *Re R (A Child)* [2014] EWCA Civ 1625, but the trend continued. More recently, in *Re W (A Child)* [2016] EWCA Civ 793, the Court of Appeal held that the phrase ‘nothing else will do’ was not a ‘hyperlink’ to a particular outcome, rather a reminder of the full and careful assessment that had to be carried out (para 68).

At the same time as the fall in the use of adoption, there has been an increase in the number of care cases ending with special guardianship orders. Concerns about whether these were being used appropriately led the government to commission a study by Research in Practice (Bowyer et al., 2015b). Although only a small study, it addressed the increased and changing use of SGOs since the more extensive research by Wade et al. (2014). It recommended further guidance on assessments of special guardians, how they should be integrated with the court timetable to uphold the child’s best interests, and better information and support for special guardians.

In February 2016 the government amended the special guardianship regulations to ensure that assessments specifically address any risk of future harm to the child, and the special guardians’ ‘ability and suitability to bring up the child until the child reaches the age of eighteen’ (Special Guardianship (Amendment) Regulations 2016). It also issued revised statutory guidance (DfE, 2016c).

In March 2016, the government published a ‘vision’ for adoption, as part of its wider ambition to ‘radically reform’ children’s services (DfE, 2016a, b). It said that ‘many children for whom adoption would be the best option are now missing out, and that some alternative placements are being made despite professionals having significant concerns about the quality and stability of the care on offer ...’ (DfE, 2016a: 15). It concluded that ‘there is an urgent need to get decision making right and to ensure that assessments cover the likely needs for a child’s whole childhood’ (p. 16), and said that it would amend the law to achieve this.

As regards the Tri-borough authorities, court outcomes in 2015-16 showed relatively little change from the 2012-13 pilot year cohort. There were 106 cases that concluded care proceedings in 2015-16. The most frequent outcome was a supervision order only, 33%. This was also the most frequent outcome in the cohort that started in 2012-13, but had risen from 27% (Beckett et al., 2014a; Table 2.4). There were also supervision orders combined with child arrangements orders (6%), or with SGOs (8%). There was a further 13% with SGOs only. This means that 21% of cases, a fifth, ended with an SGO in 2015-16, but this is slightly down from the pilot cohort, where 24% ended with SGOs. The proportions ending with a care order only, or with a care order and placement order, are almost unchanged: 15% ended with a care order only (14% in 2012-13), and 12% with a care order

and placement order (14% in 2012-13). Over a tenth of the cases, 11%, ended with no order, which is up from 7% (TCPP, 2016).

Outcomes for looked after children: research summary

There have been criticisms of the care system over many years for delays, instability and poor outcomes, but research tends to paint a more nuanced and generally positive picture than the prevailing stereotypes – although it is important not to be complacent, and to recognise the different needs of different groups of children and young people in the care system. Useful research summaries are given by Bullock et al. (2006), Forrester et al. (2009), Thoburn and Courtney (2011) and Boddy (2013).

As regards the implementation of care plans and longer-term outcomes for children who have been the subjects of care proceedings, previous studies have shown that local authorities do genuinely try to implement the court authorised care plans, and usually succeed. Plans are not disregarded, but may be threatened by delay and placement breakdowns. Delays might arise because of difficulties in family-finding, and shortages of staff or services. Placement breakdowns may be due to lack of support services, but also changes in the carer's circumstances, or the young person's circumstances or behaviour (*The Best-Laid Plans*, Hunt and Macleod 1999, and *Making Care Orders Work*, Harwin et al. 2003). A more recent but smaller scale study, Beckett et al. (2014b), following 59 children who had been the subjects of care proceedings in one local authority in 2004-05, found that all but two were in their planned permanent placements within 18 months of the end of proceedings, and two-thirds of these still intact at the follow-up point, 4 to 6 years after the proceedings.

More recently still, Mulcahy et al. (2014) tracked what happened to 114 children from one local authority who had been subject to care proceedings between 2006 and 2011. By the follow-up point, mean time 26 months, 88% of expert recommendations regarding placement had been implemented. But the implementation of support and treatment recommendations was less positive, and fewer than half the children had received the treatment or extra help that had been identified.

The key need, as identified by Bullock et al. (2006), is for improved support services for parents, relatives and adopters, to help when children are reunified or move to new families, together with high standards for the selection of placements and carers.

The message about the importance of good assessment and ongoing support comes across very clearly in studies of children who are reunified with their birth families. These plans are the least likely to succeed. Important research studies include the *Neglected Children Reunification* study (Farmer et al., 2012; Lutman and Farmer, 2013), and the *Home or Care?* study (Wade et al., 2012; Biehal et al., 2015). Both of these show the significant likelihood of returns breaking down and poor outcomes for

the children in those that continue; but also, that well planned returns and good support can make a difference.

The *Home or Care?* study focused on 149 children who had been looked after at some point in 2003-04, of whom 68 returned home and 81 remained continuously looked after. They found that maltreated children who stayed in care had greater stability and wellbeing than those who went home. A third of those who went home returned to care within six months. Careful and well managed returns, with provision of support services, were crucial to home placements that did last. Just over 40% of the children who went home were in stable placements after four years, but the researchers scored their wellbeing lower than those who had remained in care.

The *Neglected Children Reunification* study followed 138 children who had become looked after because of neglect, and had been returned to their parents during the year 2001. Half the returns broke down within two years, rising to almost two-thirds at the five year stage. Of those remaining at home, the researchers considered that a third had poor wellbeing, a third satisfactory and the other third good (Farmer et al. 2012). Two-thirds of the children had been subject to care proceedings. Reunification had taken place under 34 supervision orders and 32 care orders with a plan for the child to live with their parent(s), but court plans did not work out in over 60% of cases (Farmer et al., 2012: 184, 189).

As regards adoption, Selwyn et al. (2014), *Beyond the Adoption Order*, show the very low rate of adoption disruptions (estimated at 3.2%), mostly occurring during the teenage years. The study also shows the very great levels of social, emotional and behavioural difficulties that the majority of the children/ young people had, even if the placement did not disrupt. There were high levels of child to parent violence. Disruptions and difficulties were associated with the current age of the child, and with their age at entry to care and at placement. They were also associated with the extent of adversity before entry to care, and with delays in decision-making. The researchers emphasise the importance of skilled adoption support services throughout the process, including adolescence and beyond, highlighting that the outcomes of care proceedings are, ultimately, a long-term and lifelong matter.

3. Methodology

The aim of the present study was to investigate the impact of the 26 week target for care proceedings on the outcomes for children after the proceedings. There were a number of sub-questions under that principal objective:

- a) Was the child already in what was planned to be his/her permanent placement at the end of court care proceedings?
- b) If the intention, at the time of the final hearing, was for the child to subsequently move to a permanent placement, did this in fact happen? How long did the child wait until that move?
- c) Was there stability of placement?
- d) After the final hearing were there ‘adverse episodes’ or any serious problems in a children’s services context (e.g.: new child protection plan, further court proceedings, ‘edge of care’ panel meetings)?
- e) What are practitioners’ views regarding the longer-term impact of the focus on quicker proceedings, and have there been long-lasting changes in practice within the Tri-boroughs?
- f) Are there indicators of the child’s subsequent progress, in terms of their emotional and behavioural wellbeing?

The methodology included a quantitative element and two qualitative elements as follows:

Quantitative analysis: The child’s post-proceedings placement history and record of ongoing children’s social care involvement

A schedule was developed to capture the history of each child after the final hearing, extending and complementing the data already held for that child from the initial Tri-borough pilot evaluation. These schedules were completed for each (anonymised) child by the Case Manager of the Tri-borough Care Proceedings Project. The UEA researcher transferred the data to an SPSS database (statistical package for the social sciences) where the information was analysed and research questions (a) – (d) above answered. This SPSS database already contained information about that child’s care proceedings history and duration of proceedings, some basic demographic information (but not name), and the outcome of the court case. The complete database related to all 256 children and young people, 125 from the pilot year and 131 from the previous, pre-pilot year. The new variables which were collected included:

- The plan at the end of the proceedings;

- Where resident at the end of proceedings;
- When the move to a permanent placement took place (if a move did take place);
- Subsequent planned, and unplanned, moves;
- Subsequent children's social care involvement, including CiN status, CP plan, s 20 accommodation, edge of care panel meetings or further court proceedings;
- Whether the child's case was still open to children's social care, and if so to which team;
- Episodes of absconding or youth offending.

Qualitative analysis: Parents' and carers' views of their child's current wellbeing and their experiences of the court process

Qualitative information on how the children were doing in their placements, and on the child's wellbeing (emotionally, behaviourally and socially) was sought. We also wished to incorporate the perspective of their parent, special guardian or carer on the court process, and capture their comments on what had gone well, the issues they had faced, and might continue to face, and their relations with Tri-borough staff.

A questionnaire, along with an SDQ form (strengths and difficulties questionnaire), was sent to the parent or carer of 143 children. Twelve children were excluded as they were living abroad, and 25 of the young people had reached the age of 18 and were living independently, semi-independently, in residential care or their address was unknown, and they (or their parent) were not approached. For a large group of children and young people (numbering 76) the Tri-borough Case Manager advised that it was inappropriate to approach the parent or carer. This group included families where there were ongoing child protection concerns and children's services involvement, or where it was known that the family were no longer resident at the last address on the children's social care system.

Forms for 25 children were returned, a response rate of 17%. Eight were regarding children where care proceedings had been issued in the pilot year (a response rate of 10% of the 81 sent), and 17 related to cases from the pre-pilot year (a response rate of 27% from the 62 sent). Over a third of adopters responded; the response rate from foster carers, special guardians and parents was 12%.

It is important to note that the views expressed are unlikely to be representative of the whole set of parents, special guardians and carers from the pilot and pre-pilot year. In particular, as mentioned above, families were not approached where there were known to be ongoing difficulties including further child protection involvement by the boroughs. One assumes that their answers would have often been less positive about their family situation, and about Tri-borough children's services. The

questionnaires do not, therefore, yield data that can be subjected to formal statistical analysis. Nevertheless, the comments do represent the experiences and views of 25 parents, relatives and carers, and it has given them an opportunity to add their voice to this study, and to offer a valuable insight into the successes, the struggles and the types of concerns that they have in relation to their child.

Qualitative analysis: Interviews with social workers regarding the longer-term impact of the focus on quicker proceedings and changes in the post-court process

Interviews with key professionals were undertaken in order to gain a clearer understanding about how the post-court experience had changed as between the two cohorts. Interviewees were asked:

- Whether they perceived that children were moving to planned permanent placements more quickly, and what are their explanations for this?
- How successful are placements proving to be, and has that changed?
- What changes in practice have occurred?
- How does the shift towards connected persons placements relate to the shift towards shorter care proceedings?

Eight social workers (including practitioners and managers) from the three boroughs were interviewed. The Tri-borough Case Manager provided the researchers with a list of about forty social workers in the Tri-borough who would have been in practice long enough to be able to make comparisons between practice before and after the pilot, and comment on changes. (Some social workers when approached suggested colleagues to add to the list.) The social workers were contacted individually and invited to take part in a telephone interview, until eight had agreed to take part. In addition to these eight, the Case Manager herself, who oversees court work across the three boroughs, was interviewed. Of the eight one worked in Westminster, three in Hammersmith and Fulham, two in Kensington and Chelsea, and two in teams that served the whole Tri-borough area. Two were first-line managers, with the remainder being social workers at various levels. The teams these eight came from included a Looked after Children Team, teams providing child protection and family support services under various titles, a 'post-order team' (working with families who had adopted or become special guardians) and a connected persons team (working with connected persons who were being considered as carers for children).

The data collected from such a small group cannot be used for purposes of statistical analysis, but it does give some indication of common themes. Interviews were recorded and transcribed (with notes

also being taken), and then examined to identify (a) recurring themes (b) issues which seemed to be of particular importance to the interviewees.

Strengths and limitations

Each element of the study has its own strengths and limitations, but taken together they do offer an informative picture of the progress of the children, the experiences of their parents and carers, and the views of the professional staff. The statistical comparison of the two cohorts only compares the pilot and pre-pilot years and includes no data about what may have happened for subsequent cohorts now that the structures and timescales of the pilot have been established. It also only takes the comparison as far as a point two years after the final hearing. Nevertheless it tracks a substantial number of children, and gives a comprehensive picture of what happened up to that time point. The number of questionnaires returned by parents and carers was relatively small, and those looking after pre-pilot children are at a different stage from those caring for pilot children. This fact, and the low numbers, mean that statistical comparison of responses from each cohort, or other types of statistical analysis, would not be appropriate. The questionnaires do however give a sense of the range of challenges and successes carers have experienced. The interview material includes just nine social workers and so cannot be taken as necessarily representative of the full range of views of staff, even though consistency across the nine on a number of points suggests that certain views are likely to be widely shared. An additional benefit of the interviews is that staff were not simply comparing the pre-pilot and pilot cohorts, but were discussing their experience of what happens, in court and after it, from before the pilot and since the pilot up to the present day.

4. Quantitative findings: statistical comparison of cohorts

The present follow-up study aims to address some of the questions that were inevitably left unanswered in the original evaluation. The two main issues addressed by the statistical element of the study concern:

- (1) Potential delay in the post-court period. Is there any evidence of a delay in the post-court period, as would be the case if children were waiting longer for permanent placements after the end of care proceedings?
- (2) Placement outcomes. Is there any evidence of differences in outcomes for the pilot children compared to the pre-pilot children? (If, for example, the decisions made in the pilot were so hurried that they were not as thorough and careful as those in the pre-pilot, one would expect poorer care outcomes for pilot children. On the other hand, more focused decision-making, and less time spent in temporary placements, might result in better outcomes for pilot children.)

In the original evaluation the key research question was how long were cases taking to proceed through court, and therefore the ‘case’ was the ‘unit of study’. In this follow-up study the key research question is how did the children fare, and it is therefore appropriate to look at each individual child. This recognises that a child may experience different outcomes from those of his/her sibling(s) who were joined in the same proceedings.

To ensure that we are comparing ‘like-for-like’, we tracked every child for at least two years after the final hearing. Some cases were considerably further on, especially from the pre-pilot year, where it could be nearly four years from the end of proceedings. We therefore used two years after final hearing as a standard point for comparison.

A shift away from long-term foster care?

Before discussing the evidence on the post-court period and longer term outcomes in more detail, it is important to note the change in the type of placement specified in plans at the conclusion of proceedings as between the pre-pilot and pilot years (see Table 1 below). Specifically, between the two years there was a decrease in the use of non-kin long-term foster care (from 20% of children in the pre-pilot to 12% in the pilot), and a smaller but still notable increase in the percentage of children whose plan was to live with ‘connected persons’ (from 21% to 26%).

It is also worth recalling the different age profiles of the two cohorts: care proceedings were started on twice as many new-born babies in the pilot year compared to the pre-pilot (30% of the cases in the pilot year). This is likely to have reduced the use of long-term foster care as a permanence plan.

There was a modest decrease in the percentage whose plan was for adoption by non-kin (from 14% to 12%). There was an increase in the percentage whose final plan involved living with one or both parents (pre-pilot: 42%; pilot: 48%). The figures for residential placement and orders of no order or withdrawn cases are too low to make reliable comparisons. The shift from non-kin (adoption and long-term foster care) to kin (living with one or both parents, or with a connected person) approaches, but does not quite reach, statistical significance at the 95% level ($p = 0.069$).

Table 1: Plan at the end of proceedings – a comparison of the pre-pilot and pilot cohorts

Plan made	Pre-pilot cohort (131 children)	Pilot cohort (125 children)
Long-term non-kin foster care	26 (20%)	15 (12%)
Adoption non-kin	18 (14%)	15 (12%)
Live with one or both parents	55 (42%)	60 (48%)
Live with connected person	27 (21%)	33 (26%)
Residential provision	4 (3%)	2 (2%)
No order or withdrawn	1 (1%)	-
Total	131 (100%)	125 (100%)

The shift from non-kin to kin as placement of choice is, logically, a separate phenomenon from the shift towards shorter proceedings, but the interactions between them are complex and nuanced. For example, the Research in Practice report on special guardianship under the new PLO notes that the assessment process for connected persons wishing to be considered as special guardians is much briefer than for non-kin foster-carers and adopters, and the threshold for approval lower (Bowyer et al., 2015a). This could have important implications in a number of respects: for the course of the proceedings, the timing of the placement (i.e. whether the child is placed before, during or after the proceedings; and if after, how long), and for longer term outcomes (i.e. placement stability).

The post-court period

A key question in relation to the child’s experience, as between the pre-pilot and pilot cohorts, was whether there was a difference in the length of time that children waited *after* care proceedings for their permanent placement. If the delay that has been squeezed out of the court and pre-court periods had been pushed forward into the post-court period, then we would expect the average wait after court to have increased in the pilot year. This had not occurred, but it is important to appreciate that the majority of the children, in both cohorts, were *already* in what was planned to be their permanent placement by the time of the final hearing.

Table 2 below shows the pattern of placement moves during and after the care proceedings. It is notable that a higher proportion of children in the pilot cohort, as compared with the pre-pilot cohort, did not change placement either during or after the proceedings (line 1, Table 2), and were in the same placement throughout. These children, numbering 95 over the two years, were mainly living with one or both parents (just under 70% of the non-movers in both cohorts) with a smaller proportion living with a connected person (24% in the pre-pilot cohort, and 21% in the pilot cohort). Three children in each cohort were living in a foster placement throughout the proceedings, and remained with the same carer after the final hearing, on a long-term basis.

In the pre-pilot cohort, 52 children (24 + 28, shown in lines 3 and 4 of the table) moved *after* the proceedings, just under 40% of the total. In the pilot cohort it was 44 children, 35%. The difference is not statistically significant, but the fact that the percentage needing to move afterwards did not increase in the pilot year is worthy of note, given that shorter care proceedings give less time to arrange moves to permanent placements, if these have not already been identified as possibilities.

Table 2: Changes of placements, both during and after proceedings

Timing of moves	Pre-pilot cohort (131 children)	Pilot cohort (125 children)
1. Never moved – same placement during proceedings and after proceedings completed	37 (28%)	58 (46%)
2. Moved during proceedings, but no move after proceedings completed	42 (32%)	23 (19%)
3. Same placement during proceedings, and moved after proceedings completed	24 (18%)	31 (25%)
4. Moved both during and after proceedings	28 (21%)	13 (10%)
Total number of children	131 (100%)	125 (100%)

Moreover, Table 2 also indicates that fewer children experienced moves both during *and* after the proceedings; 10% in the pilot cohort, down from 21% in the pre-pilot cohort (line 4). So, in addition to reaching resolutions more quickly, the pilot cohort had seen a reduction in the number of moves that children experienced while waiting for the resolution to be reached. Provided the children are in a safe and suitable placement, this is a welcome development, since both lengthy periods in temporary care and multiple moves are likely to add to a child’s sense of insecurity.

We look now in more detail at those children who needed to move from a temporary placement to a permanent one after the conclusion of proceedings, and how long it took for this move to be achieved. Table 3 provides a breakdown into those children who moved (noting how long on average that move took); those for whom what was a temporary placement became a permanent placement subsequent to proceedings; and those who never achieved the permanent placement as envisaged in the plan. The latter group includes, for example, children and young people who had temporary placements which never led to a permanent move (and for some involved episodes of absconding), or who moved to live in residential homes, hostels and independence units, reached the age of 18 before a move into a permanent placement had been made, or in rare cases were held within the youth justice system.

Table 3: Post-proceedings moves for children not in their intended permanent placements at the end of proceedings – a comparison of the pre-pilot and pilot cohort

Post-proceedings moves	Pre-pilot cohort (52 children)	Pilot cohort (44 children)
Subsequently moved to a permanent placement	38 (73%) (mean number of weeks to permanent move = 29.7 Range from under 1 week to 92 weeks)	34 (77%) (mean number of weeks to permanent move = 14.1 Range from under 1 week to 101 weeks)
Temporary placement became permanent (change of plan, but no change of placement for the child)	4 (8%)	6 (14%)
Did not achieve permanent placement as envisaged	10 (19%)	4 (9%)
Total	52 (100%)	44 (100%)

The most striking finding here is that, when children did have to move to a permanent placement after the conclusion of proceedings, the mean time taken from final hearing to placement reduced in the

pilot cohort to 47% of what it had been in the pre-pilot cohort. Table 3 shows a mean reduction in this wait from 29.7 weeks in the pre-pilot cohort, to 14.1 weeks in the pilot, which is a highly statistically significant reduction in time. (Indeed, if the case of one child is excluded, for whom there were exceptional circumstances related to illness, and whose move to a permanent foster placement took 101 weeks, then the mean number of weeks until placement for the remaining 33 children was 11.3 weeks – 38% of what it had been for the pre-pilot cohort). This is an important finding because it is evidence that delay has not been pushed forward to the post-court period.

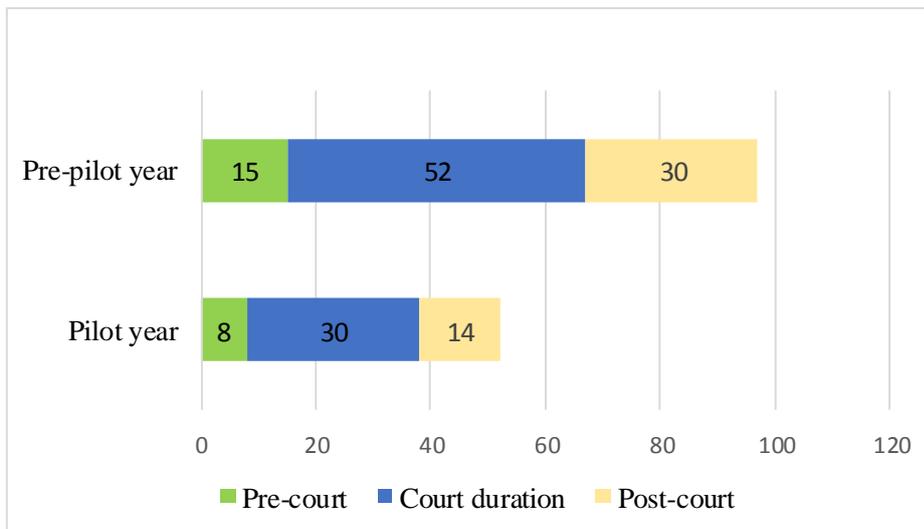
On the contrary, the pilot not only achieved a reduction of, on average, over 15 weeks in the *post*-court period, but also a reduction in the pre-court period, and a reduction in the duration of the court proceedings themselves. Looking only at those children who were not already in their permanent placement at the end of proceedings, the data show an overall reduction in the mean length of time between the legal planning meeting and permanent placement from 96 to 52 weeks (Table 4). The median number of weeks is also given, in order not to give undue weight to a small number of particularly long cases.

Table 4: Mean number of weeks of pre-court stage, court proceedings and move to permanent placement (for children not already in final placement by end of proceedings)

	Legal planning meeting to issue date Number of Weeks	Duration of court proceedings Number of weeks	Final hearing to permanent placement Number of weeks	Cumulative length of time across the three stages Number of weeks
Pre-Pilot cohort (38 children)	15.6	52.1	29.7	96 (mean) 93 (median)
Pilot cohort (34 children)	7.9	30.1	14.1	52 (mean) 46 (median)

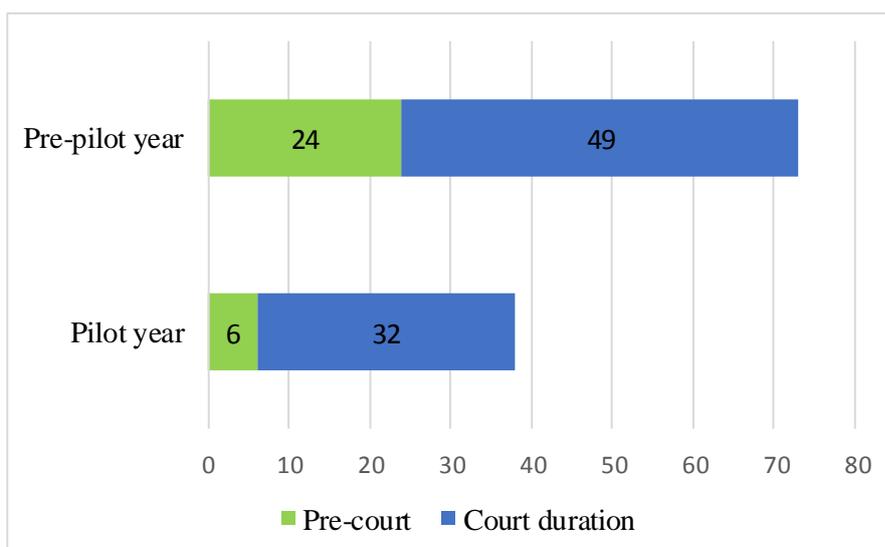
This same data from Table 4 is depicted in Figure 1, where the decrease in the number of weeks at each stage (pre-court, the court process itself, and post-court to placement) is clearly visible.

Figure 1: Average number of weeks' duration during the various phases of care proceedings (children not already in final placement by end of proceedings)



However it should be reiterated that the majority of the children (160 of the 256) did not need to move to a permanent placement at the end of proceedings, as they were already living where planned. For these children there is no post-court wait for placement. Thus in Figure 2, below, there are only two elements to the bar chart; the average pre-court period in weeks (from legal planning meeting to date of issue) and the average duration of court proceedings, again in weeks.

Figure 2: Average number of weeks' duration during the various phases of care proceedings (children who were already in final placement by end of proceedings)



The plan for the child at the end of the care proceedings

The previous section looked at the length of post-court delay between the two cohorts, but also noted that for most children, in both cohorts, there was no post-court delay, because they were already in their final placement by the end of proceedings (Figure 2 above). However, the proportion already in their final placement varied depending on the type of placement. This section explores where the child was living at the time of the final hearing, particularly in relation to the different categories of plans for permanent placement, and the length of time to a permanent move, where a move occurred. Any differences between the pre-pilot and pilot cohort are also examined.

With one or both parent: Most children for whom the plan was to live with one or both parents (55 children in the pre-pilot cohort, and 60 children in the pilot cohort) were already living with that parent at the end of the proceedings. The children who subsequently returned to live with their parent(s) generally made that move very promptly, taking no longer than might be thought necessary to make the appropriate arrangements. Details are given in Table 5 below.

Table 5: Children with a plan to live with one or both parents

Pre-pilot cohort (55 children)	Pilot cohort (60 children)
52 (95%) already living with their parent, 3 expected to subsequently move to parental home	52 (87%) already living with their parent, 8 expected to subsequently move to parental home
3 subsequently moved; taking 6 days, 13 days and 7 weeks respectively	8 subsequently moved; taking between one day and two and a half weeks. Average (mean) of one week

Connected Person: Similarly children for whom the plan was to live with a relative or other ‘connected person’ were already living there in approximately two-thirds of the cases, irrespective of whether their proceedings commenced in the pre-pilot or pilot year; see Table 6 below. When the child did need to move to their relative, that move was (on average) much quicker for the pilot cohort; four and a half weeks, compared with an average time to the move of twelve weeks for the pre-pilot cohort. Quicker decision-making in the care proceedings themselves were being matched by a quicker move to permanency in the connected person placement.

Table 6: Children with a plan to live with a connected person

Pre-pilot cohort (27 children)	Pilot cohort (33 children)
17 (63%) already with their relative/connected person, 10 expected to subsequently move	20 (61%) already with their relative/connected person, 13 expected to subsequently move
10 subsequently moved; taking between 5 days and 42 weeks. Average (mean) of twelve weeks, median of 13 weeks	13 subsequently moved; taking between 2 days and 12 weeks. Average (mean) of four and a half weeks, median of 3 weeks

Adoption: Four children for whom the plan was adoption were already in that placement at the end of proceedings, one in the pre-pilot cohort and three in the pilot cohort. In addition for two children the temporary foster placement became their permanent adoptive placement; the plan thus changed but the placement did not, providing stability for those children.

Most children, for whom the plan was adoption, moved to their permanent placement after the final hearing. For the ten children in the pilot cohort the mean time until their move to permanency was 22 weeks (median of 16 weeks). For the 17 children in the pre-pilot cohort the mean time until their move to permanency was 34 weeks (median of 34 weeks). There were two very long waits prior to the permanent move of 67 and 92 weeks respectively, which raise the average. In one of the cases the mother was initially granted an injunction to oppose the care order, although she later withdrew it, and the court endorsed the adoption. Thus for the pilot cohort the median length of time to the permanent placement was reduced to approximately half the length of time it had been for the pre-pilot cohort.

Table 7: Children with a plan for non-kin adoption

Pre-pilot cohort (18 children)	Pilot cohort (15 children)
1 already in that placement, 17 expected to subsequently move	3 already in that placement, 12 expected to subsequently move
	2 did not subsequently move, as their temporary foster placement became permanent adoptive placement
17 subsequently moved; taking between 4 and 92 weeks. Average (mean) of 34 weeks, median of 34 weeks	10 subsequently moved; taking between 6 and 45 weeks. Average (mean) of 22 weeks, median of 16 weeks

Long-term foster care: The pattern of moves to foster placement is more complex, as detailed in Table 8 below. Approximately one in five of the children were already in their long-term planned foster placement at the end of proceedings, and for these children there was no subsequent move. In addition four children, in each of the two cohorts, did not subsequently move as their temporary foster placement became a permanent one. For one young person in each of the two cohorts he or she reached their 18th birthday before the placement, as originally envisaged, could be achieved. After a number of moves between temporary carers and home/relatives, the two young people were placed in residential care / semi-independence unit respectively.

Table 8: Children with a plan for long-term non-kin foster care

Pre-pilot cohort (26 children)	Pilot cohort (15 children)
5 (19%) already in that placement, 21 expected to subsequently move	4 (27%) already in that placement, 11 expected to subsequently move
4 did not subsequently move, as their temporary placement became permanent	4 did not subsequently move, as their temporary placement became permanent
7 never achieved the permanent placement as envisaged	3 never achieved the permanent placement as envisaged
1 reached 18 years of age and became too old for the placement as envisaged originally	1 reached 18 years of age and became too old for the placement as envisaged originally
8 subsequently moved; taking between 17 weeks and 85 weeks. Average (mean) of 52 weeks, median of 34 weeks	3 subsequently moved; taking 24, 37 and 101 weeks (specific, extenuating circumstance in the latter case)
1 order was rescinded; child returned home	

For those eleven children who moved after care proceedings had finished, the eight in the pre-pilot cohort took on average 52 weeks to reach that placement, while the three in the pilot cohort took an average of 54 weeks. There were however very specific circumstances, connected with illness, in the case of the child in the pilot cohort whose move to long-term foster care was 101 weeks after the final hearing. The average time until the move for the other two children was 30 weeks.

There were ten children, three of whom were in the pilot cohort, who never achieved the long-term foster placement as envisaged. Broad details are given below:

Pre-pilot cohort (7 children)

Multiple placement breakdowns, leading to residential setting/ semi-independent unit – 3 children

Multiple placement breakdowns, currently in a temporary and/or specialist ‘high-support’ foster placement (possibility in some cases this might become permanent) – 4 children

Pilot cohort (3 children)

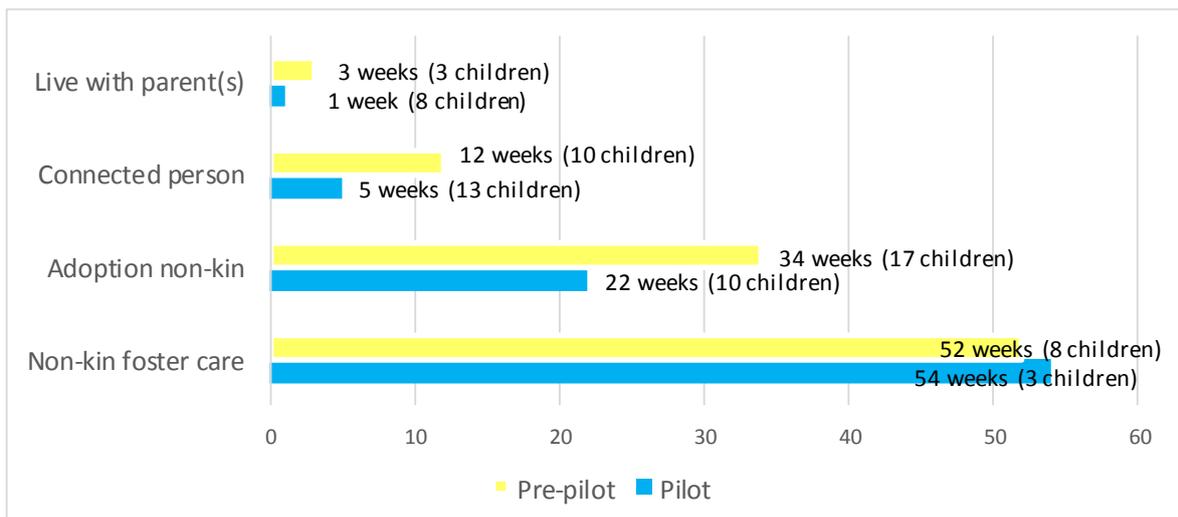
Following placement breakdowns young person is in a residential setting or semi-independent unit – 2 young people

Following placement breakdowns, young person is in a fourth foster placement, but this is not planned to be permanent.

Time taken until permanent placement by type of plan – a summary

The reduction in time to permanent placement after proceedings, with regard to the four main types of placement, is summarised below (Figure 3). Only those children who moved to their permanent placement after the final hearing are included, and again the pre-pilot and pilot cohorts are compared.

Figure 3: Average number of weeks to permanent placement from final hearing, by type of plan



It is important to note that although there is a consistent pattern of a substantially reduced post-court wait, the numbers are quite small; in the pre-pilot cohort only three children moved to live with their parent(s) *after* the conclusion of proceedings. As noted above, the higher average figure of 54 weeks for the three children who subsequently moved to long-term non-kin foster care in the pilot cohort reflects one particular case, where there were very specific circumstances which delayed the planned move.

While it is an encouraging finding that the reduction in court delay in the pilot has not been achieved by pushing delay forward into the placement finding process, care must be taken in interpreting this. A reduction in the post-court wait is, other things being equal, beneficial, since it reduces the period of uncertainty for a child by a further fourteen weeks on average, over and above the reduction already achieved in the court period. However, as with the court period itself, this reduction would not necessarily be beneficial, and could on balance be harmful, if it were achieved at the expense of thoroughness. If, for example, the shorter post-court period were achieved by an insufficiently careful matching process or an insufficiently comprehensive assessment of potential carers, then the gains made by reducing the wait could be more than cancelled out by problems later on.

In the same way, an overall reduction in the period between initial concerns about a child, and permanent placement, is beneficial for children, but only so long as it does not mean that other options were not too readily discarded. After all, delay could be reduced almost to zero if children were simply removed at the first sign of concerns and placed straight with substitute families.

That important caveat noted, however, the evidence does *not* suggest that children were more likely to be permanently removed from their parents in the pilot cohort than in the pre-pilot. As shown in Table 1, there was no reduction in the pilot cohort in the number of children who were living with parents at the end of proceedings, and there was a marked increase in the number who ended up living with relatives and friends.

Longer-term outcomes

We move now to the question of longer-term outcomes, and what the data can tell us about this, bearing in mind that a relatively short period has elapsed and placements of younger children sometimes do not come under strain until they reach their teens. All outcomes have been measured at the date two years after the final hearing, in order to make a meaningful comparison between the children in the two different cohorts. For a number of children, from both cohorts, updated information was not available when the child had moved out of the borough. We also know that 13 children went to live abroad with a parent, or other relative, and their subsequent wellbeing is not part of this study.

(a) Continuing Tri-borough children's social care involvement post court proceedings

Child protection plan status at the time of proceedings

At the time of the final hearing the majority of children were the subject of a child protection plan. This proportion was higher in the pre-pilot cohort (111 of the 131 children - 85%) than in the pilot cohort (81 of the 125 children - 65%). Children were most likely to be the subject of a CP plan if they

were living with a parent during the court proceedings; and least likely to have a plan if they were already in a foster placement.

The CP plan generally ceased once the care proceedings were completed, although in one of the boroughs (Hammersmith and Fulham) the plan on occasions continued for a number of months following the final hearing. New child protection plans, initiated at some point after the original care proceedings, are discussed below in the section on subsequent serious problems.

Subsequent Child in Need support

Where the court decision was for the child to remain with one or both parents, a usual pattern of post-proceedings children's social care involvement was for the child to become a 'child in need' and to receive support via that route.

Where known, child in need plans had been in effect, at some point between final hearing and the 2 year cut-off point of the study, for 67 children from the pilot cohort (60% of children where data were available). Fifty-one of these children were living with one or both parents, and 16 were with a connected person. Child in need plans were in effect, between final hearing and 2-year cut-off, for 48 children from the pre-pilot cohort (46% of children), and of these children 42 were living with one or both parents, and six were with a connected person.

Two distinct patterns were discernible; firstly the child could have been on a child protection plan before/during court proceedings, and would become a 'child in need' when the CP plan was no longer in effect, and when the child had moved from the household which had posed the potential of harm. This could be viewed as a 'step down' and a positive offer of help to the parent or relative the child was placed with. The child in need plan would generally come into effect from the date of the final hearing.

The second scenario was a child in need plan where there had been no previous child protection plan. For the children in the pilot cohort, there were 25 instances where this occurred. However, this did not occur with any frequency for the pre-pilot cohort (since most had been on a CP plan anyway).

For the pre-pilot cohort, the average length of time that children's cases were open as 'CIN' cases was approximately 16 months; although there were a further six which were still open as 'CIN' at the time of the data collection in 2015. For the pilot cohort, the average length of time that children's cases were open as 'CIN' cases was approximately 12 months; although there were a slightly larger number of cases (ten in total) which were still open as 'CIN' at the time of the data collection in the autumn of 2015. These open cases, both pilot and pre-pilot, would have been at least two years on from their final hearing but could, of course, be closed by the time of writing this report, autumn 2016.

A further group of cases, in both cohorts, were transferred out of the Tri-borough after the final hearing, at which point the cases were closed in the Tri-borough, and our data does not indicate whether the children became ‘children in need’ in another authority.

Cases still open in the Tri-borough after two years

To ensure like-for-like comparison between the pilot cohort and the pre-pilot cohort, the number of open cases at a point in time two years on from the final hearing was calculated.

Two years on 46 pilot cases (37%) were still open, while 79 had been closed. For the pre-pilot cohort, 65 cases (50%) were still open after two years, while 66 had been closed. The larger proportion of open pre-pilot cases is due to a greater number of looked after children in that cohort (Table 9). The number of children and families being worked with in the family support and child protection teams across the boroughs two years on was fairly similar as between the pilot and pre-pilot cohorts. A further two young people (not included in the table below) were known to be open after two years in an adult team within the Tri-boroughs.

Table 9: Open cases 2-years on from final hearing – Tri-borough team involved

Tri-borough team	Pre-pilot cohort (65 children)	Pilot cohort (46 children)
Child protection, family support, assessment	18	22
Looked after Children team	44	16
Disability team	1	4
Leaving Care team	2	4
Total number of open cases	65	46

(b) Incidence of placement problems

Clearly there is no simple numerical measure of the success or otherwise of placements, however we explored six ‘serious problem indicators’ as rough measures of wellbeing. These are:

- breakdowns in permanent placements,
- episodes of absconding,
- repeat care proceedings,

- renewed child protection concerns,
- edge of care panel proceedings,
- youth offending episodes.

All of these are indicators that all is not well in a placement. It can be objected that, for every placement that breaks down, or becomes the subject of child protection processes, there will be many where the child is unhappy or failing to thrive. This is true, and is a limitation to this approach; nevertheless, these measures are still useful as an indicator of the incidence of problems in placements.

Our analysis indicates that the most frequent ‘serious problem indicator’ was breakdown of permanent placement within the first two years, which occurred in the case of 15 children in the pre-pilot cohort (11%) (Table 10). The average age of these children at the commencement of care proceedings was 11 years, and 12 of the 15 were girls. For seven children one, or more, foster placements had broken down, and for a further seven children their placement with a parent(s) had broken down. For one girl, both her foster placement and a residential placement had broken down.

From the pilot cohort the placement had broken down for six children (5%); their average age at the commencement of care proceedings was 12 years, and there were three boys and three girls. For three children their initial foster placement had broken down, one child’s placement with a relative had broken down, one child’s parent was no longer able to manage her behaviour, and the sixth child had experienced breakdowns in placements with his parents and with a foster carer. It is possible that some parent or kinship placements made outside the three boroughs may have broken down without this being known to the Tri-borough authorities.

Table 10: Serious problems apparent by 2-years post final hearing

Identified problem (number of occurrences)	Pre-pilot cohort	Pilot cohort
Breakdown in permanent placement	15	6
Child protection concerns – new CP conference	6	7
Edge of care panel proceedings	2	2
Repeat care proceedings	4	3
Absconding episode	5	1
Youth offending episodes	3	0

A child protection conference was held, at some point in the two years after proceedings, in relation to six children from the pre-pilot cohort. Three children were made the subject of a child protection plan, and for three children the CP case conference did not result in a plan being made. Seven children from the pilot cohort were made the subject of a child protection plan at some stage within the two years after the care proceedings. In addition, for a number of other children from the pilot cohort, the CP plan was actually made before the final hearing but remained in place for some time afterwards; this was the case for a group of five siblings in the same family.

Within the 24 months post-proceedings, there were new care proceedings in relation to four children from the pre-pilot cohort, and for three children from the pilot cohort. There were a small number of ‘edge of care panel’ proceedings in each of the two cohorts. The data on youth offending are unlikely to be complete, and were only noted where the young person had appeared in court. Similarly absconding episodes may not always be reported or recorded.

Any one child or young person may have experienced more than one problem, or been subject to more than one process. Table 10 above, therefore, counts the frequency of the problem and not the number of unique children involved. Table 11, on the other hand, aggregates the problems, and reflects whether the child did or did not experience any further difficulty or intervention by children’s social care. Again the pilot and the pre-pilot cohorts are considered at a point in time two years on from the final hearing for each child.

Table 11: Presence of ‘serious problem indicators’ apparent by 2-years post final hearing

Number of children with:	Pre-pilot cohort (131 children)	Pilot cohort (125 children)
One or more ‘serious problem indicators’ present within 24 months	23 (18%) 11 living with parents(s) 10 in long-term foster care 1 with connected person 1 in residential care Mean age = 11.5 years 11 boys, 12 girls	18 (14%) 12 living with parent(s) 4 in long-term foster care 2 with connected person Mean age = 10 years 10 boys, 8 girls
No ‘serious problem indicator’ present within 24 months	108 (82%) Mean age = 6 years	107 (86%) Mean age = 5 years
Total	131 (100%)	125 (100%)

If the plans and placements made in the shorter timeframe had been flawed as a result of being made in haste, then one would expect a higher incidence of ‘serious problem indicators’ in the pilot cohort two years on from proceedings than in the pre-pilot cohort at the same point. In fact the percentage of ‘serious problem indicators’ (and, within that figure, placement breakdowns) is *slightly lower* in the pilot than in the pre-pilot cohort, although the difference is not statistically significant.

Problems arose for 12 children in the pilot cohort who were living with their parent(s), and for four who were in long-term foster care placements. The figures in the pre-pilot cohort were 11 and 10 respectively. On these, somewhat simplistic, indicators, children placed with a connected person experienced fewer ‘problematic episodes’ in both cohorts; however it should be borne in mind that special guardianship orders were often to relatives outside of the Tri-borough, and less information on these children’s progress was available. But the findings do echo other research, summarised in Chapter 2, about the ongoing challenges of placements with parents.

The children about whom there are concerns within the two years post proceedings are, on average, older (mean age 10 and three quarter years at the time of the final hearing) than the children where none of the ‘serious problem indicators’ became apparent. The mean age of the latter group was five and a half years at the time of the final hearing; a highly statistically significant difference. These ages are for the two cohorts combined, but a very similar picture emerges when the pre-pilot and the pilot cohorts are looked at separately (see Table 11 above); the children for whom problems arose were on average five years older than those where none of the potential problems arose. The age of the child is, perhaps not unsurprisingly, a key predictor of the likelihood of problems arising in the two years after the final hearing.

Of course problems can arise after this two-year comparison point. There were four children in the pilot cohort for whom the date of the subsequent ‘serious problem’ was after two years (foster placement breakdown, adoptive placement breakdown, new CP plan, and s 20 accommodation). Similarly four young people from three families from the pre-pilot cohort experienced problems after the two-year point (three with a subsequent CP plan, one subject to new care proceedings; one had experienced placement breakdown and one of the young people had offended). One should also note that these problems had occurred by the time of the data collection in autumn 2015; one can assume that there will be other children whose placement at the time of our analysis appeared to be working satisfactorily, but where placement breakdown or new care proceedings have occurred since that date.

5. Qualitative findings: carers' questionnaires

This chapter discusses the responses in the questionnaires sent to carers (parents, special guardians, adopters). We received replies relating to fourteen girls and 11 boys. Eleven of the 25 children were four years of age at the time the questionnaires were sent out at the end of May 2016 (having been babies at the time of court proceedings and their subsequent placement), and the average (mean) age of the 25 children was seven years. Only four were teenagers. Eleven had been adopted, seven were living with a special guardian, five with a parent, and two replies were received from a foster carer. The respondents commented about their children's wellbeing and about the support provided by the Tri-borough authorities.

Children's wellbeing

The first question we asked the parents or carers was how settled, or contented, their child currently was (May 2016, when the questionnaire was sent). Parents were asked to give a score of between 1 and 7, where 7 represented 'completely settled'. All twenty-five respondents gave a score of between 5 and 7, with the majority (seventeen of the twenty-five) giving the maximum score of 7. A further six parents/carers gave a score of 6. Parents were then invited to say why they had chosen that score, with a 'free-text' box for their answer. All chose to elaborate.

Words used to describe their child included: well-rounded, friendly, sociable, confident, thriving, and settled both at home and school. Six parents expressed some reservations; for example 'generally happy and loving – but sometimes still insecure, anxious and angry'. One adoptive parent thought that it had taken two years to 'reach a completely settled state' but considered that the child now 'fits so well to our family'.

The second question was a more general one, as to how well the parent or carer thought things were going for the child and their family. Again they were asked to give a score between 1 and 7 (with 7 the most positive assessment), and say why they had chosen that number. The majority, fifteen of the 25, gave a score of 7. A further five parents/carers gave a score of 6. The minimum score given was 3.5. Again most of the comments were positive, as in this assessment 'I think things are going very well with occasional hiccup', or very positive as in the following comments:

He feels part of the family and always excited to be part of family activities / days
(Foster carer)

He goes to an excellent school. Has many friends. Sees all his family (Parent)

We are all very happy together, we have lots of fun and we care for each other. Our daughter says “we love and look after each other and care for each other!” (Adoptive parent)

She is settled ... she has done well to catch up with her peers (Connected person)

However, seven respondents elaborated on some aspects which were, on occasions, a cause for concern or needed addressing. One adopter added ‘there is room for improvement’ while another commented ‘it still takes effort from all sides to feel like a happy, relaxed, secure family’.

There was no discernible difference in replies between the pilot cohort of parents/carers and those from the pre-pilot cohort. There was likely, however, to be some bias in the replies towards parents and carers who were coping well, since those who were known to be experiencing difficulties, or whose child was back in the child protection system, were excluded from the follow-up survey. Conversely, the parents for whom things had worked out well may have been happy to respond to us and to give that positive message, as for example in this parent’s comment:

He is my son, and I won my court case to keep him. He is loved, and a very happy boy.

The third question we asked the parents/carers was what they considered to be the two most important current issues for the wellbeing of their child, or the child placed with them. This was an open-ended question, and attracted a wide variety of comments; however certain themes were mentioned relatively frequently, and these have been grouped into broad headings in the table below:

Broad theme	Number of mentions
Providing security, patience, attention and encouragement; listening to and respecting the child; ensuring their health, happiness and wellbeing	11
Ensuring the child is loved - knows s/he is loved	7
Education concerns; to continue to progress well, to achieve at GCSE, to settle well into reception/primary school, obtain a place at the chosen secondary school, for school to be more supportive of an adopted child	8
Issues concerning assessment, therapeutic support, behaviour, continence	5
Maintaining contact with other family member(s)	4
Support with life story work	3
Practical issues of housing suitability and financial support for nursery fees (three different relatives with SGOs mentioned these aspects)	3
To foster the child’s friendships, and encourage social activities	3
To promote child’s understanding of his foster care placement (how long he will stay, what the plan for him is); to explain ‘adoption’ to the child	2

Again, responses were similar irrespective of whether the care proceedings had commenced in the pilot or pre-pilot year. In addition to the parent's or carer's assessment of their child's wellbeing, the 'strengths and difficulties questionnaire' (SDQ) form appropriate to the age of the child was sent. All 25 respondents completed this form. The questionnaire covers four main 'problem domains'; emotional problems, conduct problems, hyperactivity and problems with peers. A 'prosocial scale', on the other hand, contains questions which identify positive behaviour which demonstrates consideration, helpfulness, kindness and an ability to share.

The Tri-borough carers who completed the SDQ generally considered their children had few problems, within any of the four domains. In addition the children were, on average, scoring highly on the positive 'pro-social' attributes. Their scores reflected those obtained by children nationally (since the SDQ is standardised with relation to a national population of children). There were not enough replies to establish any relationship between the SDQ score and whether the child was adopted, living with their parent, with a special guardian or with a foster carer; nor whether their court case commenced in the pilot or pre-pilot year. Again care should be taken when interpreting these encouraging scores, given the likely bias in the responses discussed above.

Support

Carers' views about support varied considerably, from very positive to very negative. Positive comments included:

I was given loads of support and help. I was given everything I asked for, and today we couldn't be happier (Parent)

Every individual social worker was generally impressive (Adoptive parent)

We have been invited to a number of social events, various trainings and workshops. The transition has been rather smooth for us, therefore we haven't asked for much in terms of support. The social workers we have been working with have been very professional and helpful right from the start (Adoptive parent)

This idea of the Tri-borough being able to provide back-up support, or a safety net which one doesn't necessarily use but appreciates having there if the need arose, was mentioned by a further three respondents: 'if you ask the support is there', 'not needed, but know who to contact' and 'confident they will support us if we ever need any help'. One adoptive parent commented that 'we may have been offered but we did not want any support'.

Negative comments were, on occasions, strongly worded and highly critical. This is not unexpected, since the approach from the UEA team gave the parent or carer the opportunity to give vent to their

feelings, and all respondents were assured that what they said would not be traceable to them as individuals. The main criticisms alluded to a lack of information sharing from the Tri-borough; slow response by individuals/teams; failure to follow up on the family; difficulties caused by staff changes and restructuring; and problems with staff enabling the Letterbox contact facility. One adoptive parent commented:

At the start you are monitored but not supported. The start is so difficult, delicate, emotional and tiring. I look back and wonder why there was so little support... more help would have made for a smoother transition (Adoptive parent)

The two most critical comments were:

There's been no support from the professionals since placement – I've had to initiate any contact with them. There's no information or support groups for special guardians (Connected person)

The support during the delay of the adoption was appalling. We were asked too much (in terms of availability, patience, expertise) and given very little (information, professional advice, real sympathy) (Adoptive parent)

Overall there was some sense of support being there, but one had to ask for it. It was felt that children's services would not necessarily make the first move, and some respondents felt that children's services needed to be more proactive:

So far support has been forthcoming. But one needs to be 'on the ball' and actively aware of what is going on, any new changes in provision of services, the people involved. Have things in writing, and ensure that those involved in her care do what they say they will do (Connected person)

One special guardian commented that a family's need can change, and flexibility in reviewing these needs would be welcome. An adoptive parent thought 'one point of contact at Tri-borough, with whom a relationship can be built, would be luxurious'.

6. Qualitative findings: practitioner interviews

Practitioners were asked for their views about the reduction in post-court delay, and their reflections on the new court regime more generally, and its implications for social work practice.

Post-court period

Professional interviewees were asked about the reduction in delay after court (that is: delay between final hearing and permanent placement). No evidence was presented of any *specific* initiative aimed at reducing delay during this period, but the general view was that the emphasis on planning and collaboration during the court process resulted in plans being further advanced by the conclusion of proceedings, and thus in moves to placements being on average quicker, if they had not already been achieved by the conclusion of proceedings.

One social worker said that agency procedures were much tighter, there was a ‘massive push’ to get children and young people into placements, much closer working with adoption workers and a sense of being much more accountable for one’s practice. It was also suggested that the reduced delay after court could be attributed to a revised team structure that meant that cases were held by a single team throughout, and this, along with efforts to have a regular judge and dedicated group of guardians, contributed to greater ownership of the case, and a focus throughout on permanency planning at the earliest possible stage.

The new way of working

Levels of enthusiasm for the new way of working varied considerably. However there was no one among the nine who argued that the pre-pilot way of working was preferable. Some had significant concerns, but all were able to identify positives which they welcomed in the new way of doing things, and no one supported a return to the old way. Similar comments were made about the benefits of the new way of working to those in the original evaluation.

For instance, a principal social worker commented that the new system ‘has kind of... pressured you into being ready and being clear about what you want...’ ‘They are utilising those first few weeks of care proceedings,’ said the Case Manager, ‘whereas previously... I can remember it taking... three, four, five to eight weeks to establish when an expert was going’. A practice manager commented that ‘you have to work much more intensely... with the family [and] get into a more active rhythm so... it feels like from both ends it is going to mean a much more... active relationship that carries on after the proceedings.’

Concerns about excessive rigidity

However, with one exception, all of the participants expressed concern that in some respects the timeframes had become too rigid, and that there were unintended consequences of this that could be harmful to children. (Again, this was a concern of some in the original evaluation.) One social worker spoke of the intense focus on deadlines leading to ‘heightened tension... everyone anxious to meet deadlines whether the deadlines are beneficial or not’.

Another social worker had just been dealing with a case that *was* allowed to go over the 26 weeks and commented that ‘I am really glad that it did because at 26 weeks we would have made the wrong decision.’ She went on: ‘I am not against it as a target but it is too rigidly applied, and sometimes you feel that there is pressure to get it done just so that we meet the 26 week target and you think, hang on, is that really in the interests of the child?’

The present researchers have suggested elsewhere (Beckett & Dickens, 2014) that delay in the past was, at least in part, the result of a very human tendency to put off having to make a very difficult and life-changing decision, because of the anxiety involved. It is worth noting that, if this were indeed the case, then one would predict that many participants in care proceedings would feel uncomfortable about the process being cut short, even if in fact the decisions being made were no less appropriate or robust than previously. On the basis of the present data, it is impossible to say for certain whether anxieties are well-founded about possible harm being caused by overly rushed decisions, but the following points are worth making:

- There *is* still a degree of flexibility about the 26-week limit. In the year 2015/16, half of cases finished under the 26 weeks, but 15% took between 26 and 34 weeks, and 35% took over 34 weeks (TCPP, 2016).
- The pattern of orders in the pre-pilot and pilot cohorts did not show a statistically significant change, in spite of the much shorter timescale - so the reduction in time in itself did not lead to significantly different decisions.
- Data from the present follow-up showed no obvious increase in failed placements in the pilot cohort as compared to the pre-pilot. However it is relatively early days and it is also important to note that the breakdown data for both cohorts could be incomplete. A Connected Persons social worker pointed out, for instance, that breakdowns of placements with family members could occur without the placing authority ever getting to hear about it.

Care orders needing to be discharged

One social worker spoke of a case where (in her view) a care order was made to ‘tick the box’ of the 26-week limit, even though in fact a final decision had not been made as to the suitability of the current placement, meaning that (if all went well) it would be necessary to take the case back to court again in order to discharge the care order. The Case Manager also referred to cases where a care order was made, but with an expectation of a subsequent return to court to discharge it. One way it could happen, she said, was when a child remained with foster carers or connected persons on a care order at the end of care proceedings, on the basis that the local authority would continue to work on the possibility of rehabilitation with parents, and then come back to court again. Another way it could occur was when the local authority had recommended a special guardianship order in favour of a relative, but the court chose instead for the child to remain with the relative on a care order. If all went well, the local authority could come back later and seek a revocation of the order. Other research has suggested the use of care orders for children placed at home or with extended family may be on the increase nationally (Bowyer et al., 2016: 70-72), but the Case Manager did not think this had become a pattern in the Tri-borough.

There are likely to be situations where such an approach is justified, but it is worth noting that this could be a means whereby courts could stick to the ‘letter’ of the 26 week limit, although a later return to court beyond the 26 week limit is required to confirm the plan for the child. It is important for local authorities to monitor such cases carefully, to ensure that they do not ‘drift’ after the proceedings have ended.

Connected persons

A particular concern raised by most participants was that children were being placed too quickly with connected persons after insufficient time for assessment and preparation, partly as a result of the 26 week target, and partly as a result of other pressures (such as recent case law) to make more use of family placements.

When families came forward late in proceedings, a Connected Persons social worker observed, courts were reluctant to delay the final hearing, ‘so we are then expected to go and assess the applicant within a few weeks sometimes... I think we had one that was actually a fortnight.’

The worker’s concern was not just the short time allowed for assessors to gather the information they needed, but the very short time which connected persons often had to come to terms with the ‘life-changing decisions’ they were being asked to consider making. She pointed out that the reason that connected persons were not identified until very late was often the result of parents ‘withholding family names right to the last minute’ and that family members might not even know until that point

that the parents had serious problems. It was asking a great deal of connected persons to expect them to move in a few weeks from learning for the first time that a relative was not coping as a parent, to agreeing to become the long-term guardian of their children.

She also said that there was now 'huge pressure' to find family placements even if 'they are not that linked to the child,' a pressure not directly linked to the 26-week limit (such was the general view) but rather to case law (notably *Re B-S*) which emerged at about the same time, which led to more emphasis on within-family placements. The Case Manager suggested that this trend had now peaked, and that the trend was now towards less use of these more 'tenuous' connections.

The Connected Persons social worker also made the important distinction between using Special Guardianship to cement an *existing* relationship (her example: an aunt or grandparent who already had a relationship with the child) and using it to create an essentially *new* relationship (for instance: with a relation who has been living in another part of the country and has had little or no contact with the child up to now). In the latter case, in particular, she argued, sufficient time was needed to ensure that connected persons were suitable and adequately prepared.

A social worker in the Tri-borough Post-Order Team (which supports adopters and special guardians) made the point that the preparation time, both in terms of training and information-giving, and in terms of space to come to terms emotionally with the change, was currently much shorter for special guardians than it was for adopters. Adopters were much more exhaustively assessed than special guardians on their understanding of child development, experience with children, own relationships and support networks and so on, and adopters were on average better off in financial and housing terms. Yet in many ways special guardians were more vulnerable since, unlike adopters, they had not made a decision that they wanted another child in their families. Although no firm conclusions can be drawn with such small numbers, it is worth noting that three of the seven special guardians who replied to the questionnaire mentioned problems with money and accommodation, while none of the adopters or parents drew attention to these kinds of problems (see Chapter 5).

The Post Order Team social worker said there were real strains in special guardianship placements, sometimes with people who may be in their seventies by the time the child reaches adulthood. She spoke of the difficulty many special guardians experienced with managing contact with parents, and even a sense of shame not found among adopters, because the child living with them is evidence of failure in their own family, and suggested that cracks in placements might typically start to appear after eighteen months.

The Case Manager shared the concerns about assessments being cut back to fit in with court timescales. She said that connected persons needed 'a fair and appropriate amount of time to consider the impact on them and their family taking this child or children on board,' and said that cutting back

the time period too far reflected a ‘disconnect between the courts and the local authority around the understanding of social work assessments and what that entails.’ Similar concerns from other parts of the country about excessively rapid connected persons’ assessments can be found in Bowyer et al. (2015b, 2016).

Support to carers

Clearly the success or otherwise of connected persons placements, and indeed placements with parents, adopters and foster-carers, does not rest solely on the initial assessment, but also on the support given subsequently. Carers’ views about the support they received have been described in the previous chapter. There is a dedicated team in the Tri-borough that supports adopters and special guardians. As noted a member of the team was interviewed, who expressed some concerns about the ill-preparedness of connected persons, as compared to adopters, and spoke of strains and breakdowns occurring when the reality of the long-term commitment taken on began to sink in. She was also concerned that financial support to connected persons was usually cut off after a few years, even though connected persons were often relatively poor.

Workload

The new way of working undoubtedly presents considerable challenges in terms of pressure of work, but there are different perspectives on this. Whether or not the amount of work is more or less in terms of hours appears debatable – at least in some respects, it *saves* time: for instance, as one social worker noted, it means less time in court – but it certainly involves a much more compressed timeframe, and this compression itself can be very challenging. ‘The pace is quite relentless,’ one social worker said, while another pointed out that the tight timeframe made it very difficult to respond flexibly to unexpected demands.

Another social worker made the point that, even though statements are now much shorter than formally, they take more time to write: ‘To write more you can do it quicker, you don’t have to think about what you are saying. I think [the new way] does take longer, so in that sense it is harder work.’

A particular concern of the Case Manager was that social workers, not uncommonly, have very little time after receiving the final assessment to complete their final report. Apart from the pressure on staff, she had worries about whether this was enough time to analyse the evidence. On the other hand, she noted, fast turnover can also have a positive impact on workload. Several of the social workers interviewed also commented that they appreciated the better templates and greater clarity under the new way of working, and the fact that less time was wasted, for instance, in unproductive court hearings. The Case Manager thought the new way of working was particularly challenging for newly qualified workers, due to the very fast pace, but that more experienced social workers could see the

benefit of reduced timescales, and being more analytical. She also made the point that the work pressure was not simply experienced by social workers but also the Tri-borough legal team.

Sustainability

One social worker felt that the work pressure itself was a threat to the sustainability of the model, leading to stress and also to tensions between participants. A practice manager thought that the new approach was secure in the Tri-borough area, but might perhaps be more challenging in less well-resourced authorities. The Case Manager believed the changes were well embedded in practice, but noted that there were always new developments which might impact on, or threaten, this way of working. (She cited the example of the *Re B* and *Re B-S* judgments.)

As noted earlier, in spite of some reservations, the new system appears still to be widely accepted as an improvement on the previous one, and this in itself is a strength since the commitment of staff to this way of working is crucial to its sustainability. However there are some cracks. The Case Manager, as noted above, referred to a ‘disconnect’ between the local authorities and judges about the nature of assessments, not understanding the reasons why more time might be required. There would seem to be a need for work to address, as she put it, ‘the feedback loop with judges’, to ensure that there is not an increasing gap.

Concerns about the extremely short timeframe of connected persons’ assessment could be a threat to the sustainability of the new way of working, since such concerns have the potential to undermine its legitimacy in the eyes of those who have to implement it. More flexibility with timeframes in such cases might be less of a threat to the model as a whole than an excessive rigidity.

7. Conclusion

This study has built on the previous evaluation of the Tri-borough care proceedings pilot, which ran from April 2012 to March 2013, aiming to reduce the duration of care proceedings to 26 weeks, ahead of national moves in the same direction. The focus was on what impact the changes had on the outcomes for children, looking in particular at placement moves and stability. The study compared the outcomes up to 2 years after the proceedings for the 256 children involved, 125 from the pilot year and 131 from the pre-pilot year. The study comes from one area, known to be one of the better resourced and managed in the country, but the number of children involved is substantial, and includes all who were subject to care proceedings in that area over the two years, not just a subsample. It was a unique opportunity to track and compare the outcomes for children and assess the impact of such a major system change.

There are four especially encouraging findings. First, the focus on the timeliness of care proceedings did not mean that more children were left waiting for a permanent placement at the end of the proceedings. On the contrary, more children were already in their planned permanent placement at the end of the proceedings. Second, the focus on timeliness of care proceedings did not lead to extra delay after the proceedings, for those who did need to move to a permanent placement. In fact, the average duration fell here. Third, the incidence of ‘serious problem indicators’ declined for children from the pilot cohort compared to the pre-pilot cohort, suggesting that quicker decision-making processes do not necessarily lead to less stable placements for children. And fourth, interviews with practitioners showed widespread support for the new way of working, despite the challenges it brings.

It is also significant that the most frequent type of final placement for children in both cohorts was with their parent(s) (60 children in the pilot cohort, 55 children the pre-pilot cohort), followed by placements with connected persons (33 in the pilot cohort, 27 the pre-pilot cohort). So shorter care proceedings did not result in more children living away from their families. Indeed, many children were never separated from their families (over the two cohorts, there were 89 children who remained throughout with one or both parents, or a connected person). But problems did emerge for a minority of the children in the two cohorts post-proceedings, highlighting the importance of good assessments, planning and ongoing support.

Above all, the two studies (the original evaluation and this follow-up) show that it is possible to reconcile the demands of speeding up decision-making, maintaining thoroughness, and improving outcomes for children. They turn out not to be incompatible, but interwoven. The impetus on timely decision-making spread to either side of the court proceedings, before and after, and the outcomes for

children, two years on, appeared to be better. But such changes are not without costs, and they can bring heavy demands on family members and on social work and legal practitioners.

The study shows the importance of tracking what happens to children before, during and after care proceedings, not just focusing on the timescale of the proceedings. The findings about children's outcomes chime with other research studies (see chapter 2), about the value of support for carers and monitoring of children's progress. The study also shows the wider importance of monitoring the impact of system changes, such as the 26 week rule, on children, parents and carers, and professional practice (in social work and court decision-making), to ensure that any future changes are based on an informed picture of what actually happens.

8. Summary and recommendations

1. The reduction in the length of care proceedings achieved by the pilot as compared to the pre-pilot did not result in more children waiting for permanent placements at the end of proceedings, nor in delay being moved to the post-court period (just as it did not result in pre-court delay).
2. On the contrary there were fewer children not in their planned permanent placement at the end of proceedings, and for those who did have to move, there was a substantial reduction in time there also. For children not already in final placements, the length of time from final hearing to permanent placement had been reduced on average, between these two cohorts, by about 53%, and the overall length of time between concerns being discussed at a legal planning meeting and permanent placement has been reduced (as a result of reductions in time scales pre-court, in-court and post-court) from 96 to 52 weeks.
3. This does not mean that shorter care proceedings *necessarily* bring shorter processes before or afterwards. Much will depend on local policy and practice. But it does show that shorter care proceedings do not necessarily mean that delay is squeezed to either side of the proceedings, and that in fact a clear focus on timeliness can have a powerful effect throughout the system.
4. Speedier court processes did not mean that children were less likely to end up living with parents at the conclusion of care proceedings. In fact the percentage of children who ended up living with parents was unchanged (at about 42%). There was an increase in the use of connected persons' placements in the pilot cohort, as well as a smaller decrease in the use of adoption, although these changes do not achieve the threshold of statistical significance. There was a reduction in the use of non-kin long-term foster-placements.
5. Our findings based on the incidence of 'serious problem indicators' do not suggest that there is a higher incidence of placement problems in the pilot group two years after proceedings than in the pre-pilot. Indeed, the statistics suggest a trend in the opposite direction. This finding is encouraging, in that one would expect a higher incidence of problems in the pilot if the faster care proceedings had resulted in inferior decisions being made about plans and placements.
6. Interviews suggest that, even if they have reservations of various kinds, staff remain committed to the new way of working, and regard it as an improvement on the previous way of working. Suitable guidance and support for workers to cope with the demands is essential.

7. There are concerns about over-hasty assessment of connected persons in order to meet the timetable. Given the scale of what connected persons are being asked to take on, it is recommended that where necessary there should be some flexibility about timescales to allow for adequate assessment, and to give connected persons a period to think through the implications of what they are taking on.
8. High quality support to all carers is essential (parents, special guardians, adopters and foster carers). This should include social work support, specialist services and financial assistance for those who are eligible, as required. Social work support should be readily accessible and not withdrawn without a suitable assessment of how the family are faring.
9. There were views that care orders are sometimes being made in contexts which make it likely that the local authority will have to return to court for them to be discharged. This may be appropriate in some cases and preferable to extending the court proceedings, but it could be a means whereby lengthy decision-making processes begin to come back despite the 26-week limit, along with longer periods of uncertainty for children. This should be monitored, by recording instances of such orders and the outcomes, and carefully ensuring against any drift.
10. More generally, it is recommended that progress and outcomes for the children in each annual cohort should be routinely followed. This would be helpful for exercises such as the present study, which seek to explore the effects of changes of practice. But it would also be beneficial to those who carry out assessments and make recommendations and decisions in this difficult area, which have such far-reaching implications for children, parents and carers. Those who make decisions should be in possession of reliable information about outcomes.

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