Planning and supporting permanence in long-term foster care

An investigation of the implementation in England of the first regulations and guidance for long-term foster care as a permanence option (Department for Education 2015)

Final Report

Birgit Larsson, Gillian Schofield, Elsbeth Neil, Julie Young, Marcello Morciano and Yiu-Shing Lau

Contents

Acknowledgements

1

Introduction: background to the research

Long-term foster care has been a permanence option in the UK since the 1980s when the idea of permanence as a primary goal of child placement first emerged (Thoburn 1991). But it was not until 2015 that long-term foster care was legally defined and long-term foster care regulations and guidance were issued as part of updated care planning guidance (Department for Education 2015 a,b). This development was supported by a Department for Education expert working group, including Professor Gillian Schofield, co-author of this report, and a range of practice stakeholders. The aim of issuing specific regulations and guidance was to establish a framework for long-term foster care practice and to provide a set of expectations that would increase the likelihood of achieving successful permanent placements. The majority of children in long-term foster care have experienced abuse and neglect, and all have experienced separation and loss (Biehal et al 2010, Schofield et al 2011). So there is a significant challenge for local authorities and especially for foster carers in achieving permanent placements that can enable children to resolve past traumas, recover developmentally and make a successful transition to adulthood.

The goal of permanence is to offer children security, a loving family life and a sense of belonging, and it continues to be central to the family justice and care systems. All children in care must have a permanence care plan by the time of their second review (Adoption and Children Act 2002, Department for Education, 2015b) and all social work activities should be designed to achieve a successful permanent placement whether by return home, placement with family or friends, long-term foster care, special guardianship or adoption.

Research evidence suggests that long-term foster care can work well as a permanence option for children, but success relies on appropriate care planning, multi-agency support, high quality caregiving, achieving stability and enabling children to feel part of the family (Thoburn, 1991; Schofield et al, 2000, 2009, 2012; Biehal et al, 2010). This body of research on both the strengths and challenges of long-term foster care

provided an important context for the development of the regulations and guidance, alongside other evidence from research on the experiences of children in care (Boddy, 2013) and input from children in care organisations regarding what children valued and needed from their foster family life.

The definition of long-term foster care in the new regulations has to be understood within the overall definition of permanence and other care planning guidance, but there are a number of specific criteria (Department for Education, 2015a:1, s3; C being child, F being foster carer and P being parent).

> - "long term foster placement" means an arrangement made by the responsible authority for C to be placed with F where—
>   (a) C's plan for permanence is foster care,
>   (b) F has agreed to act as C's foster parent until C ceases to be looked after, and
>   (c) the responsible authority has confirmed the nature of the arrangement to F, P and C, and any reference to the responsible authority placing C in such a placement includes, where C is already placed with F, leaving C with F in a long-term foster placement.

Because foster care is the permanence plan, the commitment is to being a 'foster parent' and until the child 'ceases to be looked after' is expected to be to 18, with family support beyond 18 included in the definition of permanence. It is important also to bear in mind that although the legal requirement is to 'confirm the nature of the arrangement to the child, the foster carers and the parents', this is in the context of the wider principles and requirements of care planning consultation and participation (Department for Education 2015a, latest edition 2021), such as prioritising the welfare of the child through to adulthood, ascertaining the wishes and feelings of the child and working in partnership with parents.

The 2015 regulations and guidance for long-term foster care focus on two main areas. The first area is mandatory and was designed to establish a framework for good practice and to promote stable, successful placements for children. Since 2015, all local authorities must put in place procedures to assess and plan for children, match children with carers who can meet their needs through to adulthood and support children, long-term foster families and birth families. The local authority must also record these formally agreed placements using new long-term foster care codes, with family and friends and with 'other' carers. This data should then be reported to the Department for Education as part of the SSDA903 annual return on placements of looked after children in their care.

The second area of the regulations and guidance was permissive and was designed to enhance a child's experience of ordinary family life in the foster family and reduce the possible feelings of intrusion by the local authority by introducing some flexibility in the care arrangements. After a year in a placement which has been confirmed as long-term foster care, local authorities were permitted to reduce the frequency of social

work visits to a new statutory minimum of six monthly (with the agreement of a child, 'being of sufficient age and understanding') and the frequency of looked after children review meetings to a new statutory minimum of 12 monthly, with the other review at a six-monthly interval conducted without a formal meeting.

These changes were recognised as presenting opportunities to improve practice, but also some presenting significant challenges for implementation and ensuring consistent standards. For instance, the requirements for formal care planning for long-term foster care did not specify a particular system or procedure and allowed for flexibility at local authority level in the processes involved; for example, whether certain panels or levels of manager might be involved in care planning and making or confirming the matching decision. The need for some flexibility in terms of procedures and the detail of long-term foster care practice arose in part because of the wide range of age and circumstances of children with a long-term foster care plan and the fact that some children would be matched with their existing carers, while others would be matched with and move to new carers. The difference from the more standardised procedural route to the legal order of adoption was accepted, but the core principles of assessment and matching that underpin a successful permanent family placement were to be the same.

In relation to decisions to reduce the frequency of social work visits and review meetings in long-term foster care, it was recognised that a high level of professional judgement and use of an agreed, appropriate procedure would be needed to manage this decision in each case. This would include, for example, how children or placements would be assessed as appropriate to consider a reduced frequency of social work visits, how children would be consulted and what other support and safeguards may need to be put in place.

In addition, although asking local authorities to report to the Department for Education for the first time on which children were in long-term foster care placements was expected to provide useful information about this particular group of foster children, it was also acknowledged that there would be challenges in how local authorities recorded these cases and how data managers identified them for the annual return. It was accepted that initially there would be formal confirmation of both new placements made under the new regulations and guidance and inevitably a larger number of pre-existing long-term foster care placements. During this implementation phase there were also likely to be implications of the very different attitudes and approaches to long-term foster care that exist in local authorities (Schofield et al, 2008, 2011).

It is important to note that although this research report will refer to 'the regulations and guidance for long-term foster-care', there is no single or dedicated document – they appear threaded through separate regulations and guidance documents that cover a range of other practice issues in relation to care planning for children in care. This means that a local authority setting about implementing the new long-term foster care requirements needed to extract the relevant elements from these documents.

The first regulations for long-term foster care were introduced under *The Care Planning and Fostering (Miscellaneous Amendments 495)* (Department for Education 2015a). This statutory instrument covered long-term foster care, but also arrangements to be made when an authority 'is considering ceasing to look after a child' – reunification being another area of practice that was thought to need a clearer framework for practice.

The guidance for long-term foster care was included in a revised volume *The Children Act 1989 guidance and regulations, Volume 2: care planning, placement and case review* (Department for Education, 2015b), dated June 2015. There was a specific section (pp.72-3) that explained the requirements for a long-term foster care placement. The guidance on other aspects of long-term foster care appeared in a number of general sections e.g. the list of permanence options (p.23), discussion of delegated authority (p.92), social work visits (p.100) and reviews (p 116/p.121). (There has since been a further edition of this guidance published in July 2021, which has not changed the sections relevant to long-term foster care.)

The regulations and guidance were introduced in April 2015, just before the General Election, but there was no mechanism for monitoring their implementation. There has also been such a wide range in the recorded long-term foster care figures/rates reported by local authorities, that the Department for Education felt unable to publish them by local authority in the statistical releases since 2016, although national figures were published in 2020.

The Department for Education (2018) recognised this uncertainty about the impact of the regulations and guidance in *Fostering Better Outcomes*, their response to two reviews of foster care, one by the Education Sub-Committee (2017) and the other chaired by Sir Martin Narey and Mark Owers (Narey and Owers, 2018).

> In 2015, we introduced a legal definition of long-term foster care to ensure greater stability of placements and more certainty for children and foster families in that placement... We do not yet fully understand the impact of the introduction of long-term foster care as a legal definition and national data is patchy, due in part to the nature of the way that LAs record long-term planning decisions. (Department for Education, 2018:19)

The need to learn from research on implementation was also recognised.

> We will monitor research to understand how the new legal definition of long-term foster care is working in practice and how to improve national data on this. (Department for Education, 2018:22)

This research study

The Centre for Research on Children and Families (CRCF) at the University of East Anglia (UEA) has been undertaking research on long-term foster care in projects led by Schofield since 1997, building on the previous work by Thoburn (1991) and Rowe (1984). For children from troubled backgrounds growing up in long-term foster care, care plans need to successfully promote their well-being through to adulthood. While the introduction of the 2015 regulations and guidance was welcome it was felt to be essential to investigate their implementation, as they were intended to improve care plans and outcomes for children in long-term foster care and ensure local authorities and courts could have confidence in this care plan. The UEA CRCF was fortunate to receive funding for the project from the Nuffield Foundation, who have supported a series of UEA projects on long-term foster care since 1997.

The project was conducted by a research team in the Centre for Research on Children and Families (CRCF). The project was led by Professor Gillian Schofield from 2018-20 and by Dr Birgit Larsson from 2020-21. Professor Beth Neil was primarily involved as a consultant for the quantitative analysis of the Department for Education data. Julie Young led on the data collection and analysis of the local authority survey and interviews. Joanne Robinson, an intern, undertook some early analysis of the survey data. In 2019 Dr Marcello Morciano and Dr Yiu-Shing Lau, from the University of Manchester, joined the project to work on the analysis of the SSDA903 administrative data on looked after children.

The research study started with three research questions:

- What are the profiles and pathways of children in long-term foster care placements?
    - How many children were in coded long term foster care placements in the study years, 2014/15- 2017/18?
    - What were the numbers and characteristics of children in long-term foster care in the year ending March 2018?
    - How does the use of the long-term foster care codes vary across local authorities by numbers, rates and child characteristics?
    - How does the use of permanency in long-term foster care compare to the use of other types of permanency?
    - What factors predict a child in care becoming a long-term fostered child?
- Have local authorities introduced procedures and practices that conform with the definitions, principles and requirements of the 2015 regulations and guidance for long-term foster care?
- Which aspects of the 2015 Regulations and Guidance appear to be working well and which may be causing concern and need to be reviewed?

The research design for this study combined quantitative and qualitative methods to answer these research questions.

- An analysis of the Department for Education SSDA903 data on looked after children in England.
- A national survey of local authorities and independent fostering providers in England to gather data on care planning systems, procedures and practice for long-term foster care.
- Interviews with service managers for fostering, looked after children, IROs and data management from a sample of 30 local authorities identified from the survey and SSDA903 data who represented different profiles and procedural systems for managing long-term foster care.

In addition, the research team held a consultation with the Cafcass (Children and Family Court Advisory and Support Service) Family Justice Young People's Board, at which key issues emerging from the study were discussed with a group of young people who were in or had experience of care/long-term foster care. This consultation demonstrated a wide range of experiences and informed the analysis and recommendations.

A research project advisory group including representatives from a range of key stakeholder organisations was chaired by Dr John Simmonds, the Director of Policy, Research and Development at CoramBAAF, and met at key intervals during the project.

The project was due to run from the November 2018 – May 2020, reporting in August 2020. There were some initial delays in accessing the Department for Education data and further delays linked to the pandemic, resulting in a final reporting date of November 2021.

Report content and structure

An exploration of which children are in recorded long-term foster care placements across England and how local authorities care plan for long-term foster care underlies the analysis of the implementation of the regulations and guidance in this report. But the study has also looked in depth at how practice has developed around that care planning in terms of, for example, the choice of permanence option, sibling assessments, involvement of children in planning processes. This follows up elements of previous research on long-term foster care going back more than 20 years in order to understand the range of current practice and identify the principles of a model of good practice in long-term foster care which would also be compliant with the aims and requirements of the regulations and guidance.

The report begins with a chapter on the policy and research on long-term foster care as a permanence option as a context to the study. This is followed by a chapter setting out the methods and findings from the analysis of the Department for Education data. There is then a chapter on the methods used to gather and analyse the quantitative and qualitative data from the survey and interviews, followed by five findings chapters, which also link to our analysis of the Department for Education data. A final chapter concludes with discussion and recommendations.

2

Policy and research context

There is a long history of long-term foster care as part of the overall fostering provision in the UK, and since the 1980s it has been associated with the goal of permanence. Research on long-term foster care (e.g. Rowe, 1984 and Thoburn, 1991) tracked its role as permanence was being developed as a concept and policy goal. Policy and practice in long-term foster care needed to integrate a range of principles associated with permanence, such as creating a nurturing and secure family membership in the foster family, with key principles from the Children Act 1989, such as the importance of listening to children, the role of sibling relationships and the need to work in partnership with the birth family. The development of long-term foster care as a permanence option has also been in the context of an ongoing policy drive to support the development of adoption as a legal route to permanence outside of the care system.

These issues and dilemmas in permanence policy and practice have continued since the implementation of the Children Act 1989 and formed an important context to the 2015 long-term foster care regulations and guidance. The introduction of special guardianship in the Adoption and Children Act 2002 added a further legal option, which has primarily been taken up by relatives but has become an additional and significant factor in the choice of permanence option for a child or sibling group.

This chapter provides some insights into these debates on permanence as reflected in policy, research and government reviews, to provide context for this study of how the 2015 regulations and guidance on long-term foster care are viewed and have been implemented.

International context

It is helpful to begin by exploring the way in which the UK's established recognition of both long-term foster care and adoption as legitimate permanence options sets our policy and practice apart from much of the rest of the world.

There have been a range of different approaches internationally to caring for children outside of the birth family. First there are countries which share our policy on the legal option of adoption from care, such as the USA and Canada, but where adoption is the only accepted permanence option outside of the birth family. For example, Berrick (2021:72) has recently commented on the continuing preference in the USA for adoption over long-term foster care.

> Adoption is considered an essential permanency option for children who cannot return home, in part because the alternative of long-term foster care with non-relatives is generally considered detrimental to children's well-being.

Kemp and Bodonyi (2000:104), however, in their study in the USA found that 'even for young children, adoption is not a uniformly or equitably available resource' and argued for a more flexible approach to permanence, 'away from definitions of permanency narrowly defined by the child's legal status'. There have also been significant developments in the USA in valuing a longer-term role for foster care to aged 21, arising from the introduction in 2008 of Extended Foster Care (Child Welfare Information Gateway, 2017), which is similar in principle to Staying Put arrangements, also to 21, in England (Children and Families Act 2014).

In most other countries, adoption from care without the parents' consent is not an available placement option or is infrequently used, as is the case in most of Europe (Skivenes et al 2021). In Norway, for example, adoption from care without the consent of parents is allowed, but only for existing foster parents. There is a general acceptance in these jurisdictions and across very different cultural and practice contexts that where children do grow up in a foster family, they cannot be led to expect that this is a long-term arrangement, as the concept of permanence would suggest. Wissö et al (2019:209) describe policy in Sweden as being that 'placements in out-of-home care should be regarded as a temporary solution with the aim of reuniting children with their birth parents'. There is some provision in Sweden for foster carers to be considered a permanent family for a child, but only by a legal order for custody (Wissö et al, 2019:209), similar to a special guardianship order (SGO) in England (Adoption and Children Act 2002).

Policy in other parts of Europe is also often driven by the expectation that return to the birth family is a priority and that foster carers are only temporary figures in a child's life. In Italy, for example, the legislative system defines foster care as a temporary intervention, with an expected maximum of 2 years which can be extended. However, as Chistolini and Salvadori (2017) have pointed out, in practice 60% of

foster care placements in Italy last more than 2 years and some children will stay in their foster families until 18. According to these authors, such placements, which are referred to as 'sine die' (indefinite), are a form of drift and can leave children with a sense of ambiguous loss in the absence of a sense of belonging in the foster family.

In other countries, cultural history has had an ongoing impact on attitudes to permanence. In Australia the colonial history of the 'stolen generations' of children of Aboriginal and Torres Strait Islander descent, placed for adoption with white families, led to resistance to the practice of adoption and a focus on foster care. However, the idea of permanence as promoted in other anglophone countries has still had an influence on practice with, for example, the state of Victoria having the option of permanent care orders and New South Wales having developed open adoption with ongoing birth family contact (Ward et al, 2021) – although this provision does not include children of Aboriginal and Torres Strait Islander descent.

There is no doubt that across very different cultures and contexts, including the UK, there are challenges and tensions, including legal, psychological, sociological and ethical issues, regarding care planning for children who cannot live with their birth families, but need secure families to grow up in. These dilemmas are inevitable but evolving in this critical and sensitive area of policy and practice, so each generation of policy makers and practitioners needs to acknowledge and address them.

The development of long-term foster care as a permanence option in the UK

When permanence planning as a concept emerged in the USA in the 1980s (Maluccio et al, 1986), the preference for the legal option of adoption for children in care who could not safely return to live with their birth family was explicit, with a focus on exclusive legal parental responsibility in the new family, accompanied by an exclusive parenting role. It was argued that the child's opportunity to form a secure attachment in a permanent family relied on a clean break from the birth family (Goldstein et al, 1973). More recent research in psychology and in child placement suggests that attachment concepts and relationships in different family structures and cross-culturally are more flexible than previously represented (van Ijzendoorn, M. H. & Sagi-Schwartz, A., 2008; Howe, 2011; Golombok et al, 2014; Schofield and Beek, 2018).

Adoption from care linked to permanence was also seen in the UK from the 1980s as an important option for children in care to find new families. At that point there was a drive in the UK to widen the range of children for whom adoption would be an option, with the message from US research that 'no child is unadoptable' (Churchill, 1979) picked up by UK researchers, policy makers and practitioners (Rowe and Lambert, 1973; Fratter et al, 1991), focussing in particular on finding adoptive families for children with special needs.

Although adoption was seen as offering an important route to permanence for children in care, in a review of childcare services by a committee of MPs in the earliest days of permanence in the UK, it was made clear that adoption was not to be seen as the only permanence route for children (Department of Health and Social Security 1984:75-8 cited in Thoburn et al 1986:1).

> There is at the moment considerable confusion over the significance of the search for permanence in a placement. It should not have become a synonym for adoption. The search for permanence in our view could be accomplished in many ways. Adoption is only one eventual outcome among many.

This position (i.e. without an apparent hierarchy of permanence options outside of the birth family) seems to have been hard to sustain and ambiguities in attitudes to adoption as the preferred form of permanence emerged even within this review. Following the assertion that adoption was not the only route to permanence, the Department of Health and Social Security report went on to refer to adoption as 'the most permanent possible outcome among many' before going back to raising concerns about the dominance of adoption as permanence, commenting 'There is some danger that a new bandwagon is rolling connecting adoption with the idea of permanence'(p.78). These early signs of ambivalence around whether adoption should be the dominant option and whether long-term foster care should be considered an equally valued or lesser option has persisted to more recent times.

The research evidence informing this early debate around permanence featured some key issues and influential texts. Concerns about children in foster care with uncertain plans were powerfully presented in *Children who wait* (Rowe and Lambert,1973). These were combined with concerns about the outcomes for children when they left care, powerfully described by Stein and Carey (1986). The question 'Can the corporate state parent?' (Bullock et al, 2006) therefore has been asked in different forms since debates began about the role of permanence for children in care.

However, permanence practice in the decade prior to the 1989 Children Act still included long-term foster care alongside adoption, with voluntary agencies being commissioned to make permanent placements in either adoption and foster care. When Thoburn et al (1986) reported on a small study of such an agency, the focus was on what these placements had in common to be successful, in particular the child's sense of permanence. Thoburn (1988:32) went on to present a model of permanence that was not specific to adoption and included links between permanence, identity and self-esteem, involved knowledge of and links to the birth family, and was associated with the 'capacity to grow and make new and satisfying relationships as an adult'.

With the backing of a pioneering voluntary sector and local authority 'permanence' teams, Rowe and Thoburn conducted the largest study in the UK (N=1100) of adoption and long-term foster care placements planned for permanence. This study found that when controlled for age, adoption and long-term foster care were similar

in terms of stability and outcomes (Fratter et al, 1991; Thoburn et al, 1991; Moffatt and Thoburn, 2001). It is important to note that this sample of long-term foster care placements were planned and supported by voluntary organisations dedicated to achieving permanence. These findings were important for the subsequent development of long-term foster care and the principles of care planning that lay behind the 2015 regulations and guidance.

Alongside the development of the concept of permanence, therefore, care planning became an important focus of policy and practice. The Children Act 1989 Guidance and Regulation Volume 2 set out the framework for 'Care planning, placement and case review' and it is this volume which has been updated since, including the addition in 2015 of long-term foster care regulations and guidance, the focus of this study. (There has since been a 2021 edition of this volume that has retained the same guidance for long-term foster care).

In the Children Act 1989 guidance, planning and practice reflected the core principles of the Act, including a focus on family support, partnership with parents, alongside the significance of the welfare and wishes of the child. Although there was less emphasis on permanence than has appeared in more recent policy, the accompanying *Principles and Practice in Regulations and Guidance* (Department of Health, 1989:13) did include reference to the importance of positive management of long-term placements and 'the need to provide a sense of permanence and security; experience of normal family life'.

Policy initiatives and research on permanence following the Children Act 1989

The decision had been made to develop separate legislation in relation to adoption in the Adoption and Children Act 2002 (implemented in 2005). This legislation followed a strong political drive to increase numbers of children adopted from care by Prime Minister Tony Blair: 'It is hard to overstate the importance of a stable and loving family life for children. That is why I want more children to benefit from adoption' (Performance and Innovation Unit 2000). It was important to achieve good practice in adoption, so this intervention was welcome in promising resources. But in arguing for the merits of adoption, as has often been the case, the report suggested that children growing up within foster families could not be seen as receiving an equivalent quality of family life.

With the Adoption and Children Act came an important new development, the introduction of special guardianship, to increase the legal options for children to leave care for new families (Ball, 2005).

Although there appeared to be a clear political and policy focus on adoption as the favoured route to permanence, the place of long-term foster care as a permanence option was nevertheless reinforced in subsequent policy documents e.g. *Every Child Matters* (Department for Education and Science, 2003:45) stated that 'there was a

need to ensure that different permanence options are equally credible, including long-term foster care'. *Care Matters: Time for Change* (Department for Education and Science, 2007: 54) led to increased funding for local authority children in care teams and listed long-term foster care as a permanence option, stating 'There should be no disincentives attached to any one option or another.'

The comparison between different routes to permanence was examined in Sinclair et al's study *The Pursuit of Permanence* (2007). This research was able to highlight the different ways of thinking about permanence that go beyond legal definitions. For example, it distinguished between 'objective permanence', which was defined as children having a placement which would last for their childhood and provide support, if needed, after the age of 18; 'subjective permanence' which was defined as a child feeling they belonged in the family; 'enacted permanence', defined as the child being treated as a family member by people inside and outside of the family; and 'uncontested permanence', where the child felt no split loyalty between foster and birth families (p32).These are all elements that need to be promoted in particular ways in a long-term foster care placement and are discussed by participants in our current study.

In the years following the Adoption and Children Act (2002) there was major Government funding for research on adoption and permanence through the Adoption Research Initiative, which provided an evaluation of aspects of the Act's implementation (Thomas 2013). But there were also a number of research studies on long-term foster care and permanence in the period up to the regulations and guidance in 2015. Schofield et al (2000, 2009) completed a prospective longitudinal study of a cohort of 52 children in planned long-term foster care (funded by the Nuffield Foundation), a retrospective study of 40 adults 18-30 who had grown up in foster care (Schofield, 2002, 2003) and a cross sectional study of care planning for 230 children in long-term foster care in six local authorities (Schofield et al, 2011), also funded by the Nuffield Foundation. These studies used a range of quantitative and qualitative methods to identify a number of key elements in successful placements and relationships between foster children and long-term foster families that were therapeutic in providing a secure base in childhood (Beek and Schofield, 2004; Schofield et al, 2009), with foster families often continuing to be supportive into adult life. This research on long-term foster care included in particular an emphasis on the dual role of carers as both skilled professionals and committed parents (Schofield et al, 2013) and the importance of a sense of belonging as part of the foster family into adulthood (Schofield et al, 2012).

This focus on the value of a sense of belonging as part of the foster family was also a key element in placement success emerging from a study led by Nina Biehal (Biehal et al, 2010; Biehal, 2014), funded as part of the Adoption Research Initiative. This study compared adoption, adoption by foster carers and long-term foster care. It was able to demonstrate that where long-term foster care placements were stable, emotional and behavioural development and education outcomes were similar to adoption However, in terms of stability this study found 28 per cent of foster children leaving

their index foster placements after three years, compared with 13 per cent of those adopted. The researchers noted that reliable comparisons between placement stability for the adopted and fostered children were difficult because those adopted were younger when joining their new families than the fostered children, and most studies report that younger age at placement is associated with higher rates of stability. A more encouraging study in relation to stability was a longitudinal study conducted in Northern Ireland in which 374 children were tracked over a seven-year period (McSherry et al, 2016) where long-term foster care placements were very stable (87%), as were adoptions (99%). Other studies internationally have reflected Biehal's positive findings on outcomes: for example, Barber and Delfabbro (2004:200) concluded from their study in Australia that 'The results of our psychological assessments combined with the children's feedback on placement suggest that children can both develop in a positive direction and feel at home in long-term foster care without necessarily terminating rights through adoption'.

An under-researched area of practice has been the necessary work with parents of children in long-term foster care, to support them and to help them support the child and the placement. Schofield led a study of practice in England, including interviews with 30 birth parents, linked to parallel studies in Sweden and Norway (Schofield et al, 2010, Schofield and Ward, 2011). Social workers in all three countries reported feeling that they needed more time to work with birth parents, and it was clear from the parents interviewed that help from social workers to cope with their sense of loss and to maintain the role of a parent in the longer term was much valued. Developing good practice with birth parents and other family members in the course of care planning and a long-term foster care placement is an important aspect of implementing the new regulations and guidance and is also consistent with the Children Act 1989 principles.

Research on planning for long-term foster care

Planning for permanence had become an essential part of childcare practice since the Children Act 1989, but it became clear from the Schofield et al (2000) longitudinal study that care planning processes associated with long-term foster care were being developed very differently in different local authorities. This was in contrast to care planning for adoption, which was very specifically regulated and reported on to the government.

This finding led to a specific study of care planning for permanence in long-term foster care in England and Wales (Schofield et al, 2008). This study was an important context for the current study as it focussed on some key areas of planning practice, in particular raising concerns about local authorities that had both long-term foster care and permanent foster care placements, where it was unclear whether both were considered permanence care plans or whether long-term foster care placements were seen as a lesser commitment. The study also raised questions that linked to other studies of long-term foster care (e.g. Schofield et al, 2011) and are relevant for this current study. This included, for example, whether procedures in long-term foster

care that are introduced to be rigorous (e.g. using a fostering panel to agree a match) are also able to be flexible and child centred (e.g. some older children with close birth family ties may wish to remain in the foster family, but prefer not to attend a panel).

The Care Inquiry

The nature and goal of permanence was a key focus of the Care Inquiry (2013). This was funded by the Nuffield Foundation and led by eight voluntary organisations, representing adoption, foster care and residential care, as well as children's and family rights, who addressed ways in which the care system needed to be and could be improved. Care experienced young people were also active participants in the project.

In the Care Inquiry report *Making not breaking: building relationships for our most vulnerable children*' (2013:2), there was a clear endorsement of flexibility to value a range of permanence options.

> Our main conclusion – from all that we heard and learnt – is that 'permanence' for children means 'security, stability, love and a strong sense of identity and belonging'. This is not connected to legal status, and one route to permanence is not necessarily better than any other: each option is the right one for some children and young people. Adoption, although right for some children, will only ever provide permanence for a small number of children in care.

The report concluded that a core principle for the care system should be that relationships are 'a golden thread running through a child's life' (p. 9). The Inquiry highlighted the risk that children in care too often lost relationships with important people whether through moves between placements, which meant a loss of foster family and friendship ties, or through losing contact with key people in their birth families, especially siblings. In contrast, children with continuous, loving and supportive relationships and networks could thrive. These conclusions had particular implications in the context of long-term foster care as a permanence option, which research had clearly shown requires support both to ensure the quality of foster family relationships and placement stability and promote the continuation of positive birth family relationships (Schofield et al, 2009, 2012; Biehal, 2014)

The Care Inquiry report was supported by a review of research evidence, *Understanding permanence for looked after children* (Boddy, 2013), which emphasised alongside the value of relationships the importance of the formal recognition of placements and care planning.

> Studies of both unrelated foster care and family and friends care show that permanence can be undermined – or inadequately supported – when it is not formally recognised. There is a need for clear permanence planning within both unrelated and family and friends foster care, with associated packages of support. (Boddy, 2013:4)

The review referenced Schofield's conclusions regarding the historical absence of guidance on long-term foster care.

> In spite of the inclusion in policy of long-term foster care as a permanence option, there has been no government guidance, unlike for adoption, on how this pathway can be achieved procedurally or whether a long-term foster care placement with a plan for permanence is to be treated any differently in practice from a short-term foster placement. (Schofield et al, 2012:245, cited in Boddy, 2013:16)

Boddy went on to comment on the impact on research and policy of an absence of statistics on long-term foster care placements compared to other permanent placements.

> The elusiveness of permanence as an explicit concept within government guidance on foster care is also reflected in the lack of government statistics on permanent foster care... Routine data collection on permanent/long-term foster placements could help to address an important gap in our knowledge (Boddy, 2013: 12)

These issues were among those taken up by the Department for Education expert working group on long term foster care and from 2015 new codes for long-term foster care were introduced in the SSDA903 statistical return alongside the new regulations and guidance. The potential benefit of having this new data and the challenges for local authorities in generating it have been explored as a key element of this current study.

Other factors in relation to permanence options emerged in the period immediately before the introduction of the long-term foster care regulations. Influential judgements in adoption cases, in particular Re B-S (2013), raised questions not only about the criteria used to support a recommendation for adoption, but about how the case for any permanence option should be put to the court.

Thus in 2015 when the long-term foster care regulations and guidance were introduced, there was already an important debate going on in relation to permanence. Their publication was a significant endorsement for long-term foster care at a time when it seemed that so much focus of policy and resource was on legal permanence orders - adoption and increasingly special guardianship. It demonstrated a welcome acceptance by the Department for Education that these legal orders would not be possible or appropriate for many children in care in need of permanence and those children would need to find stability and security through long-term foster care, with foster carers who do not have legal parental responsibility for the child.

Reviews of foster care since the long-term foster care regulations and guidance (2015)

There have been two inquiries into foster care since the introduction of the long-term foster care regulations and guidance. The report from the inquiry by the Parliamentary Education Select Committee (2017), focussed on the need to value and resource foster care more appropriately, but also commented on evidence they received that adoption was still seen as the 'gold standard' and there was a risk foster care may come to be seen as of 'lesser status' than other placement options (Education Select Committee, 2017, (4) 89).

The second review of foster care was commissioned by the Department for Education and conducted by Sir Martin Narey and Mark Owers. Their independent report acknowledged that fostering that lasts can offer children outcomes similar to adoption (Narey and Owers, 2018:15), but their conclusions on permanence were strongly in favour of legal options, such as adoption or special guardianship, referred to as 'genuine permanence'.

> But we need to see permanence in the same way that most of us, as parents, view permanence. Our ambition must be for many more fostering arrangements to last beyond the 18th or the 21st birthday. We believe there is scope for a substantial proportion of children in fostering placements to leave the care system but continue to live with their carers either under Special Guardianship Arrangements or through being adopted. That would be to achieve genuine permanence, which should be the overwhelming priority of the care system and a priority for the Department for Education. (Narey and Owers, 2018:16)

There is little evidence for the belief that there is a 'substantial proportion of children in fostering placements' who could stay with their carers but leave the care system through a special guardianship or adoption order. The potential impact of such a statement was to undermine confidence in long-term foster care as a permanence option just at a time when the new regulations and guidance were expected to be implemented. However, the Department for Education's response to these two inquiry reports, *Fostering Better Outcomes* (2018:19), was very specific about their commitment to making long-term foster care a success.

> In 2015, we introduced a legal definition of long-term foster care to ensure greater stability of placements and more certainty for children and foster families in that placement.

They went on to acknowledge (as discussed in the introduction) that there were, nevertheless, uncertainties about how the regulations and guidance were being implemented and placements being recorded, which led to their commitment to learning from research – and to their support for this project.

Conclusion

The core issues in achieving successful permanence placements have not changed since the 1980s, in terms of the legal, psychological, ethical and resource issues, although research has been able to provide important evidence to support policymakers and practitioners. As stressed at the beginning of this chapter, we are fortunate in the UK in having a wide range of permanence options. But making the appropriate choice for a particular child or sibling group and then providing the necessary support through to adulthood to make that placement a success and enable each child to fulfil their potential will continue to be a challenge for local authority systems and for individual practitioners, as described in subsequent chapters.

3

Profiles and pathways of children in long-term foster care: quantitative analysis

Introduction

Overview of children in long-term foster care in England April 2015-March 2018

This chapter uses information collected by local authorities for the Department for Education to explore the characteristics of children in long-term foster care in England. The analysis focuses on children in care in the financial years ending on 31 March 2015 to 31 March 2018, with data back to 2009/10 used to understand children's pathways prior to the study years. Over these four years the total numbers of children looked after on 31 March rose from 69,540 in 2015 to 75,420 in 2018; similarly, numbers of children in foster care also rose from 52,050 in 2015 to 55,200 in 2018 (Department for Education, 2015, 2018).

As part of the regulations and guidance on long-term foster care, from the 2015-2016 return onwards, local authorities have been required to record in their statistics on looked after children, which children were in long-term foster care placements. Separate codes were used for children with 'relative and friends' and 'other' foster carers. All children in a long-term foster placement since 1 April 2015 were included, and those long term foster care placements already ongoing prior to this date should also have been retrospectively recorded as such in the statistics (hence making long-term foster care figures available for the year 2014-15). However, the Department for Education did not publish figures on children in long-term foster care in the main data release tables (these children were included with all the other children in foster care under the two categories "with other foster carer, not FFA or concurrent planning" or "with friend or relative, not FFA or current concurrent planning").

In their statistics guide version 1.5, published in May 2020, the Department for Education present a snapshot of children in long-term foster care in England on 31

March in 2016-2019 and also report the numbers of children 'starting to be looked after in long-term fostering placements' during each year and the numbers of children 'ceasing to be looked after in long-term fostering placements' (pg. 26). Their table is replicated here.

Table 1: Department for Education table on Numbers of children looked after in a long-term fostering placement © Crown copyright 2020

Numbers of children looked after in a long term fostering placement
Years ending 31 March 2016 to 2019

Placement	2016	2017	2018	2019
Children looked after at 31 March in long term fostering placements	**24,010**	**23,380**	**22,770**	**22,010**
Inside council boundary	*14,690*	*14,360*	*13,900*	*13,260*
With relative or friend	3,150	3,160	3,160	3,180
With other foster carer	11,540	11,200	10,740	10,070
Outside council boundary	*9,320*	*9,020*	*8,870*	*8,760*
With relative or friend	1,400	1,390	1,500	1,570
With other foster carer	7,910	7,630	7,370	7,190
Children starting to be looked after in long term fostering placements	**3,950**	**3,450**	**2,560**	**2,330**
Inside council boundary	*2,720*	*2,270*	*1,660*	*1,510*
With relative or friend	930	800	590	580
With other foster carer	1,790	1,470	1,070	930
Outside council boundary	*1,240*	*1,170*	*910*	*820*
With relative or friend	250	270	200	230
With other foster carer	980	910	700	590
Children ceasing to be looked after in long term fostering placements	**4,600**	**4,070**	**3,450**	**3,580**
Inside council boundary	*3,140*	*2,620*	*2,190*	*2,300*
With relative or friend	1,250	1,090	890	930
With other foster carer	1,890	1,530	1,300	1,380
Outside council boundary	*1,460*	*1,450*	*1,260*	*1,280*
With relative or friend	420	430	370	370
With other foster carer	1,040	1,020	890	910

The table shows that the numbers of children in long-term foster care declined each year from 24,010 in year ending 2016 to 22,010 in 2019. Given that the total numbers of children in foster care rose across the four years, this represents a disproportionate decline in the proportion of fostered children who were in long-term care.

The majority of children in long-term foster care were placed within the local authority boundary, but between 39-40% were in foster homes outside of the local authority boundary.

About one in five children in long-term foster care were with friends or relatives. The proportion of children in coded long-term foster care who were placed with friends or relatives was 19% in the first two years rising to 20% and then 22% in the next two years. As can be seen above, there is no further detail about the characteristics of the children who are long-term fostered, why they are in care, any differences between subgroups of children, or how the use of long-term foster care varied by local authority.

Research questions

The research questions for the analysis of the CLA (children looked after) data were derived from the original research questions on profiles and pathways of children and young people in long-term foster care. They included:
1. How many children were in coded long-term foster care placements in the four study years, 2014/15- 2017/18?
2. What are the numbers and characteristics of children in long-term foster care in the year ending 31 March 2018?
3. How does the use of the long-term foster care codes vary across local authorities by numbers, rates and child characteristics?
4. How does the use of permanency in long-term foster care compare to the use of other types of permanency?
5. What factors predict a child in care becoming coded as a long-term fostered child?

The dataset

The data used came from the SSDA 903 Children Looked After (CLA) dataset from the Department for Education, accessed through the Office of National Statistics (ONS). The data set captures personal and administrative information on children in care, and the analysis made use of nine years of child level data dating back to 2009/10 for all children who were looked after in the four years from 2014/15 until 2017/18 in England.

The analysis focuses on *children in foster care*. All children on one of four main foster placement codes in the CLA data were therefore identified:

- U1, long-term foster placement with relative or friend;
- U4, long-term foster placement with 'other' foster carer;
- U3, short-term foster placement with relative or friend;
- U6, short-term foster placement with 'other' foster carer.

Appendix A contains more details of how the data were coded and analysed. The key points are summarised in the sections below.

Child level variables used in the analysis

The CLA data set contains a wide range of child level information used for the descriptive and regression analyses. The data set includes administrative information (e.g. about placements or legal status) used to derive a series of variables used for the analysis. The child characteristics used are listed below:
- Gender
- Age: age at 31st March 2018; age at start of episode; age at start of period of care; age at start of the year
- Ethnicity
- Legal status
- Reason in care (From the 8 Department for Education category of need codes)
- Placement provider: local authority, private or voluntary
- Placement Stability:
    - *'total placement changes in care'* – the total number of different placements the child had been in during their entire period/s of care back to 2009/10 (coded as 0,1,2,3+). This variable gives a broad indication of how stable the child's care has been across their entire time in care – higher numbers indicate more placement moves i.e. a more unstable care history.
    - *'mean number of placement changes (per year in care)'* –average number of placement changes per year across the child's period in care. This variable is also a measure of the child's history of stability in care, but here moves are averaged over the number of years in care.
    - *'total placement changes within year'* - (in year 2017-18, coded as 0,1,2,3+). This variable is used when we have focused on one year of children in care (2017-18, the last year in our dataset) to capture moves in that year. This variable therefore reflects recent stability/instability. This is important as some children may experience stability after moving around in care, and others may have had a stable period followed by moves in the system.
- Completed SDQ (Strengths and Difficulties) score (coded as yes/no)
- SDQ score ≥14 (coded as yes/no – a score of 14 or higher indicates the child may have emotional or behavioural difficulties at a raised level i.e. borderline/clinical).
- Convictions within year (coded as yes/no –a child has been convicted or subject to youth caution including conditional youth cautions within the year)

Censoring of the data

- To avoid the possibility of identifying any cases in categories with small numbers, and following guidance from the ONS, data had to be censored. The numbers in the descriptive statistics tables that contain child characteristics or stratified by local authority have been rounded to the nearest 5, and all values 10 and under have been suppressed (including the percentages). The decision to round numbers to the nearest 5 meant that fewer numbers would need to be suppressed, and ultimately this would have little impact on the accuracy of the results. Censoring and rounding was conducted after descriptive statistics were created, this means that censoring and rounding did not affect the regression analysis. Data values that needed to be suppressed for any reason are indicated in tables as '<10' (see also Appendix A).

Examining local authority variations

Variations in use of long-term foster care
The variations in the use of the long-term foster care codes across the 147 local authorities included in 2017/2018 (five local authorities had to be censored due to low numbers) were explored. All local authorities were ranked in terms of their shares of foster children in long-term foster care and tertiles were generated (*low*, *medium* and *high* users of long-term foster care). These tertiles were used in the regression analysis (Table 7) and were also used to identify a spread of local authorities for the qualitative study.

Variations by deprivation of local authority
Income deprivation in each local authority was captured by the average local authority level deprivation as collected in the "income domain" of the ONS 2019 Index of Multiple Deprivation (IMD). Quintiles of income deprivation were generated where there were around 30 Local Authority within each quintile; these were used in the regression analysis (see below).

Use of alternative permanency pathways
The use of permanency in long-term foster care was inspected nationally over time, across the four study years. The trend in the use of long-term foster care across time was contrasted with two routes out of care for children: (1) adoption or Special Guardianship Order (2) returning home. Adoption and special guardianship were merged together here as both are legal orders whereby the child leaves care. Furthermore, if reported separately small numbers in some categories would have meant data being censored in Table 5. The results are plotted in Figure 2.

The characteristics of children who left care (through adoption/Special Guardianship Order or returning home) were assessed and compared with children in long term foster care. These descriptive statistics are displayed in Table 5.

Local authority variations in rates of children exiting to other forms of permanency (tertiles)

Local authorities were compared in terms of the percentage of children in foster care who exited the care system between 1st March 2017 until 31st March 2018 for any of the following reasons: adoption; Special Guardianship Order; reunification. This percentage gives an approximate indication of the extent to which local authorities use permanence options *other* than long-term foster care. All local authorities were ranked by the proportion of children leaving care for these other permanence options. Tertiles of low, medium and high use of other forms of permanency were used in the regression analysis.

Understanding which children were coded as being in long term foster care – the regression analysis

Finally, logistic regressions were used to assess which factors predicted a child becoming a long-term fostered child. Two sets of regressors were included: (1) individual child characteristics such as gender, age at the start of the year, ethnicity, and child SDQ score as well as characteristics of the child's placement such as legal status, reason in care, placement agency, and placement stability (2) local authority variations: use of long-term foster care tertiles; income deprivation quintiles; use of other routes of permanency tertiles. We included the local authority variables to control for ecological biases (factors common to all children in one local authority which may affect the outcome of interest – the child being coded as being in long-term foster care) which could lead to spurious effects. The use of the logistic regression model over an alternative multi-level modeling technique was chosen as this was the most parsimonious approach. We carried out a series of checks to ensure that our approach had not produced results that were substantially different from those obtained by a multilevel modeling method (see appendix A).

Univariable and multivariable regression analyses were carried out. Univariable analyses allowed us to quantify the relationship between the dependant variable (whether a child becomes a long-term fostered child) and a single risk factor. The multivariable analysis enabled an understanding of the independent effect of confounding variables, by allowing confounding risk factors to be taken into account jointly. Results from logistic regressions (multivariable analysis) are presented as percentage point differences (marginal effects) in Table 7. Univariable analysis results are presented in appendix A.

Results

How many children were in the two types of coded long-term foster care placements in the study years?

At the time of this research, the Department for Education had only published limited data on long-term foster care since the creation of the new long-term foster care codes in 2015/2016. As seen in Table 1, the published figures included the numbers of

children who became long-term fostered by friends and relatives (U1) and by 'others,' non-friends and relatives (U4) since 2016.

The first research question aimed to replicate to some degree the Department for Education analysis on the number of children coded as being in long-term foster care placements (as reported in table 1). However, exact details of how the Department had analysed their snapshot were not available. Minor methodological differences may explain why, although very similar, the results presented in Table 2 are not identical for the 3 years ending in March 2016-2018 (we have also included data from year ending March 2015, and the DfE for year ending 2019). Table 2 also includes figures on children in short term foster care with friends and relatives (U3) and with non-friends and relatives (U6). As in the Department for Education analysis, the two long-term foster care codes (U1 and U4) are separated in order to note any key differences between the two types and to more clearly identity the role of kinship foster care. In Table 2, the percentages in the blue rows are based on the total number of children in foster care. The percentages in the other rows are based on the two subgroups: long-term foster care, non long-term foster care.

Table 2: Numbers and percentages of children in the four foster care types in years ending March 2015-March 2018

All local authorities in England

	2015		2016		2017		2018	
	Number	%	Number	%	Number	%	Number	%
U1 (long-term foster care with friends/relatives)	4,616	18.6	4,499	19.1	4,444	19.6	4,429	20.3
U4 (long-term foster care not with friends/relatives)	20,239	81.4	19,024	80.9	18,266	80.4	17,342	79.7
LTFC totals	**24,855**	**48.5**	**23,523**	**46.0**	**22,710**	**43.1**	**21,771**	**39.7**
U3 (short-term foster care with friends/relatives)	3,248	12.3	3,553	12.9	4,321	14.4	5,219	15.8
U6 (short-term foster care with friends/relatives)	23,179	87.7	24,063	87.1	25,643	85.6	27,795	84.2
Non-LTFC totals	**26,427**	**51.5**	**27,616**	**54.0**	**29,964**	**56.9**	**33,014**	**60.3**
U1, U3 **Relatives/ Friends FC totals**	7,864	15.3	8,052	15.7	8,765	16.6	9,648	17.6
U4, U6 **Other FC totals**	43,418	84.7	43,087	84.3	43,909	83.4	45,137	82.4
FC Totals	**51,282**		**51,139**		**52,674**		**54,785**	

Nationally, the average use of long-term foster care (U1 and U4) in the last study year, 2017/18, was 39.7% of fostered children (N=21,771). This represents a decrease in the numbers and percentage of long-term foster care each year, from 48.5% (N=24,855) in 2015. Although the new codes were introduced in 2015, it is likely that local authorities needed to confirm or record the existing long-term foster care placements in the early years, making these numbers higher. However, as the Department for Education data in Table 1 suggests, the numbers of children starting to be in long-term foster care have been declining and numbers leaving long-term foster care have also in the main declined. Thus, the drop in long-term foster care figures seems to be more about declining use of long-term foster care in new placements over time rather than the stock going down as children age out.

Key differences between long-term foster care with friends and relatives and with non-friends and relatives are summarised below.

Children in long-term foster care placements with friends and relatives
While the overall long-term foster care figures decreased since 2015, numbers of children in long-term foster care with friends and relatives stayed fairly steady, resulting in a slight rise in the proportion of friends and relatives foster care relative to 'other' foster care (from 18.6% in 2015 to 20.3% in 2018).

This growth in the proportion of friends/relatives foster care compared to non-friends and relatives is also mirrored in the short-term foster care groups (a rise from 15.3% (N=7,864) in 2015 to 17.6% in 2018 (N=9,648). Together with the rise in children leaving care under special guardianship orders over the same time period, most of whom will be living with relatives, this demonstrates the growing importance of kinship care for vulnerable children.

Children in long-term foster care placements with non-friends and relatives
The number and percentage (relative to friends and relatives long term foster care) of children in long-term foster care with non-relatives decreased over the study years, every year, from 81.4% in 2015 (N=20,239) to 79.7% (N=17,342) in 2018.

What are the numbers and characteristics of children in long-term foster care placements in most recent year, ending March 2018?

The next research question examined the characteristics of children placed in long-term foster care in 2017/18, as prior to this analysis these data had not been published. As in the first research question, key differences between long-term foster care with friends and relatives (U1) and long-term foster care with non-friends and relatives (U4) continued to be tracked, and these placement types were compared to the characteristics of children placed in short-term foster care placements with friends and relatives (U3) and with non-friends and relatives (U6). The results are documented in Table 3.

Table 3: Characteristics of children in 4 types of foster care (Data from CLA for financial year 2017/2018)

All local authorities in England

	U1 (Long-term foster care, friends/relatives)		U4 (Long-term foster care, not friends/relatives)		U3 (Short-term foster care, friends/relatives)		U6 (Short-term foster care, not friends/relatives)	
	Number	%	Number	%	Number	%	Number	%
Number of children	4,430		17,340		5,220		27,795	
Male gender	2,250	50.8	9,605	55.4	2,660	51.0	15,115	54.4
Age at 31st March 2018 (mean years)	9.3		12.0		7.7		9.3	
Age at Start of episode (mean years)	6.5		9.2		6.7		8.2	
Age at Start of POC (mean years)	5.1		6.7		6.0		6.9	
Age at the start of the year								
Ages 0-2 years	710	16.0	655	3.8	1,465	28.1	5,750	20.7
Ages 3-5 years	735	16.6	795	4.6	935	17.9	3,140	11.3
Ages 6-10 years	1,325	29.9	5,495	31.7	1,350	25.9	7,355	26.5
Ages 11-15 years	1,400	31.6	8,680	50.1	1,270	24.3	9,580	34.5
Ages 16-17 years	260	5.9	1,715	9.9	200	3.8	1,970	7.1
Ethnicity								
White British	3,530	79.7	13,145	75.8	4,020	77.0	18,220	65.6
White other	100	2.3	820	4.7	150	2.9	1,535	5.5
Mixed ethnicity	510	11.5	1,370	7.9	565	10.8	2,835	10.2
Asian	95	2.1	625	3.6	130	2.5	1,525	5.5
Black	140	3.2	995	5.7	240	4.6	2,260	8.1
Other	35	0.8	330	1.9	50	1.0	1,075	3.9
Refused/no data	<10	<10	<10	<10	55	1.1	345	1.2
Legal Status								
Care order	4,015	90.6	15,355	88.6	4,035	77.3	20,185	72.6
Voluntary (Section 20)	400	9.0	1,545	8.9	1,145	21.9	5,045	18.2
Placement order	<10	<10	435	2.5	40	0.8	2,535	9.1
Other	<10	<10	<10	<10	<10	<10	<10	<10
Reason in care (CIN)								
Abuse or neglect	3,125	70.5	11,565	66.7	3,595	68.9	18,275	65.7
Family Dysfunction	640	14.4	2,505	14.4	850	16.3	3,985	14.3
Family Acute Stress	355	8.0	1,355	7.8	345	6.6	2,025	7.3
Absent Parents	70	1.6	810	4.7	90	1.7	1,990	7.2
Parental disability	155	3.5	590	3.4	225	4.3	910	3.3
Disabled Child	40	0.9	360	2.1	55	1.1	325	1.2
Child Behaviour	45	1.0	130	0.7	55	1.1	250	0.9
Low Income Family	<10	<10	<10	<10	<10	<10	<10	<10

Placement provider								
Local Authority	4,390	99.1	9,990	57.6	5,115	98.0	16,920	60.9
Private	<10	<10	6,405	36.9	40	0.8	9,690	34.9
Voluntary	25	0.6	945	5.4	65	1.2	1,185	4.3
Other	<10	<10	<10	<10	<10	<10	<10	<10
Placement Stability								
Total placement changes in care								
0	2,890	65.2	11,465	66.1	3,550	68.0	14,260	51.3
1	960	21.7	3,495	20.2	1,000	19.2	7,835	28.2
2	380	8.6	1,435	8.3	375	7.2	3,250	11.7
3+	200	4.5	945	5.4	290	5.6	2,450	8.8
Placement changes within the current year								
0	3,690	83.3	14,760	85.1	4,070	78.0	19,315	69.5
1	555	12.5	1,950	11.2	815	15.6	6,015	21.6
2	140	3.2	465	2.7	220	4.2	1,700	6.1
3+	45	1.0	165	1.0	110	2.1	770	2.8
Mean number of placement changes in care	0.34		0.26		0.38		0.52	
SDQ scores								
Completed SDQ score	2,810	63.4	14,520	83.7	1,585	30.4	13,350	48.0
SDQ score ≥14	1,065	37.9	6,970	48.0	610	38.5	6,620	49.6
No SDQ score	1,620	36.6	2,820	16.3	3,635	69.6	14,445	52.0
Convictions	25	0.6	<10	<10	40	0.8	<10	<10
Convictions within year	25	0.6	<10	<10	40	0.8	<10	<10

Key differences between the two types of long-term foster care are summarised below.

Children in long-term foster care placements with friends and relatives
Compared to the other foster care placement types (U4, U3, and U6), long-term placements with friends and relatives (U1) had the highest proportion of girls and White British children. Children in these placements were slightly more likely than all other groups to be in care due to abuse and neglect. The children were most likely of all groups to be on a care order (90.6%) and most likely to have the local authority as their placement provider (99.1%).

Children placed in long-term foster care with friends and relatives had the lowest mean age of all groups at the start of their period of care (5.1 years), and their current episode (6.5 years). About one third (32.6%) were aged 0 to 5 at the start of the study year. It is not possible to tell from the data why friends and relatives carers may have chosen long-term foster care over a special guardianship order, but one possible reason is that either carers or the local authority felt that the child remaining in care

would enable more support to be provided over the years. Long-term foster care placement with friends and relatives had the lowest percentage (5.6%, N=260) of children in the oldest age group (16-17).

Children in long-term foster care placements with friends and relatives had the lowest proportion of children with elevated SDQ scores. SDQ scores over 14 were elevated in all types of foster care compared to the general population, with percentages across the groups varying from over a third (37.9%) for those in long term care with relatives/ friends to 49.6% for those in short-term care with non-relatives. In both long-term and short-term placements, children fostered by friends or relatives had fewer difficulties (as indicated by scores over 14 on the SDQ). The difference between long-term and short-term non friends/relatives groups was small (U4=48%, U6=49.6%). Possible reasons for the lower rates of recorded difficulties in friends and relatives placements may reflect the younger age of these children, the possible advantages of in family placements on children's development, and/or a preference for relatives to foster children with fewer difficulties.

Children in long-term foster care placements with non-friends and relatives
Compared to other foster care placement types (U1, U3, and U6), children in long-term foster care placements not with friends and relatives (U4) were older, with the highest mean age on the 31 March 2018 (12) and at the start of the current episode (9.2). This was the placement type with the lowest proportion of children aged 0-5 years at the start of the study year (only 8.4% - compared to at least a third of all other groups). Children in this group also had the largest gap between mean age at the start of the period of care (mean = 6.7 years) and start of the current episode (mean = 9.2 years) suggesting these children tended to be in care longer before moving to their current home (or having their foster placement coded as long term) compared to children in the other types of foster care placements. This group also had by far the highest proportion of children who were secondary school age (11-17 years). 60% were in this age group compared to 37.5% in U1, 28.1% in U3 and 41.6% in U4.

Children in long-term foster care with non-friends and relatives were more likely to be White British than the children in short-term foster care (U3 and U6), in particular the U6 group which had the highest proportion of children from minority ethnic backgrounds (34.4%). They were the children most likely to have a completed SDQ score (83.7%), although nearly half the children (49.6%) had an SDQ score over 14, suggesting potential challenges for their foster families to meet their emotional and behavioral needs.

Children in long-term foster care with non-friends and relatives were the group who had the highest proportion of children (85.1%) who had experienced no placement changes in the current year, and they also had the lowest mean number of placements (0.26) across their period in care. However as can be seen in table 3, on all three measures of stability the differences between those in long-term foster care with relatives and friends, those in long-term foster care with non-relatives and friends, and children in short-term foster care with friends/relatives, were modest. The group

that stands out as having experienced more placement moves are the children in short-term foster care with non-friends and relatives, almost half (48.7%) of whom had experienced at least one placement change during their period in care.
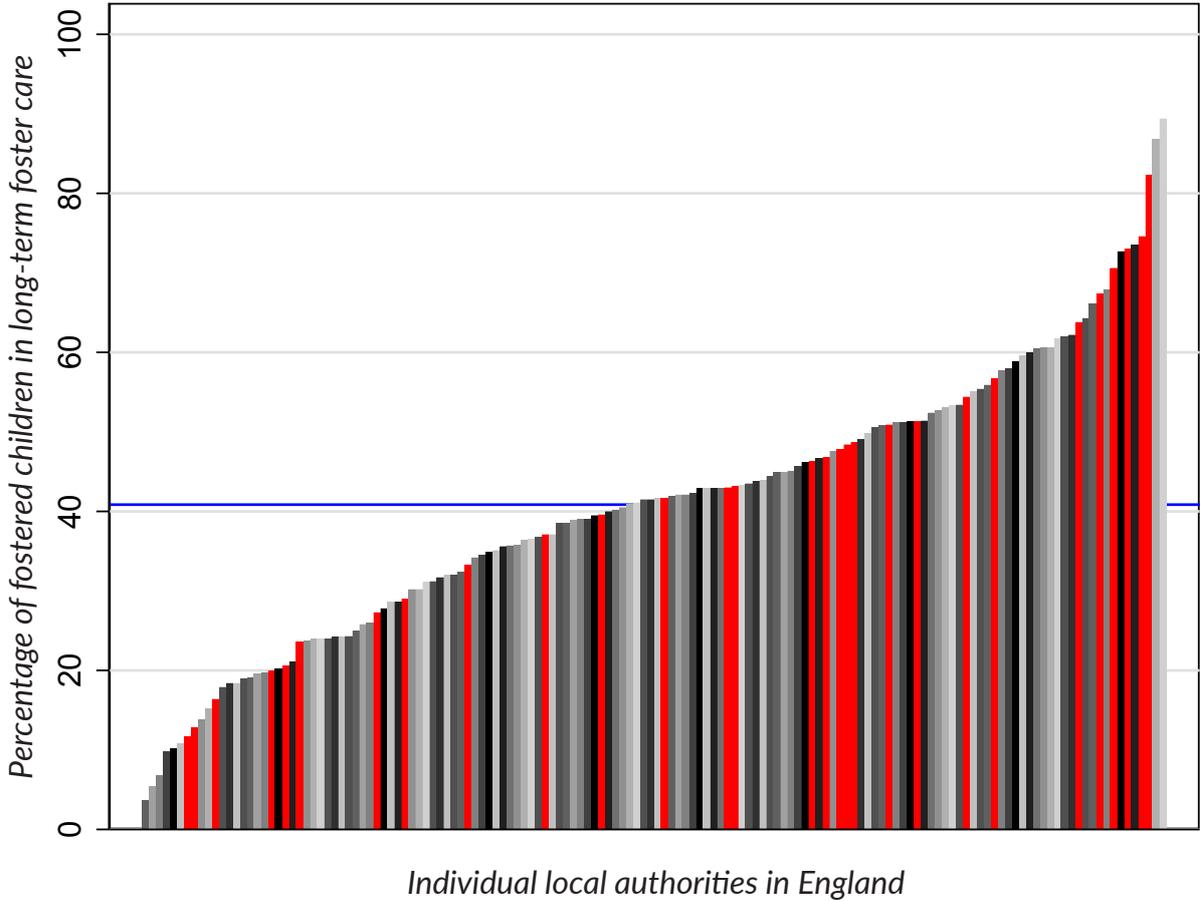
Placement changes within the year do not necessarily indicate a breakdown of long-term foster placements, as some children may have been coded as being in long term foster care during the course of the year. It is important to bear in mind that placement moves may be part of a care plan. They may also be for the child's benefit if the current placement was not meeting their needs, and in those circumstances even unplanned placement moves may ultimately be for the child's benefit.

Finally, while the majority (57.6%) of long-term foster care placements with non-friends and relatives were with local authorities, 42.3% were with independent fostering agencies. This shows that independent fostering agencies are a major feature of the long-term foster care provision which will have implications for how placements are funded, negotiated and how practice is managed. As the survey and interview data showed (see chapter 7 on matching), there were often additional levels of decision making, such as resource panels, required prior to a match being agreed in principle for a child in an independent foster care placement. In some local authorities, matches in independent agencies were also delayed by the requirement to search in-house for a period of time first.

How does the use of the long-term foster care codes vary across local authorities?

The Department for Education did not publish any figures on long-term foster care until 2020 because of concerns about the variation in use of the codes between local authorities, with quality assurance checks identifying a degree of misreporting affecting confidence in the figures (DfE, 2020). Having access to this data by local authority has been a key part of this project. As part of the analysis, the variation in the use of the long-term foster care codes by local authorities in 2017/18 was, therefore, examined (Figure 1).

Figure 1 – Local authority variations in use of long term foster care codes.

Individual local authorities in England

As evident in the figure, the percentage of children coded as being in long-term foster by local authority varied greatly. At the bottom range some local authorities had coded under 10 children in long term foster care. A range from 3.7% - 89.4% raises questions about all aspects of practice, including the recording of long-term foster care placements. In Figure 1, the local authorities included in the qualitative data collection are indicated in red; as can be seen these are across the range from low to high use of long-term foster care.

Characteristics of long-term fostered children by local authority tertile (low, medium and high users of long-term foster care)
As described in the methods, local authorities were coded into low, medium or high users of long-term foster care, based on their 2017/18 recorded long-term foster care figures. The use of long-term foster care by children's characteristics was then examined in order to see if local authorities were using long-term foster care for different children or for a smaller/wider range of children (Table 4).

Table 4: Characteristics of children in long term foster care, by local authority use of long-term foster care tertile (CLA for financial year 2017/2018)

All local authorities

	Bottom Tertile		Middle Tertile		Top Tertile	
	Number	%	Number	%	Number	%
Number of children	3445		6755		11570	
Male gender	1850	53.7	3645	54.0	6365	55.0
Mean age in years at start of year	11.9		11.5		11.2	
Mean age in years at start of period of care	6.4		6.2		6.5	
Mean age in years at start of episode	8.9		8.5		8.6	
Age at the start of the year						
Ages 0-2 years	155	4.5	340	5.0	870	7.5
Ages 3-5 years	185	5.4	455	6.7	885	7.6
Ages 6-10 years	1050	30.5	2155	31.9	3620	31.3
Ages 11-15 years	1750	50.8	3235	47.9	5095	44.0
Ages 16-17 years	305	8.9	570	8.4	1105	9.6
Ethnicity						
White British	2375	68.9	5370	79.5	8935	77.2
White other	160	4.6	250	3.7	510	4.4
Mixed ethnicity	405	11.8	575	8.5	905	7.8
Asian	155	4.5	175	2.6	390	3.4
Black	280	8.1	290	4.3	570	4.9
Other	60	1.7	90	1.3	215	1.9
Refused/no data	<10	<10	<10	<10	<10	<10
Legal Status						
Care order	3100	90.0	6235	92.3	10040	86.8
Voluntary	280	8.1	425	6.3	1240	10.7
Placement order	70	2.0	95	1.4	285	2.5
Other	<10	<10	<10	<10	<10	<10
Reason in care (CIN)						
Abuse or neglect	2260	65.6	4600	68.1	7830	67.7
Family Dysfunction	540	15.7	990	14.7	1620	14.0
Family Acute Stress	285	8.3	560	8.3	865	7.5
Absent Parents	130	3.8	200	3.0	550	4.8
Parental disability	150	4.4	215	3.2	380	3.3
Disabled Child	60	1.7	125	1.9	220	1.9
Child Behaviour	20	0.6	60	0.9	95	0.8
Low Income Family	<10	<10	<10	<10	<10	<10
Placement provider						
Local Authority	2255	65.5	4805	71.1	7320	63.3
Private	1020	29.6	1645	24.4	3755	32.5
Voluntary (Section 20)	170	4.9	300	4.4	495	4.3
Other	<10	<10	<10	<10	<10	<10

Placement Stability						
Total placement changes in care						
0	2400	69.7	4695	69.5	7260	62.7
1	650	18.9	1290	19.1	2510	21.7
2	260	7.5	495	7.3	1060	9.2
3+	135	3.9	270	4.0	740	6.4
Placement changes within current year						
0	3020	87.7	5910	87.5	9520	82.3
1	335	9.7	640	9.5	1525	13.2
2	70	2.0	160	2.4	375	3.2
3+	<10	<10	40	0.6	155	1.3
Mean number of placement changes in care	0.22		0.24		0.31	
SDQ scores						
Completed SDQ score	2930	85.1	5585	82.7	8815	76.2
SDQ score ≥14	1365	46.6	2510	44.9	4160	47.2
Convictions during the year	<10	<10	<10	<10	<10	<10
Long Term Foster Care						
Friends/relatives	705	20.5	1615	23.9	2110	18.2
Not friends or relatives	2740	79.5	5140	76.1	9460	81.8

As can be seen in the table, the profiles of children in local authorities with low, medium or high user of long-term foster care were very similar with the only notable differences being in ethnicity and stability. In terms of ethnicity, there were more ethnic minority children in the local authorities who were low users of long-term foster care (26.1% of children in the bottom, vs. 16.7% middle, and 18.0% top). This might be due to differences in how local authorities consider permanency for ethnic minority children or could be due to different proportions of ethnic minority children; this is possibly an area for future research.

In terms of stability, there was some suggestion in the data that long-term foster care placements were less stable for children in local authorities that were high users of long-term foster care both in terms of average number of placements changes and total placement changes within the year. There were, for example, about 5% more children who experienced one or more placement moves within the year in the local authorities who were high users of long-term foster care compared to children in the medium and low tertile groups. A possible explanation could be that with higher numbers and a wider range of young people in long-term foster care, it may be harder for local authorities to ensure stability. It is worth noting that the children in the high use tertile group had also experienced relatively more instability across their period of care (as indicated by total placement changes), and past experiences of moves may have added to children's difficulties in their long-term foster homes. But it is also important to note that among low user authorities, children in unrecorded placements informally expected to last long-term may have been having the same or higher levels of disruption but this would not be known.

Other than ethnicity and stability, there were no large differences in the characteristics of children between the three tertiles, suggesting that differences in long-term foster care were likely to be due to local authority practice rather than the profiles of the children.

How does the use of permanency in long-term foster care compare to the use of other types of permanency?

Next, the analysis examined how long-term foster care was being used nationally compared to other routes out of care for children, given its new formalised status through the 2015 regulations and guidance. The use of permanency in long-term foster care, and how this varied nationally across the study years 2014/15 to 2017/18 was compared to: (1) returning home and (2) adoption or Special Guardianship order (Figure 2). The numbers used to generate Figure 2 are given in Table 5, and here adoption and special guardianship are disaggregated.

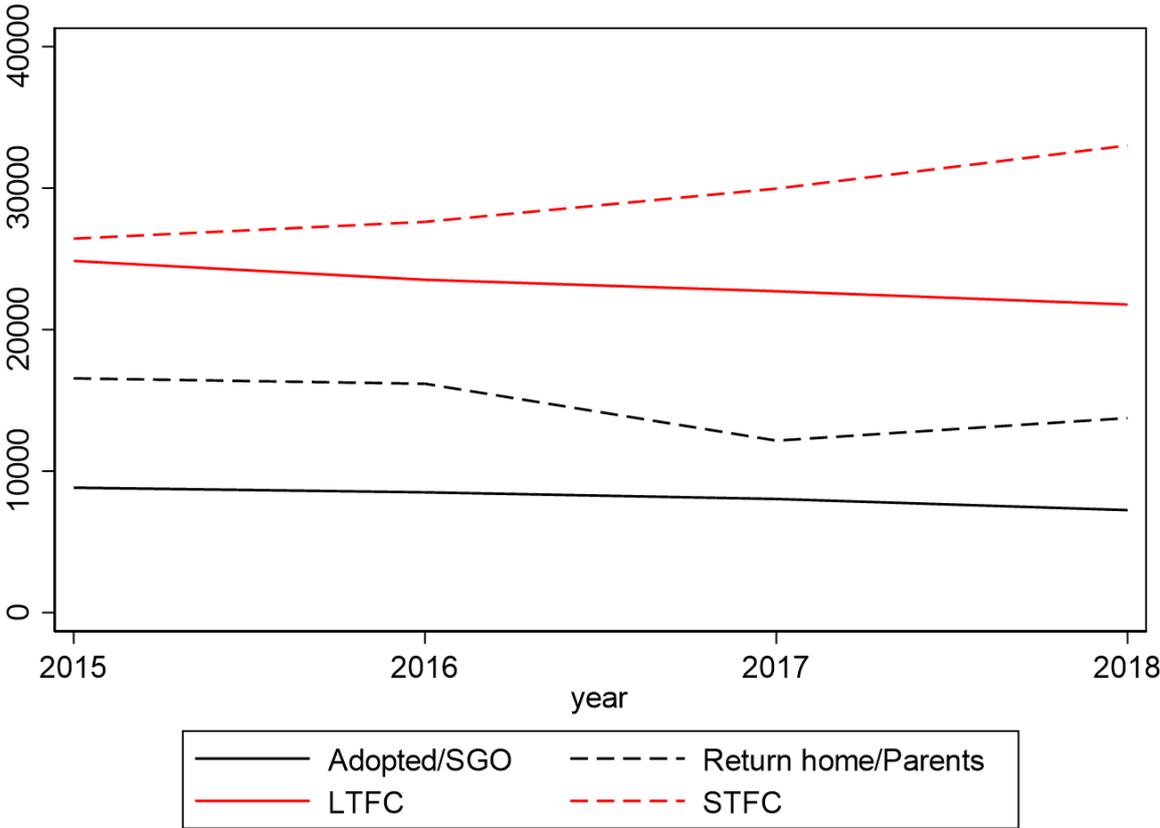Figure 2: National picture of use of permanency options 2015-2018

Table 5: Children in long term foster care, short term foster care, and those who left care for adoption/special guardianship or return home – financial years 2014/2015 to 2017/2018

Year	LTFC	STFC	Adopted	SGO	Return home/parents
2015	24855	26427	5360	3468	16553
2016	23523	27616	4708	3794	16173
2017	22710	29964	4374	3658	12154
2018	21771	33014	3820	3420	13748

Figure 2 demonstrates that from 2014/15 to 2017/18, the counts of children in long-term foster care declined from 24,855 to 21,771. A slight decline in numbers of children leaving foster care to SGO and adoption can also be seen (from 8,828 to 7,240). It's worth noting, however, that this aggregated figure masks differences between the two types of placement – SGO figures rose across this period for two years before falling in year 2018 whereas adoption figures fell year by year, as shown in Table 5. Return to parents is also slightly lower (16,553 to 13,748) than at the start of the period. Thus, all forms of permanency were lower in 2017/2018 than 2014/2015 despite rising numbers in care. This means the stock of children in short-term care rose.

It is important to bear in mind that the long-term foster care data is for all children in long-term foster care at each year end (many of whom will have started to be long term fostered in previous years), whereas the other permanence options are children leaving care for those options in that year. However, the trends are still important to track.

How do children's characteristics vary by their permanency route?

Next, possible differences in children's characteristics for three permanency routes were explored. The descriptive statistics are presented in Table 6. For children in long-term foster care, their legal status and placement provider are based on the start of the year (2017-18). For children who left care for adoption/special guardianship or reunification these characteristics are based on their last episode before leaving care.

Table 6: Characteristics of children in 3 types of permanency: long term foster care; adoption or special guardianship; return home (data from financial year 2017-18)

	Long-term foster care (U1 & U4)		Adopted & SGO		Return home	
	Number	%	Number	%	Number	%
Number of children	21,770		7,240		13,750	
Male gender	11,855	54.5	3,765	52.0	7,855	57.1
Mean age at end of care (*or start of long term foster care)	8.6*		4.0		10.4	
Age at the start of the year (long term foster care)/ end of care (adoption/SGO & return home)						
Ages 0-2 years	1,365	6.3	3,515	48.5	1,845	13.4
Ages 3-5 years	1,530	7.0	1,725	23.8	1,255	9.1
Ages 6-10 years	6,820	31.3	1,385	19.1	2,985	21.7
Ages 11-15 years	10,080	46.3	555	7.7	4,675	34.0
Ages 16-17 years	1,975	9.1	65	0.9	2,495	18.1
Ethnicity						
White British	16,675	76.6	5,740	79.3	9,190	66.8
White other	920	4.2	235	3.2	690	5.0
Mixed ethnicity	1,880	8.6	730	10.1	875	6.4
Asian	720	3.3	105	1.5	1,065	7.7
Black	1,135	5.2	225	3.1	1,340	9.7
Other	365	1.7	85	1.2	385	2.8
Refused/no data	<10	<10	120	1.7	200	1.5
Legal Status						
Care order	19,370	89.0	2,700	37.3	2,890	21.0
Voluntary (Section 20)	1,945	8.9	815	11.3	4,870	35.4
Placement order	<10	<10	3,715	51.3	<10	<10
Other	<10	<10	<10	<10	870	6.3

Reason in care (CIN)						
Abuse or neglect	14,690	67.5	5,155	71.2	5,775	42.0
Family Dysfunction	3,145	14.4	1,140	15.7	1,605	11.7
Family Acute Stress	1,710	7.9	405	5.6	1,075	7.8
Absent Parents	880	4.0	90	1.2	285	2.1
Parental disability	745	3.4	365	5.0	390	2.8
Disabled Child	400	1.8	40	0.6	4,325	31.5
Child Behaviour	175	0.8	<10	<10	270	2.0
Low Income Family	<10	<10	<10	<10	<10	<10
Placement provider						
Local Authority	14,380	66.1	6,305	87.1	9,770	71.1
Private	<10	<10	215	3.0	2,005	14.6
Voluntary	970	4.5	640	8.8	300	2.2
Other	<10	<10	50	0.7	1,610	11.7

As can be seen in the table, different routes to permanency were being used differently for different groups of children.

Long-term foster care
Compared to children who were adopted/in special guardianship, children in long-term foster care were on average older (8.6 years vs 4 years), slightly more likely to be male, slightly more likely to be black or minority ethnicity, and somewhat less likely to have entered care because of abuse and neglect. Compared to the reunified children, the children in long-term foster care tended to be younger, were less likely to be male, black or minority ethnicity, and more likely to have entered care because of abuse and neglect.

Out of all the permanency pathways, children in long-term foster care had the second lowest mean age at the start of their permanency move (8.6) and there was the greatest number of children in the age group 11-15 (46.3%) with 77.6% of children being aged 6-15, suggesting that long-term foster care was the most common permanency option for children in middle childhood and early adolescence. They were the group of children most likely to be in care on a care order (89%) – although most adopted children will have also been on care orders prior to these being replaced by placement orders.

Adoption/special guardianship
Compared to the other permanency options, children who were adopted/in special guardianship were slightly more likely to be female (48% versus 45.5% in long-term foster care and 42.9% children who are reunified), more likely to be White British, and were younger.

Children who were adopted/in special guardianship also had the lowest mean age (4.0) out of the three permanency options, with three-quarters of the children (72.3%)

being between the ages of 0-5 compared to long-term foster care (13.3%) and reunification (22%). Adoption/ special guardianship had the highest proportion of White British children (79.3%) out of the three permanency options.

Return home
Return home was the permanency route containing children with the most variation in terms of age, ethnicity and reason in care. It is worth noting that not all returns home will have been planned permanency decisions.

Overall, children who returned home had the highest mean age (10.4) and like long-term foster care, the age band with most children in was the 11-15 age group (34%). Over half of reunified children (52.1%) were aged 11-17. For the oldest children, aged 16-17, reunification was the most common permanency route (18.1% compared to 9.1% long-term foster care and 0.9% adoption/SGO). However, reunification also had a higher proportion of young children (0-5) compared to long-term foster care (22.5% versus 13.3%).

Reunification had the highest proportion of black or minority ethnicity children with 30.7% of reunified children belonging to a minority ethnic background (compared to 15.9% of adopted children and 18.8% of children in long-term foster care). This pathway also had the most variation in the reason for being in care, with the second most common reason after abuse and neglect (42.0%) being the category of 'disabled' child (31.5%). Children who returned home were in between the other two groups in terms of whether they were in local authority care or the independent sector prior to their move home, 71.1% being in local authority foster homes.

What factors predict a child becoming a long-term fostered child?

Finally, in order to examine which factors (at the child and local authority level) predicted a child becoming long-term fostered, univariable and multivariable regression analyses were carried out. The results of the multivariable analysis are reported in Table 7. When the table refers to a 'base category' the results are a comparison of the other categories to the base category. Results are reported in terms of 'marginal effects'. When the figures for marginal effects are multiplied by 100, this gives the percentage chance that the characteristic increases (or decreases) a child's chance of being coded in long-term foster care. For example, the marginal effect of a child being aged 3-5 was 0.0359. This means that a child in this age group is 3.59% more likely to be coded in long-term foster care than a child aged 0-2.

The univariable analysis (see appendix A) does not control for any relationships between independent variables for example, if older children are also more likely to be male or have a high SDQ score. The results of the multivariable analysis are more helpful therefore, as they look at each risk factor while controlling for all the other confounding risk factors.

Table 7: Results of regression analyses exploring what factors predict a child becoming a long-term fostered child (U1& U4) vs short term fostered (U3 & U6) . Data from CLA for financial years 2009/2010 to 2017/2018

	Long-term Foster Care (U1&U4) vs Non Long-term Foster Care (U3&U6)	
	Multivariable	
	Marginal effect	**T-stat**
Gender		
Female gender (Base category)		
Male gender	0.00822*	(2.27)
Age at the start of the year		
Ages 0-2 years (Base Category)		
Ages 3-5 years	0.0359***	(3.4)
Ages 6-10 years	0.116***	(8.46)
Ages 11-15 years	0.162***	(11.82)
Ages 16-17 years	0.190***	(12.75)
Ethnicity		
White British (Base Category)		
White other	-0.0241**	(-2.77)
Mixed ethnicity	-0.0126*	(-2.02)
Asian	-0.0421***	(-4.34)
Black	-0.0479***	(-6.27)
Other	-0.0814***	(-5.98)
Refused/no data	-0.0754**	(-3.01)
Legal Status		
Care order (Base Category)		
Voluntary	-0.109***	(-16.62)
Placement order	-0.165***	(-15.71)
Other	-0.196*	(-2.07)
Reason in care (CIN)		
Abuse and neglect (Base Category)		
Disabled Child	0.0717***	(4.69)
Parental disability	0.0186	(1.84)
Family Acute Stress	0.00507	(0.76)
Family Dysfunction	-0.00839	(-1.62)
Child Behaviour	-0.0346	(-1.79)
Low Income Family	-0.0209	(-0.44)
Absent Parents	0.0114	(1.09)

Placement provider		
Local Authority (Base Category)		
Private	-0.0306***	(-7.60)
Voluntary	0.000953	(0.11)
Other	0	(.)
Total placement changes within current year		
0 (Base Category)		
1	-0.105***	(-20.15)
2	-0.146***	(-14.44)
3+	-0.239***	(-14.77)
SDQ		
SDQ score <14 (Base Category)	0	(.)
SDQ score ≥14	-0.0206***	(-4.19)
No SDQ score due to age	-0.219***	(-17.47)
No SDQ score other	-0.252***	(-46.49)

Local Authority Level Variables		
Income Deprivation Quintiles		
Lowest deprivation quintile	0	(.)
2	-0.0118*	(-1.96)
3	0.00455	(0.76)
4	-0.0279***	(-4.59)
Highest deprivation quintile	-0.0195***	(-3.35)
Tertile of LA variation in use of other permanency pathways		
Lowest use of other permanency tertile (Base Category)	0	(.)
Middle tertile	-0.00944*	(-2.17)
Highest tertile	0.000832	(0.17)
LA variations in use of long-term foster care codes		
Lowest use of long-term foster care tertile (Base Category)	0	(.)
Middle tertile	0.211***	(46.04)
Highest tertile	0.385***	(89.38)
Number of children	**54785**	

Notes: Significance levels: * p<0.05; ** p<0.01; *** p<0.001."

As shown in Table 7, a number of characteristics were significantly associated with a child becoming long-term fostered. Factors associated with a greater likelihood of being in long term foster care were: male gender, being aged older than 0-2 years (all the older age groups were increasing more likely to be coded in long term foster care), reason for care entry being the child's disability. Factors that were associated with a child being less likely to be in long-term foster care included being of minority ethnicity (compared to White British children), being in care under section 20 or on a placement order, having more than zero placement changes in the current year, having an SDQ score over 14 (borderline/clinical), being placed with a private placement provider (compared to LA or voluntary), and having no SDQ score. The effect sizes for these characteristics, however, were not large, as demonstrated by Table 7. The largest effect was the absence of an SDQ score (a negative effect); but as seen in Table 3, children in long-term care were more likely to have a completed SDQ – it is likely that being in long-term foster care affects having an SDQ score, rather than vice versa. The next largest child effect was having 3 or more placements in the year. Children in this category were 23.9% less likely to be in long-term foster care than children with no placement changes. This finding that recent stability (as indicated by number of moves in 2017-18) was associated with being in long-term foster care is unsurprising as achieving stability for the child is a key goal of long term foster care.

Several local authority variables were significantly associated with a child being in long-term foster care – though for LA deprivation quintiles and LA use of other routes of permanency effect sizes were very small. One local authority variable was highly significant with a much larger marginal effect than any other child or local authority variable. Being in a local authority with a high use of long-term foster care codes increased a child's chances of being in long-term foster care by 38.5% - controlling for all other variables. This was thus the strongest, single predictor for being in long-term foster care controlling for all other factors. This persisted from the univariable to multivariable analysis, and it suggests that, much more so than child characteristics, the practice within the local authority, specifically around the implementation of long-term foster care guidance, drives children's chances of being in recorded long-term foster care.

The multivariable results do show however that some child characteristics still made a difference regardless of local authority variations.

Strengths and limitations of the analysis of CLA data

The analyses presented in this chapter focus on the nature of long-term foster care, and factors predicting whether a child is coded as being in long-term foster care, rather than the outcomes or experience of this type of permanency. This analysis is the first examination of the child and local authority characteristics associated with long term foster care. The analysis generated numbers of children in the four types of foster care very similar, but not not identical, to Department for Eduction figures. It was not possible to exactly replicate Department for Education figures due to a

lack of precise information about how their figures were derived. Logistic regression estimates were carried out on a large population of 54,785 children who were in either long or short-term foster care on 31st March 2018. This population represents all children in foster care in England, avoiding biases due to sample selection.

The analyses were constrained by the nature of variables included. Research questions were focused on the use of the new long term foster care codes. Variations in the use of the codes may not necessarily fully reflect variations in the use of long-term foster care, as children may be in long term foster homes, but not be coded as such. The use of the codes therefore only gives an *indication* of which children were in settled long term placements. Other variables also had limitations. For example, the 'reason in care' variable is hierarchical in nature with abuse and neglect at the top of the list. This may obscure other factors affecting a family such as the parents' or child's disability which will not be recorded when abuse or neglect has also been a factor. Income deprivation was captured at the local authority level. As the local authority level is large in terms of geography and population, the overall level of deprivation may not reflect deprivation level in which the child resides.

The econometric approach using logistic regressions enabled the analysis of both child and LA factors simultaneously. Not including LA factors in the specification would induce ecological bias which would lead to spurious effects. Specifically, the main source of ecological bias was omitted LA (intra-group) confounders. The inclusion of LA-level variables attempted to control for a series of ecological confounders known to vary across LAs and which were related to the outcome of interest. The logistic regressions have clustered standard errors (at the LA-level) that can adjust for non-independence at LA level. Nevertheless, removing LA level variables from the covariate lists did not alter the main conclusions regarding the child level covariates and therefore the main findings.

An alternative method of analysis would have been to use a multi-level modelling approach. However, interpreting and making inference with this class of mixed effects non-linear estimators can be challenging. Nonetheless, tests were carried out to check whether the results held in a multi-level setup (with LA-level random effects). A multi-level approach increases model complexity (worst goodness-of-fit-statistics) without altering the main estimates obtained for the child level covariates and therefore the main findings. Thus it was decided to provide results obtained from a more parsimonious specification that provided the best goodness-of-fit statistics.

The regression analyses only estimate associations rather than causations. This is because there are characteristics which are not controlled for in the models. We were limited to the data available in the SSD903 returns. This data set does not include some key variables about children, for example, whether the child has a disability or not (hence children who are disabled but who enter care for reasons other than their disability are invisible in the dataset). There are many other unobserved factors that are likely to affect a child's chances of being in long-term care, for example, whether a child has developed a close relationship with a short term foster carer, or

the availability of the extended family to provide a home under a special guardianship order. The regression models therefore provide limited insights into why some children are coded in long term foster. Our other data collected from local authorities adds to the picture however.

The estimated effect sizes in the multivariable analysis are generally smaller than the univariable. If it is assumed that controlling for more characteristics will result in further reductions in effect sizes, fewer characteristics which are statistically significant may be apparent. However, despite a reduction in the effect sizes in the multivariable regressions, the estimated effect sizes, in some cases, are still large.

Summary

Decline in recorded use of long-term foster care
- The national average of children in long-term foster care (out of all fostered children) was 39.7% in 2018, down from 48.5% in 2015. This figure represented a national decline of the use of long-term foster care, alongside a decline in adoption and reunification. In contrast special guardianship orders increased during this time before falling in 2017/18. The data revealed that the decline in long-term foster care, adoption and reunification was occurring at the same time as the number of children in care increased, which meant an overall rise in the number and percentages of children in short-term foster care. Given the issues regarding recording of long-term foster care, it is not clear if these numbers reflect a genuine decline in use of long-term foster care or whether it represents a decline in formalising matches and recording placements.

Who long-term foster care was used for
- Long-term foster care was used for a wide range of children but predominantly they were White British children in middle childhood or adolescence on a care order who entered care because of child abuse. Long-term foster care placements seemed to offer greater stability for children than short-term foster care placements with non friends/relatives.
- There were crucial differences between placements with friends and relatives and non-friends and relatives, both in long-term and short-term foster care. In both placement types, friends and relatives carers cared for more girls, more White British children, younger children, and children with lower SDQ scores. The data thus seemed to suggest that friends and relatives carers may have been caring for children who had fewer challenges, although all children in long-term foster care had difficult histories suggesting that support would be needed.
- Finally, for non-friends and relatives placements, the independent sector provided a significant proportion of placements, for both short -term and long-term foster care, but with an even greater percentage for long-term foster care placements.

'High' versus 'low' use of long-term foster care by local authorities
- The recorded use of long-term foster care varied nationally by local authority from under 10 children to over 80% of fostered children. The Department for Education has raised concern about these figures, and qualitative interviews with managers, including data managers from this study, indicated a number of issues related to both recording and decision-making around long-term foster care. These issues are explored in later chapters.

- The strongest predictor of whether a child was placed in long-term foster care was not any of the child characteristics but rather whether a local authority was a low, medium or high user of long-term foster care codes. Children in local authorities that were high users of long-term foster care were 38.5% more likely to be coded in long-term foster care. The profiles of children in long-term foster care in local authorities with high, medium and low use of long-term foster care were broadly similar. There were some modest indications that high use local authorities were including a broader range of children, and that placement stability was slightly poorer. On the other hand, low users may have similar levels of disruptions in unrecorded placements informally intended to be long-term, so comparisons are not straight forward.

Long-term foster care as a permanence pathway compared to adoption/special guardianship and return home
- Permanency pathways were used differently, depending on children's characteristics. While children being long-term fostered were broadly similar to those being adopted or subject to special guardianship orders in terms of reason for care entry, gender and ethnicity, they differed in age from the adopted children and those under special guardianship orders. In particular, proportions of very young children (0-5) were much lower in long-term foster care, this permanency route being predominantly used for children aged 6-16.
- Comparing the long-term foster children to those reunified, proportionally, more boys, black and minority ethnicity children, children entering care because of their disability, and children in voluntary care went home. The average age of children who were reunified was 10.4 years, compared to 8.6 years for children becoming long-term fostered, although in reunification there were higher proportions of both the very young (0-2) and the oldest (16 to 17) following this pathway compared to the age profile in long-term foster care.

4

Methods for the national survey and interview data collection and analysis

The mixed methods approach to this study of the implementation of the 2015 long-term foster care regulations and guidance benefitted from access to the SSDA903 data regarding the numbers, profiles and pathways of children in long-term foster care, but also enabled us to explore through surveys and interviews the attitudes, procedures and decision-making processes that lay behind the statistical data.

The research team had the advantage of having conducted previous projects on long-term foster care and in particular a project on care planning in 2006/7 (Schofield et al, 2008), which used a similar national survey of local authorities and consultation with selected professionals to investigate long-term foster care procedures and practice. It was therefore possible to build on those tools and be able to reflect on issues that may or may not have been addressed by current practice and the implementation of the regulations and guidance.

Research questions for the survey and interview elements of the study

- Have local authorities established procedures and practices that conform with the definitions, principles and requirements of the 2015 regulations and guidance for long-term foster care?
- Which aspects of the 2015 Regulations and Guidance appear to be working well and which may be causing concern and need to be reviewed?

These core questions for the survey and interviews were in the context also of exploring the differences between local authorities identified in the Department for Education data, particularly in relation to the wide range of rates of recorded long-term foster care placements. This issue was known before undertaking this project as it had been suggested as one of the concerns leading to the decision by the Department for Education not to publish the local authority level long-term foster care data.

The questions were also in the wider context of gaining as full as possible an understanding of how long-term foster care was currently managed in terms of care planning in order to see where the regulations and guidance might have had an impact and to identify good practice.

Methods

Two methodologies used in the study are discussed here: (1) a national survey of local authorities and independent fostering providers (IFPs) in England concerning their procedures and practice of long-term foster care since the 2015 regulations and guidance and (2) interviews with key managers from a purposive sample of 30 local authorities, identified from the Department for Education data on rates of long-term foster care and the survey data, to look in more depth at policy, procedures and practice of long-term foster care within the local authorities in the context of permanence planning.

In addition, the study involved a workshop with young people with experience of care/long-term foster care from the Cafcass Family Justice Young People's Board. The workshop explored young people's experiences of foster care, their views on what might make a long-term foster family work well for a child or young person and their thoughts on the potential impact on children and young people of reducing the frequency of review meetings or social work visits in agreed long-term foster care placements.

The Project Advisory Group supported the development of the data instruments, data collection and analysis. Some members were also involved in the process of promoting participation in the project by their staff and agencies.

The national survey

A survey was conducted of all English local authorities and independent fostering providers regarding their long-term foster care procedures and practice, with a focus on the impact of the 2015 regulations and guidance. Service managers were targeted by the survey as we were looking for an authority or agency wide view of the implementation of the regulations and guidance in policy, procedure and practice. It was also the case that service managers in these service areas tend to be very familiar not only with policy and procedure but also with the detail of practice and the dilemmas of care planning in their local authority, as they often chair permanence planning meetings and become involved in long-term foster care planning and matching for individual children and sibling groups.

The survey instruments
Three surveys were designed to capture the range of views, procedures and practice from local authority service managers for fostering, looked after children

and independent reviewing officers (IROs). A separate survey was developed for independent fostering providers (IFPs). (In this report the terms independent fostering provider and independent fostering agency are used interchangeably.)

The survey questions were structured around the different elements of the regulations and guidance: definitions and terminology; long-term foster care as a permanence choice; care planning; matching; recording long-term foster care placements; and the implementation of reductions in the frequency of social work visits and looked after children review meetings.

All local authority surveys had similar opening questions on long-term foster care procedures in their local authority, so that even if we received a response from only one of the service managers, it was possible to get an indication of how long-term foster care was perceived and managed in that local authority, for example in relation to children of different ages.

The surveys contained questions that generated quantitative data (e.g. tick box options) and text boxes for qualitative data (e.g. additional comments). The four survey questionnaires were discussed with selected advisory group members and piloted with relevant managers. The pilot participants' responses were discussed over email and telephone, resulting in some changes being made to the surveys. Each survey questionnaire was estimated to take up to 30 minutes to complete. Respondents to the survey were also asked if they would be willing to participate in a follow-up telephone interview.

Conduct of the survey
In May 2019, the Director of Children's Services in each local authority in England was contacted directly by email with a description of the study, a request for support to contact their local authority managers and for the names and email addresses of the relevant service managers. The Directors of Children's Services were also offered the option of forwarding the email to the local authority managers, copying in the lead research associate of the study. The email contained electronic links to three surveys for the manager of the looked after children service, the manager of the fostering service and the manager of the independent reviewing officer service. The option of completing the survey electronically through Qualtrics or through a word version which could be emailed to them directly was offered.

Additionally, the IRO manager surveys were promoted via the website of the National IRO Managers Partnership (NIROMP) and there were two email postings to all members with the help of the NIROMP national chair.

The survey was left open for six months. Two follow up emails were sent to the Directors of Children's Services if a response had not been received. In total, the surveys were disseminated to 147 local authorities. Up to four email reminders were sent to the local authority named contacts at key dates and times over this period, with the last reminder email sent in October 2019. Once the in-depth telephone

interviews (see below) began, interviewers also checked with interviewees whether the contact details of any colleagues from their local authority who had not yet replied to the survey were current and asked them for their support to remind colleagues about the survey if it was felt to be appropriate.

Surveys were also distributed to 338 independent fostering providers (IFPs). Names and contact details of current providers were obtained via the Fostering Network website and Department for Education fostering agency data set. The IFP survey was also promoted at least twice in the Nationwide Association of Fostering Providers (NAFP) email bulletin. An email was sent to either a named managing director for the organisation, obtained through the provider's website, or if a named person was not available, the organisation's general email address. The initial email included a description of the study and a request for support in locating the appropriate manager within the IFP to complete the survey and their name and email addresses. The email also suggested that the email could be forwarded to the designated person, copying in the lead research associate on the research team. A link to the survey was also included. Two follow-up emails were sent to IFPs in order to improve the survey uptake unless the initial email address used appeared to be inactive.

Survey response rate
The survey achieved a response rate for at least one survey from 109 or 74% of local authorities out of the 147 local authorities who received surveys. These comprised:

- 39% (57) looked after children service managers
- 56% (83) fostering service managers
- 56% (82) IRO service managers

28 local authorities provided multiple responses to the survey. Several respondents began the survey but did not complete it. Partial responses of under 60% were not included in the overall response rate.

The overall response rate achieved in the survey was high, in large part due to the support of the Directors of Children's Services and being provided with named managers within local authorities. The response rate was very helpful, because, as described above, questionnaires from all managers, regardless of service responsibility, contained core information about their local authority's practice.

The higher rates of response were from fostering or IRO managers, with a lower response rate received from looked after children service managers. Although the initial survey invitation requested names and email addresses of looked after children, fostering and IRO managers, the contact details of looked after children managers were supplied less frequently, and of the names and contact details that were obtained, this was the group the research team had the most difficulty contacting.

The response rate from the IFPs was much lower than the local authority response rate. 20 IFPs responded to the IFP survey, of which 18 completed surveys. Of the

initial 338 IFPs contacted, several had closed and for the IFPs without a named managing director on their website, it was difficult to obtain a reply. However, there was useful information in those surveys that were completed that complemented the reponses regarding independent fostering placements from local authority managers.

The range of survey respondents
The respondents represented a good range geographically, with local authorities from all regions in England, and also a good range in terms of size and type of local authorities i.e. London Boroughs, metropolitan councils, unitary authorities, shire counties. Respondents also represented local authorities with a range of diverse procedures and practices and rates of recorded long-term foster care. Using the quantitative analysis of the Department for Education data, local authorities with high, medium and low rates of recorded long-term foster care placements (as discussed in the previous chapter) were all represented.

The 20 IFPs who responded to the survey represented both large, national IFPs and smaller IFPs consisting of fewer than 100 fostering households. Middle or smaller sized IFPs represented a fair geographical spread, including the South-East and South-West, West and East Midlands and East Anglia.

Analysis
The survey worked well in eliciting answers to wide ranging questions and further commentary in qualitative text boxes. The quantitative data from the survey was analysed through SPSS and the qualitative data from the survey was analysed thematically in NVivo. Findings and themes were discussed at each stage in the research team and helped to identify the local authority sample for the interview stage of the study.

Local authority interview sample

Identifying the local authority sample
As was part of the original design for the study, a purposive sample of 30 local authorities was identified to provide an interview sample. The sample criteria were local authorities who had:
- a range of high, medium and low rates of recorded long-term foster care placements in the Department for Education SSDA903 data (see chapter 3)
- a range of long-term foster care procedures and practice as evidenced in the surveys
- at least one service manager willing to be interviewed.

The 30 local authorities in the sample were initially identified as representing a range of rates of recorded long-term foster care using a preliminary analysis of the SSDA903 data in 2019. Using the tertiles from the more recent and complete analysis outlined in chapter 3 (above), has confirmed that we have a good range: 13 high (top tertile), 7 medium (middle tertile), 8 low (bottom tertile).

Although not part of the sampling process, the 30 local authorities also varied in terms of their most recent Ofsted rating with 3 rated as 'outstanding', 12 as 'good' and 15 as 'requires improvement' or 'inadequate'. Using the tertile analysis of the SSDA 903 data, it was found that local authorities with Ofsted ratings of 'Outstanding', 'Good' and 'Requires improvement' were found in all three tertiles (high, medium and low). In these Ofsted reports, however, the term long-term foster care was rarely used and there were examples of positive comments on planning for permanence which referred only to adoption or special guardianship. (It is important to bear in mind that some of these Ofsted inspections were not recent.)

Interview participants
Telephone interviews were held with 43 service managers from this sample of 30 local authorities. The interview participants included 10 looked after children managers, 12 fostering managers and 10 IRO managers from these authorities who had completed surveys and indicated a willingness to be interviewed. Data management staff (11) from the sample local authorities were added to the study, because recording long-term foster care placements, data management and submission to the Department for Education were significant issues for the study and other service managers interviewed often had more limited knowledge of data systems and the process of data aggregation and submission.

Interview schedule
The interview schedules were semi-structured and designed to explore in more detail with each participant the key long-term foster care practice issues raised in the survey and linked to the 2015 regulations and guidance. But it was also possible to explore in interviews some of the more subtle issues about attitudes and values that underpin permanence choices, such as the relative merits of adoption, long-term foster care and special guardianship; the significance of sibling relationships; and the role of birth family contact.

The interview schedule for the looked after children, fostering and IRO managers contained questions on: the choice of long-term foster care as a permanence option; factors in care planning for long-term foster care; procedures and practice for care planning/matching/supporting long-term foster care; availability of long-term foster carers; reduction in frequency of social work visiting; reduction in frequency of looked-after children review meetings; examples of good/innovative practice around long-term foster care; long-term foster care data submission to the Department for Education; and any final thoughts on the implementation and impact of the 2015 long-term foster care regulations and guidance in the local authority.

Data manager interview schedules contained questions on the data systems used; the process of recording long-term foster care placements; who recorded the placement and at what stage; the process of collecting local authority wide data on long-term foster care placements; processes of working with service managers; views on how the long-term foster care data recording system was working; confidence in the figures; and general issues or comments on long-term foster care data management.

The first two data manager interviews raised the question of the data check by the Department for Education, in which local authorities with less than 40% or more than 60% of children in care recorded as in long-term foster care were asked to both check their data and explain why it was above or below this range prior to submitting the data. This issue was therefore added as an interview question for the remaining data manager interviews.

Conducting the interviews
Survey responses completed by the participants were consulted prior to each interview in order to check for information already held by the research team and ensure that the interview clarified or asked more in-depth questions about survey responses or covered new ground.

Telephone interviews were set up at times to suit the participants. Fostering, looked after children and IRO manager interviews lasted between 30 and 70 minutes. Interviews with data professionals were narrower in scope and lasted up to 30 minutes. The interviews were conducted August to December 2019.

Analysis of the interview data
The interviews were transcribed, anonymised and coded in NVIVO. They were analysed thematically, with multiple readers of each interview within the research team assisting in the analysis.

Ethical issues

The project was approved by the Association of Directors of Children's Services Research Committee and the University of East Anglia Research Ethics Committee.

It was important from an ethical point of view that although Directors of Children's Services had given permission for us to approach managers in their authority, the managers were invited through the use of project information leaflets to give informed consent to both survey completion and interviews. Although there is some expectation that professional staff in public agencies will participate in research that can extend understanding and improve practice, it was appropriate that participants were aware of our commitment to the anonymisation of local authorities and individuals; to treating their data with respect; and to using the data for the benefit of increasing knowledge and contributing to improving practice in long-term foster care.

Findings chapters

Findings from this analysis of the survey and interviews are reported in the following five chapters, organised by theme: the choice of long-term foster care as

a permanence option; care planning procedures and practice in long-term foster care; matching procedures and practice and plans for support; social work visits and statutory reviews in long-term foster care; data management in long-term foster care. Each of these chapters begins with a statement of the main issues and the implications of the 2015 regulations and guidance that will be explored in that chapter. Statistical findings from the survey relevant to each practice issue are set out. Quotations are then used to illustrate the thematic analysis, highlighting the language used as well as the dilemmas facing children's services practitioners and managers in making difficult decisions for children within the framework of the regulations and guidance, but also within multi-agency networks and resource constraints. In each case we have stated the service specialism of the manager: i.e. children looked after (CLA), fostering (F), independent reviewing officer (IRO) and data managers (D). In some cases an interview was conducted with both children looked after and fostering managers, and in other cases a manager might be responsible for both services. Quotations are anonymised with the local authority referred to by the research code numbers.

For each quotation the analysis of the Department for Education SSDA903 data has been used to indicate whether the rate of long-term foster care as a % of children in foster care in that local authority was in the top third tertile (High), middle tertile (Medium) or bottom tertile (Low). This allows for some reflection on the complex interaction between attitudes, practices and numbers e.g. positive or negative comments may be associated with both high and low actual rates of recorded long-term foster care placements.

5

The choice of long-term foster care as a permanence option

The key element to explore for this chapter is how long-term foster care as a permanence option is understood and translated into policy and practice around care planning in each local authority. This discussion will examine how closely those meanings, policies and practice appear to reflect the regulations and guidance. The more detailed requirements in the legislation in relation to how long-term foster care planning is implemented in procedure and practice will be explored in the following chapter.

In the 2015 regulations and guidance, an important step in developing the new framework for long-term foster care as a permanence option was to revisit the definition of permanence. In the previous care planning guidance (2010) the definition had included the following sentence:

> Permanence is the framework of emotional permanence (attachment), physical permanence (stability) and legal permanence (the carer has parental responsibility for the child) which gives a child a sense of security, continuity, commitment and identity. (Department for Education, 2010:2.3)

The reference to legal permanence, with the carer having parental responsibility, appeared to exclude long-term foster carers, even though long-term foster care was listed as a permanence option in the same volume. The Department for Education expert working group on long-term foster care recommended that this definition be changed. The revised definition removed the reference to legal permanence and parental responsibility, but retained both the commitment to permanence as an 'underpinning framework' and the elements that described the quality of family life needed to meet a child's long-term developmental needs in any permanence option.

> Permanence is the long-term plan for the child's upbringing and provides an underpinning framework for all social work with children and their families from family support through to adoption. The objective of planning for permanence

is therefore to ensure that children have a secure, stable and loving family to support them through childhood and beyond and to give them a sense of security, continuity, commitment, identity and belonging. (Department for Education, 2015b: 22-23, s2.3)

The range of permanence options are then listed in the guidance (Department for Education, 2015b:23, 2.4) as follows:

A range of options for permanence exist, all of which can deliver good outcomes for individual children:
- For many children, permanence is achieved through a successful return to their birth family, where it has been possible to address the factors in family life which led to the child becoming looked-after.
- For other children routes to permanence outside the care system may include
  - family and friends care, particularly where such care can be supported by a legal order such as a child arrangement order, special guardianship order or in a few cases, adoption;
  - adoption, which for many children can offer the best route to a lifelong and legally permanent new family. Twin track or parallel planning, including concurrent planning, may provide a means to securing permanence by adoption at an early stage for some children;
  - other non-family and friends carers supported by a legal order such as a child arrangement order or special guardianship order.
- For those children who remain looked-after an important route to permanence is long-term foster care. Where the permanence plan for the child is long-term foster care this may be where the current short-term placement is assessed to meet the long-term needs of the child for permanence or where a new placement is identified for the child as a result of an assessment and matching process.

The statement regarding these options, 'all of which can deliver good outcomes' is important here. Long-term foster care is last on the list, but this is not a hierarchy of value, although legislation does require priority to be given to the birth family where they are able to meet the child's needs. Key here is that long-term foster care is described as an 'important route to permanence'.

This chapter will draw on both the survey and interview data to explore attitudes to long-term foster care and also how they may currently be affected by attitudes and practice in relation to other permanence options – reunification, kinship care, special guardianship and adoption. As part of this discussion, the key factors that were being taken into account in permanence planning will be considered, such as the child's age, history and sibling groups. The perception by managers of the impact of the regulations and guidance on long-term foster care as a permanence option will also be explored.

Terminology

The survey found that the majority of local authorities (75%) used the term 'long-term foster care' and linked this to permanence. For example:

> I think it should be referred to as long-term fostering… Because it's one option of what permanence can look like. (LA57 F, Medium)

Just 9% used the term 'permanent foster care', although the official term used in the regulations is long-term foster care.

> We call it permanent fostering … we don't use 'long term'. (LA49 CLA, Medium)

For some this choice of the term 'permanent foster care' meant an explicit rejection of the words 'long-term'. For others, the choice was explained in terms of making the link to and advocacy for permanence more obvious.

> With long-term foster care, it is still most definitely an option for permanence. And in fact, we're more likely to call it permanent foster care. That's the current language as far as I'm aware… that's what I've started using in the hope that that will kind of influence others. (LA10 F, High)

It is not clear here whether 'current language' refers to local authority practice or a sense that this is thought to be the required language of the regulations and guidance, but the regulations clearly use the language 'long-term foster placement.' However, the tendency to refer to permanent foster care had not led to a restrictive approach nor a reluctance to use the long-term foster care codes as this local authority was in the top tertile, so had a relatively high rate of coded long-term foster care placements.

A small number (16%) of local authorities suggested that they used the terms 'long-term' and 'permanent' interchangeably. However, unlike in the previous survey conducted by Schofield et al (2008), there was no evidence of official twin track and separate long-term and permanent foster care pathways and systems in the current survey. There was, though, some suggestion in at least one local authority where the term 'permanent foster care' had been adopted that in practice the term 'long-term foster care' was still used for those cases which did not go through the formal matching procedures.

> The change in legislation didn't really alter our process but it altered some of our terminology. I think it helped us identify that there are some placements that we call 'long-term' where we are not going to match for permanence for a variety of reasons. (LA91 F, Medium)

Having two separate categories, long-term and permanent, was previously found to create a hierarchy of placements (Schofield et al 2008) and in this study too it was not clear if where both terms could be used, long-term foster care was seen as of lesser status or commitment and not a permanence option as defined in the regulations and guidance.

The meanings attached to long-term foster care

Managers' ideas about the meanings attached to long-term foster care in their local authority often emerged when asked to comment on how this option might be explained to children. This included, for example, avoiding the term 'permanence', while trying to capture its meaning. In these definitions, time commitment and the sense of belonging are named.

> We tend to use the phrase 'this would be your forever family'...I don't think saying 'permanency' to a child would really mean much to them. (LA8 IRO, Low)

> Because that's what permanence is, it is that being part of the family. (LA49 CLA, Medium)

This manager (below) gave a range of more detailed ideas about stability, home and family which are associated with what a child can expect a long-term foster family to offer.

> Often, it's presented to them that this is your home until you're ready to move out to your own home. So, we don't really use the term 'family for life'.... The message we try to give to the child is that this is going to be your family ...the place where you're going to stay and the people you're going to live with until you're grown up. (LA37 CLA, High)

'Until you are grown up' probably makes best sense to the children most likely to be considered for placement for long-term foster care - those in middle childhood and early adolescence - and leaves the timing of the transition to adulthood in this family perhaps deliberately flexible.

For some managers it was a personal struggle to reconcile the language used with what they knew of the potential reality, as this fostering manager comments.

> I think it's about the issues around guaranteeing what it is to be, and that is why I struggle with 'forever families' sometimes because is it going to be forever? (LA57 F, Medium)

There were references to the various sources of influence that might be affecting the language and its meanings in a particular local authority. A number of local authorities, for example, referred to the role of Ofsted as influential, but also the role of directors' own views. Here this fostering manager links the two.

> We're having a debate at the moment about the use of the terminology 'forever families' so, yes, because Ofsted were using it when they came, and our director really likes it... (LA10 F, High)

There were various ways of defining the distinctive nature of long-term foster care in terms of how it would be explained to foster carers. This often focused on the length of time and in particular the expected commitment beyond 18. This would be consistent with the definition of permanence in the 2015 care planning guidance, which does refer to '18 and beyond', although the regulations specify a commitment from the long-term foster carer until the child 'ceases to be looked after'.

> It should be explained to the foster carers, we're not just expecting up to 18, we're expecting beyond that. (LA25 CLA, Medium)

And it was acknowledged that this explicit expectation of care and family membership beyond 18 represented a 'language shift'.

> It's very clear that it is about care to independence...When I started my career the language used to be very much about being through to eighteen and that being the cut-off point of caring. The language shift is very much moved towards independence and those ongoing relationships beyond, with the sustained approach and just general family values in terms of the support you would offer your own children if they grow up and move on. (LA30 CLA, Medium)

But definitions of carer commitment often combined length of time with the quality of the family relationship expected – with the idea of the child being 'part of the family' being key for this IRO manager, and other managers.

> The discussions we're having with (foster carers) really is their commitment to care for this child until they are 18 and beyond. That this is really seeing this child as part of their family in all but legality I suppose. So we would have quite a lot of discussion about long term commitments, how needs might change, think of any impact that may have on the birth family. So I think there's quite thorough discussions with the foster carers about the kind of commitment they are making. (LA14 IRO, Low)

Managers focused in their expectations of foster carers on what being 'part of the family' might mean in terms of 'remaining connected', general support and specific family events, even after a young person has left care or left the family home. This could include but went beyond a Staying Put arrangement, as this fostering manager described.

> Staying Put if appropriate, but certainly staying as a member of the family, being there to support first jobs, university, Christmas, birthday as appropriate...They might not live with you at 19, 20, but you would want to remain connected as a very significant person in this young person's life... They may still be at school beyond 18 for nine or 10 months... Life isn't as easy that you reach 18 and off you go. You try and bring that in very much when you're talking to foster parents about permanence. (LA51 F, High)

Managers had often found that they needed to be active advocates for their view of permanence, 'championing' these significant family membership expectations of long-term foster care, as this looked after children manager explained.

> It's certainly a big thing that I've championed in the local authority and the local authority culture created now is very much these are our children and yes we're in it together. They are part of your family. If you're expecting to care for one of our children, they have to become part of your family. Our expectation was that they would be involved in family events, family holidays. (LA30 CLA, Medium)

The perceived impact of the regulations and guidance on the status of long-term foster care

In talking about the status of long-term foster care in their local authorities, managers were invited to reflect on the impact of the regulations and guidance.

The majority spoke of a range of ways in which there had been benefits. This looked after children manager commented that a positive change in culture had been achieved because long-term foster care was now seen as having a 'kind of legal weight'. This helped staff to be more positive that long-term foster care could be 'embraced' as a positive permanence option.

> I think the biggest change ... is a cultural change actually in terms of the recognition now that long-term fostering is now recognised as a legal permanence option... I think for children's social workers they now recognise that actually it carries a kind of legal weight...When considering permanence options, long-term fostering is now there with out-of-care permanence options such as adoption, special guardianship, and so on... Children's social workers I think now think more readily that if there's no prospect of rehabilitation and no prospect on the horizon of the child leaving care through special guardianship, then they more readily kind of consider and embrace the fact that long-term fostering could be the permanence option. (LA37 CLA, High)

As well as raising the profile of long-term foster care alongside other permanence options, planning for long-term foster care was said by this manager to be more timely and more rigorous.

> I think the consideration of that now is happening sooner rather than perhaps characterising some practice in the past where we've just drifted into it when no other option's been available. (LA37 CLA, High)

This IRO manager (below) also described both the benefits of the regulations and guidance in putting long-term foster care on a more equal footing with other permanence options and as changing attitudes from a situation more like drift to a more 'formalised' situation and a plan for which regulations and guidance now gave

some authority. But this had obviously been a gradual change and practice was still being developed four years after they were issued.

> [The impact of the 2015 regulations and guidance] is really positive because it did put long-term fostering on an equal basis of a permanency plan as opposed to the child being in foster care…My experience in our authority has been that practice is having to catch up with that and we still sort of have some legacy ideas that long term children who are in foster care and 'long-term' just means they stay where they are. (LA7 IRO, Low)

The challenge for this authority and others was to get to the next stage, building more positive ideas about long-term foster care into systems and documentation.

> I think people are getting to see it, but how that works in practice is still a bit up in the air… actually formalised in practice and in guidance. I think that long-term fostering is a permanency option. Whereas before people knew it was but I think in some ways you always liked to put it in the guidance and say this is a DFE guidance. It's probably a good thing because they were saying 'Well hang on, yes it does have that… It gives some authority to it, I think, as a plan. (LA7 IRO, Low)

The increased focus on long-term foster care was said to have led in some local authorities to a more robust approach, which was accompanied by practical resources in terms of, in some cases, specialist staff and new tracking mechanisms, with fostering teams and IROs both also contributing.

> We have got more of a focus, we've now got somebody within the fostering team whose only role has been looking at long-term foster placements for children …We've got more of a robust oversight over it than probably would have done five, ten years ago… There's definitely more of a drive from fostering itself…They've been quite innovative in the way they've thought of new posts coming into place where they are looking at long-term foster placements for young people, the tracker that we've got…and the IROs… There's definitely a higher profile out there than there used to be. (LA25 CLA, Medium)

There was an emphasis in some local authorities not only on processes still being produced to reflect the regulations and guidance, but also on some tracking back to make 'permanent matches', establishing family finding practices more like adoption and considering the benefits of having a champion. Here credit was also given to the value of having local authority guidance on permanence, including long-term foster care, in one manual.

> I think there's been a lot of focus on achieving permanence, like getting the matches so that children know where they're going to be, so that they're not in limbo and you can say to them, 'This is where you'll be while you're in care, as long as you need to be'… I think in the last year they've really got through

and permanently matched a lot of children...We have a new permanency guidance issued in the summer, all in one sort of manual...They're looking to have a permanence champion. There's much more discussion with the IROs about their role in permanence, and there are family finders for fostering, like the adoption family finders. So those sorts of thing are making quite a difference in making matches for children and young people. (LA51 F, High)

Another fostering manager (below) also highlighted the benefits for local authorities who may not have previously had formal long-term foster care procedures, although saying 'we had done that prior to the change in legislation anyway'. However even in this local authority there were said to be advantages of the raised profile provided by the regulations and guidance in certain situations; for example, to support the case for an independent fostering agency (IFA) long-term foster care placements.

It was good to introduce that type of guidance to firm up everybody's thinking, and I think some local authorities who maybe didn't have a process in place have been encouraged to get one in place. So that's been helpful. I think it does probably at times help strengthen the argument for matching long term with IFAs...It is just something else that you can use whenever you are matching with an IFA. You are committing to that cost for quite a long period of time and so there is going to be some scrutiny around that decision making and therefore if you have got some quite clear legislation about what children need permanence and you need to achieve it in a certain way that helps that thinking. (LA91 F, Medium)

Finally, this IRO sums up the importance of combining a raised profile for long-term foster care as a permanence option with more robust decision making.

The regulations and guidance gave a clear route for legitimately accepting long-term foster care as an accepted route to permanence, but making sure that it is not taken lightly. (LA104 IRO, High)

Alongside a great deal of positivity about the impact of the regulations and guidance there was still some negativity and pessimism about long-term foster care as an option that came across in the language used. This negativity was often in terms of concern about the child remaining in care, even with a committed long-term foster family, and still being subject to a long-term 'statutory intervention'.

We don't want children to be subject to a statutory intervention until eighteen. (LA79 CLA, High)

A fostering manager from another local authority also focused on 'statutory intervention' as undesirable, seeing an increase in long-term foster care as negative in itself and also because it may impact on adoption.

I think [long-term foster care] is being used a lot, and sometimes I wonder if it's being used to the detriment of adoption, when I think about how long some children will spend in the care system with statutory intervention in their lives. (LA51 FM, High)

In these examples, it can be seen that some managers in authorities with high rates of long-term foster care raised concerns about long-term foster care, while for other it was seen as positive.

It was rare to suggest that a local authority as a whole was not comfortable with the idea of long-term foster care as a permanence option, but this manager (below) suggested this was the case in her employing authority, both because long-term foster care was not legal permanence and because it could be taken for granted that the majority of young people would go home.

[LA 34] doesn't recognise long-term fostering as a permanent option. It recognises it as a significant and important option but there is no permanency about it because unless there's legal permanency, we would always be pushing for rehabilitation to family. And the basis of that is the understanding that the majority of children do drift back to their birth families. Whether that's to live or certainly to have more contact and communication post 16. Post 18 it's even higher, we know that children drift back, even if they've got good relationships and embedded relationships with foster carers… Our permanency plans are adoption or SGO. (LA34 F, Low)

One of the concerns shared by a number of local authorities about long-term foster care as a permanence option was that their practices were sometimes giving 'mixed messages' to children and families. Although there was a focus on a commitment to permanence, it was a concern that this was too often accompanied by an expectation of regular reviews of the plan and consideration of reunification. Some managers talked about the need to avoid the explicit question 'Why is the child not able to return home?' at reviews. But the practice and context was often more complex and subject to external pressures, for example regarding reducing the numbers of children in care.

We're just kind of getting mixed messages really about promoting permanence and then negating it at regular intervals afterwards, which must be very confusing as a child, and for the carer…It's already difficult for some children and young people to be matched permanently, or know they're not going home, and we ask whether they are going home. (LA51 F, High)

There were challenges to the long-term plan that could come from the young person or changes in the birth family, so that working with long-term foster care placements will often and perhaps inevitably mean working with elements of uncertainty.

There are cases where it is a bit tricky because reunification might be considered and you can never really rule it out because circumstances might

drastically change for parents and you might get a fourteen-year-old saying, 'Well hang on, I want to be at home' and you might have always had a plan of long-term foster care, but you can't suddenly not look at mum and dad. (LA53 CLA Medium)

Most managers accepted that it was not possible to rule out all consideration of reunification. But nevertheless where a court had made a decision that a child could not return home and a care plan for long-term foster care was agreed then the local authority would need to work to make it a success, including promoting positive foster and birth family relationships. This looked after children manager felt that clarity from the court about the long-term foster care permanence plan was helpful, but recognised that however clear a care plan, for some children feelings may still be complex.

When courts make that decision, children have to have that information shared with them in a way that they can understand…Whether they all fully take it on board - I would suspect there are still some children that despite being permanently matched with the foster carer have still got a desire to return to the birth family and always a little bit of a hope in the back of their mind that it's okay because it might happen one day. (LA79 CLA, High)

This was another example where a manager in a local authority that was a high user of long-term foster care nevertheless recognised the difficult and often mixed feelings of young people about the permanence decision, which would demand a sensitive response from foster carers, social workers and IROs, as well as support for the birth family.

Choosing a long-term foster care plan

In choosing an appropriate permanence option for a child, local authorities are guided by the legislation, including the Children Act 1989, the Adoption and Children Act 2002 and regularly updated guidance (Department for Education, 2015, 2021). Although permanence options are not presented as hierarchy, there will be a preference for reunification or placements with relatives, ideally with the legal provision of a special guardianship order. Although there is also no official hierarchy for placements for children who cannot be placed with their family, there can be seen to be pressures at national and local authority levels to, for example, choose permanence options supported by legal orders (e.g. adoption and special guardianship) over long-term foster care, where a legal order was possible and appropriate. Most local authorities therefore did have a more or less explicit order in which options would be considered and criteria for choosing between each option.

The choices were often based not only on policy and guidance, but also on beliefs about the quality and stability of different options, as also discussed above. There were views, for example, about the likely quality of parenting, suggesting, in this example, that placements with family or in adoption had 'stronger' attachments.

It's always a balance… even though we know adoptive placements break down, the bond that tie an adoptive placement and a kinship placement are generally stronger, the emotional attachment becomes stronger… if there's that sense of parental responsibility for that child…there is a lower rate of breakdown. (LA53 CLA, Medium)

The language used to explain placement preferences revealed a particular view of long-term foster carers e.g. in the quote above as an absence of a 'sense of parental responsibility' and below as not 'wanting to parent':

We try for adoption and try nationally as well and where we don't have kind of people that want to parent those children, then we do try and look for longer term foster care options. (LA57 F, Medium)

Here the implied absence of a parental role for foster carers rather than the absence of legal parental responsibility seemed to define how long-term foster care was viewed.

One key issue in comparing permanence options was whether the fact that long-term foster care is often reached sequentially as a permanence option, after others have been ruled out, necessarily meant that it should be seen negatively as 'a last resort' or 'lesser option'. This attitude was commented on by some local authority managers.

I think in my view that long term fostering is seen as a sort of a lesser option… We work towards adoption. We are thinking this child is older and the birth family connections are so strong that we cannot do adoption and there aren't any other family members, 'Oh they need to remain in care' and it becomes a plan of long-term fostering almost by default. (LA7 IRO, Low)

On the other hand, it was possible to find more positive approaches to long-term foster care that were said to depend on the culture and the attitudes and values of individual workers, in this case supervising social workers.

Some [foster carers] do feel long-term foster care is truly a permanent option and I think that's very much dependent upon the culture within a fostering service and how individual supervising social workers…have understood and embraced the importance of long-term fostering to promote stability and security for children in those fostering arrangements. (LA37 CLA, High)

Factors in permanence and long-term foster care decision-making

There were reported to be a number of current factors in choosing long-term foster care when deciding on a permanence care plan, with the following factors often interacting: the preference for a birth family placement; the child's age and history; sibling groups; ethnicity; the option of special guardianship.

The preference for a birth family placement
All local authorities described the processes they went through to ensure that the options for the child to be placed within the birth family had been fully explored. The consensus was that they had needed to become both more thorough and more time efficient about this process because of the requirements of the Public Law Outline pre-proceedings, the pressure of the 26 week limit on care proceedings and the increasing focus on the possibility of special guardianship orders for family members.

The perceived increased focus on the birth family meant that weighing up the options could include a local authority preferring the option of a child growing up in long-term foster care with a family member to adoption, with the benefit of a birth family 'bond' and a sense of belonging.

> If you have a kinship carer who could offer a placement to a child and it might mean that they are looked after for the rest of their childhood that would always be seen certainly as preferable to adoption, because you would be maintaining their identity, maintaining their birth family link. So if we can keep the child with their family that is the number one. If that eventually does progress to special guardianship...then that would be the ideal goal, but even if this kinship carer is always going to need our support and the child will have a social worker until they are eighteen that would always be prioritised over adoption...With kinship care you have that family bond, you are keeping a child with their family where they belong (LA53 CLA, Medium)

The role of birth parents in care planning and the associated practice when children were to be placed outside of the birth family was not always clear in the surveys and interviews. Attendance at different key meetings (discussed in the next chapter) might be one kind of indicator of participation, but face to face work with parents would also need to be occurring outside of meetings. One priority was to recognise the impact of a range of factors on a parent's attitude to a long-term foster care plan.

> We take the parent'sviews into account as well. And their cultural and religious sort of identity as well, where permanence might not be a desired outcome for that certain culture, as adopting is for some cultures. (LA66 FM, High)

There will be a discussion in the following chapter of support plans, but the valuing of a child's birth family ties would need to be reflected in the care and support plans.

Age

The survey results on the age at which long-term foster care plans would be made suggested that these plans in non-kinship foster care would be made by the majority of local authorities for older children of all ages, including 15 plus, but were much less likely to be made for children under 5, and especially under 2. This reflects the actual figures, discussed in the previous chapter, from the Department for Education.

		0-2 years	3-5 years	6-10 years	11-14 years	15-17 years
N	Yes	22	43	82	91	85
	%	23.2	45.3	86.3	95.8	89.5

N=95 (15 missing data)

For family and friends long-term foster care placements, the situation was reversed, with the greatest likelihood being for children under 2.

		0-2 years	3-5 years	6-10 years	11-14 years	15-17 years
N	Yes	70	56	65	63	55
	%	73.7	58.9	68.4	66.3	57.9

The age at which adoption was considered possible or likely affected the numbers of children at the boundary who may be placed for adoption or long-term foster care.

> We do adoptions at eight, nine, ten. I think the oldest we did is 13. But actually, over the years, I think it's getting harder to do, find (adoption) placements with children that are probably, I would have said over six, historically, but I'd say over about four or five now. (LA104 CLA, High)

A number of local authorities expressed concern that courts were making long-term foster care plans for more children under age 5, although these were still small in number.

> I think what has surprised me professionally is the number of plans for children where the court have agreed long-term care orders without Placement Orders on children that are extremely young … even just a few where children are five and under. (LA57 F, Medium)

Where a long-term foster care plan was made for a sibling group involving young children this had the effect of requiring a timely and effective matching process, even where long-term foster care would not have been their first choice of plan.

> It almost feels very, very difficult to be looking at plans of long-term fostering and that hastens our need for really quick and good kind of matching and planning when they are that young. (LA57 F, Medium)

However, it was accepted that additional needs, even in young children, also played a part in permanence decision making.

> There are cases where plans have been agreed for younger children to be in long-term foster care, but it is generally because they have such significant additional needs that we know that adoption wouldn't be viable for them. (LA53 CLA, Medium)

Troubled behaviour and histories of trauma, even in young children, combined with the wish to place a sibling group together (discussed further below) were also said to be making it more difficult to recruit adoptive parents and therefore to put a realistic adoption plan to the court.

> I think it's a number of factors [influencing the court decision], but I also would suggest that my experience is that with some of those younger children (and it is a handful, I'm not talking about a majority), the children's behaviour is so distressing and the trauma that they've experienced even at a very early age, when their profiles are then compiled and looked at, that we haven't got people stepping forward to take on a sibling group of three children. (LA57 F, Medium)

Age was also seen as affecting how well children of different ages in a sibling group would form new attachments in adoption, often because of ties to their birth parents.

> There is a greater likelihood that a younger child will be able to make those attachments than potentially say a child who has got a very strong identity with birth parents...If they are eight, nine ten years old you are not likely to achieve the same kind of permanence for them via one of those options. (LA53 CLA, Medium)

This manager gave an example where placing a sibling group of three for adoption had not worked out for the eldest sibling (aged 8).

> She knew who her mum was, she knew who dad was, she knew who her birth family were and we are asking her to start calling this person mum and start having this whole new family identity and it was just too much for her. (LA53 CLA, Medium)

The question of how birth family identity is managed and maintained for an older child is also, of course, an issue in long-term foster care, but long-term foster care, which is more likely to have the benefit of direct contact with family members, can offer a different and probably more open way of managing multiple family identities and relationships.

It was seen by managers in this study as being important to remain open to both adoption and long-term fostering for older children and sibling groups, as discussed below. But practice always has to be sensitive to the individual needs of all older children, through procedures and practice at the point of care planning but also later in placement.

Age was also a factor in the way in which children's views were taken into account, with older children's voices at times making the difference between adoption and fostering plans.

> And depending on the age of the children, that could be through special guardianship, through adoption and for older children, where adoption may not be an option, then long-term fostering is an option that we do pursue. We are looking at children where permanence options of special guardianship order or adoption have either been explored and have not been achieved or where the child themselves are saying, "I don't want to be adopted, I want to remain with my carers." Obviously, work is done around that. (LA66 F, High)

Although local authorities might then wish to make a formal arrangement for long-term foster care as permanence, children's views would need to be taken into account, including where older children had expectations of returning to the birth family.

> Wherever possible, we'd want to achieve permanence via permanent foster care. But when they're older, and children may say, "I don't want to be permanently fostered because I'm going to be 17 and I want to go home," or whatever. So we do take children's views into account. (LA66 F, High)

Sibling groups
Decisions about permanent placements for sibling groups are some of the most difficult facing children's social workers and managers - and courts. It is often in these cases that the different nature and implications of both long-term fostering and adoption are having to be weighed most carefully. The decisions about permanence care plans for siblings preoccupied local authorities in this study as in other studies of care planning (Schofield et al, 2008; Masson et al, 2019). These decisions often have to take into account not only the siblings in care who need a permanence plan, but also other siblings already adopted or still at home

The principle of keeping siblings together, if assessment suggests this is in the children's best interests, is usually explicit in care planning, as this IRO manager explains, and it is clearly set out in the Children Act 1989 and subsequent legislation and guidance (Department for Education 2015, 2021).

> We start from the premise that whenever possible we want to keep siblings together. It depends on the child's assessed needs. (LA14 IRO, Low)

But in addition to the legislation and guidance, there was a frequently stated belief in the significance of sibling relationships across the lifespan.

> That sibling relationship is going to be lifelong and endure much longer than any other kind of relationship potentially...They'll be siblings for life...how are they going to keep that kind of relationship alive? (LA49 IRO, Medium)

Although sibling relationships were valued by local authorities, they would still usually prefer to place younger children in a sibling group for adoption, even if that meant separation. This manager was cautious about whether long-term foster care placements were stable enough to be worth the risk for younger children in sibling groups who could otherwise be adopted.

> I think there will be a push to keep sibling groups together [but] I don't think long term foster caring is the right choice for those younger children unless it's with carers that you can have absolute confidence in their commitment and be clear why they weren't seeking that legal permanence and a condition to make that commitment to the children. But it is a difficult one. I think adoption will always have its place for those younger children because you can't promise that stability. (LA30 CLA, Medium)

There were some perceptions that courts had increasing concerns about the potential loss of sibling relationships when siblings were separated

> Sometimes the courts say no to splitting young children in a sibling group. It probably is getting harder to do. (LA104 CLA, High)

These concerns were therefore said to be contributing to recommendations for long-term foster care for young children in sibling groups who might previously have been adopted.

> That's an area where things are changing with the court's approach. We are seeing the courts taking the view of sibling relationship being a defining feature for recommending long-term fostering as distinct to adoption because of the potential loss of that sibling relationship...I think we are certainly seeing more of a steer from the courts coming from that direction...I would say it has an influence [on young children remaining in foster care] yes. I think it is beginning to. (LA44 IRO, Medium)

There seemed to be a perception of general lack of trust by courts in future sibling contact being maintained in adoption, though this was a concern also expressed by managers.

Often there were tensions within a local authority, including between social workers and IROs, and with courts over care plan recommendations for sibling groups.

Courts have sometimes made a plan for long term foster care rather than adoption, even for very young children to ensure contact continues. We've had situations like that...We proposed a plan for adoption for a sibling group over twelve months ago... The IRO service contested that plan because that would have meant severance of ties with a relatively large sibling group...Realistically no way would we find an adoptive family for all the siblings to live together. Because of the individual needs of the children...I think the court went for a plan of long-term fostering because it would enable some of the siblings to be placed together and to enable them to have ongoing contact. (LA79 CLA, High)

A strong case therefore had to be made where separation was the recommendation. One manager described making a case to place a young infant for adoption, even though this involved separation from an 11-year-old sibling with strong birth family ties, rather than long-term foster care.

My view was that the 11-year-old, within five or six years, was likely to be making moves to go back home, and then actually you've left a sibling, a baby, in long term foster care, with potentially no sibling relationship, at that point, or a disjointed sibling relationship...I argued, quite strongly, that the baby should go for adoption. And he did. And actually, there was another baby born, and they are now in an adoption placement together. (LA60 F, Low)

However, there were different situations where an equally strong case had to be made to keep a sibling group together in long-term foster care. This fostering manager described defending a long-term foster care plan to keep siblings together, including a young child, where all the signs were positive and where the children were already with committed carers so that there could be more confidence in the plan.

In the past we had a sibling group of three boys, and the youngest sibling was two...An assessment was done around whether the siblings should remain together or whether they should be separated. And the assessment concluded the three boys were living with foster carers and had been from the moment they came into care and the foster carers were willing and wanting to keep the three boys together and parent them as a sibling group. And that's what we did. So there will be times and it'd have to be a robust assessment really and a process that is well-planned and very carefully considered. (LA66 F, High)

Assessment is a core element in decision making for siblings needing permanent placements. A number of issues were said to need careful assessment regarding placing siblings together, including experiences of trauma.

If the assessment is clearly indicating that they can remain together and that's in their best interest, that's what we would be pushing for...It's entirely based on sibling assessments. But often with the large sibling groups, you're actually talking about children having very different and diverse needs and different levels of experiential trauma that need to be taken into consideration. (LA34 F, Low)

Troubled behaviours, even in young children, combined with the demands of caring for a sibling group reduced the likelihood of being able to place children together.

> What we face more often is where there is a view that the children can't be together, because together they are posing a significant challenge to the carer and the placement is at risk of breaking down. There is a view that the carer could cope with perhaps one or two of a sibling group but not all of them... We are weighing up the benefits for the child and all the children of remaining together, potentially having a placement change but remaining together, or being separated and having stability for some of the children...I think it is quite challenging weighing up the evidence ...We are more minded to separate and try and provide as much stability as we can for some of them. (LA64 IRO, High)

For these complex assessments, there was widespread reliance on 'Together or Apart' a practice guide produced by CoramBAAF (Lord and Borthwick, 2008).

> We would consider both the children and their needs and their relationship and there would be a sibling assessment- a Together or Apart assessment. (LA33 F, Low)

But even given this agreed protocol, there were some concerns that the assessment and recommendations might still be influenced by workers' own values, which is perhaps inevitable in this contested area.

In the following local authority, the IRO manager described trying to take a nuanced approach to sibling assessments.

> We quite often do sibling assessments which we don't call Together or Apart assessments anymore because that implies there's only one or two choices. But we talk about the quality of the sibling relationship and how that is best promoted for the rest of the child's life. So that may mean them living together but that may mean them spending part of their time together or it may mean them living apart but having a high level of contact or not, depending on their needs...Certainly at the point that they come into care we would be trying to keep them together until we've had time to complete that assessment. (LA14 IRO, Low)

CoramBAAF have published a revised good practice guide with the title *Beyond Together or Apart: Planning for, assessing and placing sibling groups* (Beckett, 2018) which reflected this flexible approach by focusing not only on the placement decision, but also on ways of both offering appropriate support if siblings were together in any placement and maintaining relationships if they were in separate placements, whether in adoption or long-term foster care.

The question of maintaining and in some cases building rewarding sibling relationships while achieving stable, secure placements that maximise the development of each child raises important issues for practice in long-term foster care, adoption and special guardianship. Areas of practice and associated resources, such as support for sibling contact, were mentioned as essential to consider and develop, especially where one sibling was adopted. High quality and in-depth assessment was said to be a crucial starting point for decision-making, but corporate, judicial and individual practitioners' values regarding each placement option and the role of sibling relationships are likely to play a part.

Ethnicity
Ethnicity was not perceived by managers to be a major factor in itself in selecting long-term foster care plan for permanence, but there were cases in which culture and ethnicity might make a difference, in particular attitudes to adoption or availability of adopters, where long-term foster care or special guardianship may be recommended.

Although managers did not generally perceive ethnicity to be a major factor, the analysis of the Department for Education data (discussed in Chapter 3) showed that a child's ethnicity was an important predictor of being coded as being in long-term foster care, with all minority ethnic groups being less likely to be in coded long-term foster care (versus short-term foster care) compared to white children. The reasons why ethnic minority children were less likely to be coded in long-term foster care are not possible to ascertain from the data and a number of explanations are possible. For example, children from ethnic minority groups may be overlooked for this permanency route or local authorities may experience challenges in matching ethnic minority children with long-term carers. Concerns about the rates of adoption of ethnic minority children have been recently highlighted (Department for Education, 2021), and further investigations of the use of long-term foster care for minority ethnic children is also an important topic for future research.

The option of special guardianship
The introduction of special guardianship orders (SGOs) in the Adoption and Children Act 2002 has had a major impact on how both kinship and non-kinship long-term foster care placements are planned and thought of as a permanence option. Issues regarding special guardianship featured widely in surveys and interviews for this study. SGOs have become particularly important in the context of providing a legal order giving parental responsibility to family members or to foster carers that is short of adoption. But an SGO for a foster carer will have wider implications in terms of children being taken out of the care system and a likely long-term foster care placement, while they and their caregivers often still need high levels of support.

Research on special guardianship has driven developments in practice in the courts and for local authorities during the period of this study (Harwin and Simmonds, 2019). In particular, the caregiving relationship between the carers and the child must have existed for a one-year period before a legal order is made, as it would be in adoption, to ensure this is the right placement match and legal arrangement.

Now... there have been serious case reviews... I think everybody feels that that period of time of looking after the child is necessary first before you could actually grant legal guardianship to the carers. (LA53 CLA, Medium)

There was a common expectation in care plans that kinship placements in particular would lead to a special guardianship order, following a period of assessment.

We get lots of cases of kinship placements where the care plan says 'Kinship care with a view to SGO within six months, twelve months'... The kinship carers have got an expectation that that is something we would want to work towards, but we know that they need a bit of support and just testing out of the placement first. (LA53 CLA, Medium)

Although there is a practice requirement to make time in the plan to see how the caregiving relationship develops prior to seeking a final order, it was also said to be necessary for prospective special guardians to have the opportunity to take on board the reality of the commitment involved.

It's maybe your nephew and you think, 'Well okay I'll agree to that because I just want him in my care, I want this to all be over, I want to look after them'. And there's lots of information, there is lots of assessments going on. So what we often find is that once you actually sit down with a kinship carer and start talking about SGO they start to wobble about, 'Hang on well I am just going to be doing something, and what's the financial implications and what's the support going to be?'. (LA53 CLA, Medium)

At times, the policy and the practice decisions regarding special guardianship in preference to long-term foster care seemed to be influenced by what were said to be children's wishes.

We've got a lot of children who are long-term with connected carers, who we feel could well be cared for on SGOs, and the children themselves happier. They don't want to be looked after... For a lot of those children, if you keep it child focused, what we're trying to say is the children would rather not have a social worker, they would rather not have looked after meetings, they'd rather not have somebody coming into school to do a PEP [Personal Education Plan]. We're trying to put it very much from the child's point of view. [LA12 CLA, High]

An SGO was seen by one IRO manager as offering a pathway that was more consistent with 'rights to family life', suggesting that foster families cannot easily provide this under the umbrella of 'state intervention'.

There are certainly cases where that (long-term foster care) happens, but equally there are at times compelling reasons in terms of basic human rights and rights to family life and all of those things in terms of why an SGO order would be deemed the best option for that child because obviously long-term foster care reflects ongoing state interventions for that child. (LA29 IRO, High)

The approach described here was negative about children growing up in long-term foster care, but there could be some attempt at balance, with long-term fostering being described as a 'good family option'.

> Ideally we don't want children looked after for long periods of time and we want them to have people who are able to act appropriately and be guardians for them, but that's not always possible. And for us, a clear, a good family option where you need to continue to provide a high level of support may need to be long-term fostering rather than guardianship. (LA13 CLA, Low)

These two quotations illustrate how in both high and low use local authorities there was a constant balancing of the benefits and risks of different options for a particular child and the need for professional judgement.

This IRO manager and others were advocating a case-by-case approach to deciding between long-term foster care and special guardianship, especially in cases where carers wanted and needed extra support for a particular child.

> What IROs are constantly encouraged to do is to make sure that the decision-making for individual children is anchored to the needs of individual children, decisions are not being unduly swayed by a generic statement or view by the local authority, and it is properly evidenced for that child...Sometimes if they are caring for a child with a significant complexity around perhaps the level of trauma experienced by the child... sometimes carers will want the ongoing support of foster care, continuation of the child and supervising social worker, and all of those things. (LA29 IRO, High)

This fostering manager supported the principle that special guardianship should be a choice, but would promote SGOs when the children in care were young or without additional needs.

> Sometimes some kinship carers may want to go for an SGO and move on in that way or remain a foster carer depending on the children's needs and we support them. If they want to remain fostering or if they want to do an SGO then we will do that and move them on...We only encourage SGOs especially if they have children that are younger with not many needs, but if there is a child that has needs and would need the support or if there is contact issues and things that would be helpful then we wouldn't encourage them for an SGO. (LA33 F, Low)

Most local authorities were also keen for non-kinship foster carers to move to special guardianship where appropriate and were willing to develop support packages so that this could be an option.

> We do try and encourage both connected persons and our internal foster carers [to become special guardians]. At the end of the day, if you've got a long-term match, we'd probably prefer to see you as an SGO, as a special guardian, or try to arrange an order. And we try and be flexible to make it that there's

the support package around it...We could still carry on doing supervising the contact, for example. Financially, you shouldn't lose out from it. But do you really need the relationship with the social worker or a fostering social worker? Maybe not. (LA104 CLA, High)

In order to increase the take up of special guardianship by non-family and friends carers, it was suggested that it should be mentioned as a possibility for the care plan as soon as a match is secure.

> It does happen yes...not as often as we probably would like...Most foster carers who do get approved as long-term foster carers in the first place...they don't go into this thinking 'we are going to be special guardians'...One of the things I am asking IROs to do actually is when there is a long-term foster placement match that is secure, is to ask the question 'Could we convert this to a special guardianship?' (LA7 IRO, Low)

Where local authorities had a positive experience of foster carers taking up special guardianship this was linked to resources that continued elements of support available for them as local authority carers, such as training and a specialist SGO support team

> It's been really successful here. [I think because] these carers are confident that they won't just be out there on their own. (LA30 CLA, Medium)

Special guardianship for long-term foster carers was often seen as important to consider where a sibling group was concerned and even more so when there was a younger child. In one example, managers explained that they would have gone through extensive processes first to try to identify adopters for the sibling group but would then be expecting a long-term foster carer to consider moving to an SGO. For this sibling group (below) targeted support and not rushing the family seems to have been helpful.

> We're trying to use legal permanence with foster carers wherever it's suitable to do so. We've got a case that's just about to go into special guardianship with their foster carers together... The youngest was nearly 3 and the eldest sibling was 9 at the point of placement in a sibling group of three. We've supported it as a long-term fostering placement for nearly two years and now we're just seeking special guardianship and that's always been our plan... We've been able to work with the carers and in terms of therapy and all those things... They are a family and everything is in place for them to try without our involvement. (LA 30 CLA, Medium)

It was significant here that resources were put in to support the special guardianship plan over a two-year period in long-term foster care – to ensure that therapy was provided to address any emotional and behaviour difficulties and to work towards being a family. This example highlighted the importance of investment early in the placement to increase security and stability and to give the carers and the children enough confidence in a future together, whether they continue as a long-term foster family or decide to take up the legal option of applying for special guardianship.

Conclusion

This chapter suggests that there has generally been a positive impact of the regulations and guidance on attitudes to long-term foster care. But it also shows the challenges of establishing long-term foster care as a positive permanence option alongside other options.

The survey and interview data provided insights into the factors and issues that affect attitudes and the choice of long-term foster care as a permanence option for each child, especially the implications of taking account of age, history and whether a child is part of a sibling group. These are dilemmas recognised in previous research (Schofield et al 2008, 2011), but the option of special guardianship is adding both a new opportunity but also extra complexity to the approach to be taken to achieve permanence. With a range of options available, a case-by-case approach was seen as essential with both good assessments of children's needs and appropriate support on offer for all options.

Summary

Terminology
- The majority of local authorities (75%) used the term 'long-term foster care'. Just 9% used the term 'permanent foster care'. For some using the term 'permanent foster care' was about emphasising the link to permanence and managers seemed unaware of the official use of the term long-term foster care in the regulations. For others the term 'permanent foster care' was an explicit rejection of the words 'long-term'.
- 16% of local authorities used the two terms 'long-term' and 'permanent' interchangeably. Unlike in the survey conducted by Schofield et al (2008), however, there was no evidence of official twin track and separate long-term and permanent foster care systems in the survey.
- However, there was some suggestion in at least one local authority where the term 'permanent foster care' had been adopted that in practice the term 'long-term foster care' was still used for those cases which did not go through the formal matching procedures. Having both 'permanent' and 'long-term foster care' as separate types of placement was previously found to create a further hierarchy of placements (Schofield et al 2008) and is not consistent with the regulations.

The meanings attached to long-term foster care as explained to children and carers
- Explanations to children about long-term foster care were often said to be in the context of managing or avoiding the term 'permanence' while trying to capture its meaning, in both length of time and the security of the child's place in the foster family.

- Explanations to carers included the same emphasis on the importance of the child becoming part of the foster family, while maintaining positive relationships with birth relatives where possible. There was some emphasis on the expectation of family membership and support for the young person post 18.
- Carers were often said to prefer the term 'long-term foster care' to 'permanent foster care' because of parallels with adoption, their role as foster carers, the need for support from local authority and the ongoing role of the birth family.

The impact of the regulations and guidance on the status of long-term foster care

- The majority of local authorities spoke of a range of ways in which there had been benefits from the introduction of the regulations and guidance, primarily as leading to a cultural change which helped staff to be more positive about 'long-term foster care as a permanence option, but also as leading to more robust procedures for care planning and matching.
- However, there was still some negativity, with long-term foster care associated with drift or seen as a default option, even when new procedures had been introduced. Concerns were also expressed about the stigma of children growing up in care which led to their preference for legal permanence through adoption or SGO.
- Practical challenges were raised such as the availability of long-term foster carers and the risks of instability or children choosing to return home in adolescence.
- For some local authorities, good practice in long-term foster care had been confirmed by the regulations and guidance; for others new practice and procedures had been introduced; but for yet others there seemed to be some delay or even resistance to moving forward.

Factors in choosing long-term foster care as a permanence option

- There was a hierarchy of permanence options linked to legislation, with reunification as first choice followed by family and friends care, ideally supported by a special guardianship order. For children placed outside their family, there was then a preference for legal permanence through adoption or special guardianship, also driven by national policy, but there were concerns that long-term foster care could therefore be seen negatively as a last resort.
- Because reunification with the birth family was the placement of choice, all efforts had to have been made to work with parents to achieve change and also to assess birth relatives as potential permanent caregivers. There were concerns that this latter process could be rushed because of court timetables.
- For children to be placed outside their family, age was the key factor that could reduce the likelihood of adoption and lead to a long-term foster care plan, with adoption primarily being for under fives. For children aged around 5-8 there might be parallel plans and the wait for an adoption match might lead to a delay in making the long-term foster care decision. Age would also affect long-term foster care decisions, practice and processes, as discussed in later chapters, given the range of children up to fifteen-year-olds for whom this was the chosen care plan for permanence.

- Age also interacted with sibling group membership, with significant practice dilemmas over the decision whether to recommend placing a younger sibling for adoption and older siblings in long-term foster care. This is not a new dilemma and has challenged practitioners since the 1980s when permanence practice developed.
- But there were some suggestions that courts had a renewed emphasis on sibling relationships and that the profile of long-term foster care might mean that sibling groups including infants would be placed together in foster care when this might not be beneficial in the longer term. It was however reported that clear arguments for either keeping siblings together or for separation of siblings were accepted by courts. Local authorities were also trying to focus on achieving better contact between siblings where one had been adopted and others were in long-term foster care or with birth relatives.
- Special guardianship has had a major impact on planning for permanence with both extended family members and non-family member foster carers, although there is an expectation that most relatives will choose special guardianship over long-term foster care in the medium or longer term. But it was important to ensure that potential special guardians understood the child's needs and the long-term commitment.
- What was more difficult to ascertain was the extent to which this was a free choice for foster carers or whether there was some pressure to take a legal order. Most managers, however, defended the importance of carers having a choice and accepted that there were children and foster families for whom long-term foster care might be the best option.
- It was recognised that for both family and friends carers and other foster carers the question of financial and other support, including psychological and post-18 support for the placement, was an important factor. For foster carers the change of role might affect not only their identity and their relationship with this particular child but also their relationship with other or future foster children in the family.
- Overall, it was clear that operating a hierarchy of permanence options could make it challenging for local authorities to choose and value long-term foster care. However it was accepted that long-term foster care had to be made to work well as a positive permanence option as it was the option for many children in their care who would not be returning home or leaving care under a legal order such as adoption or SGO. Decision making and support therefore had to be founded on the best possible assessments and available resources.

6

Care planning procedures and practice in long-term foster care

A key motivating factor in the development of the long-term foster care regulations and guidance was to ensure that local authority care planning not only positioned long-term foster care appropriately as a legitimate permanence option, as discussed in the previous chapter, but also had procedures in place to ensure that good practice was established. The principles for what constituted good practice are set out in the regulations and guidance and were underpinned by previous Children Act 1989 care planning guidance and research, and also consulted on through a Department for Education led multi-agency expert working group (2013-15). In this chapter the choice of a long-term foster care permanence plan, discussed in principle in the previous chapter, is looked at in terms of the processes and procedures used by local authorities to make decisions about this plan.

Care planning can be divided into three stages: the initial permanence decision for a long-term foster care plan for the child; the process of matching the child and the foster carers; the agreement of a support plan. Matching and support planning will be dealt with in the following chapter, with this chapter focussing on the initial care planning.

To illustrate the pathways of care planning, the volume of care planning guidance that includes the long-term foster care guidance provides a diagram titled 'overview of the care planning, placement and review process'(Department for Education, 2015:168; also in updated edition, Department for Education, 2021:175) However, when the pathway gets to the permanence plan, the next step on the pathway is 'leaving care', unfortunately appearing to exclude long-term foster care as a permanence option. This appears to be a specific drafting error, but to some extent reflects the tendency for policy documents to slip into thinking of permanence as being outside of the care system.

Good practice principles for care planning

The good practice principles behind care planning decisions for any permanence option, including long-term foster care, and the procedures that support them are set out in the regulations and guidance. In summary these include:

- Working with the child, including building a relationship, undertaking an assessment, ascertaining their wishes and feelings, involving them in decision making and preparing them for the possible future.
- Working with and gathering information from foster carers, birth relatives and a range of agencies on all aspects of the child's history, development, culture, identity and needs for the future.
- Ensuring that systems provide effective permanence care planning for the child's well-being through to adulthood.

These principles are, of course, in themselves complex. There are practice challenges in working with the child to reflect on their past and possible futures, cognitively and emotionally. There are also multiple definitions and sources of information about a child's wellbeing. Then there is the task of managing the multiple modes of consultation and forums for decision making. The regulations and guidance do offer a detailed framework, but the nature of practice requires both professional skills and knowledge.

There is explicit guidance (Department for Education, 2015b p14-15, S1.10-1.14) for good practice with the child that reinforces the requirements from the 1989 Children Act Section 22(4); for example, a reiteration of the link with Article 12 of the United Nations Convention on the Rights of the Child, ascertaining children's wishes and feelings and giving them 'due consideration, having regard to the child's age and understanding'. This is further explained as not only practice that upholds the rights of the child, but is essential to good decision making:

> There are further practical reasons for ascertaining a child's wishes and feelings during the care planning, placement and review process: many children have an understanding of what is causing their problems and what underlies their needs; they may have insight into what might or might not work in the context of their current circumstances and environment; they often know what sort of support they would most value and be able to access; and engaging children helps to recognise their difficulties, develop their strengths and promote their resilience. (Department for Education, 2015b p15, S1.12)

Essential to the success of long-term foster care is, therefore, to use the local authority's corporate parenting role to support the child and the guidance makes two key points about this.

> The role of the corporate parent is to act as the best possible parent for each child they look after and to advocate on his/her behalf to secure the best possible outcomes.

However, they cannot fulfil this responsibility without the full co-operation and support of a range of other agencies which provide services to children and their families. (Department for Education, 2015b p15-16, S1.15, S1.16)

As Bullock et al (2006) in their article titled 'Can the corporate state parent?' pointed out, the role of local authority as corporate parent is especially challenging in long-term foster care, as it can only provide a broad framework or context for the day-to-day parenting, the loving and looking after, that has to be available for the child within the foster home and foster family. So the care plan needs to combine both the statutory and organisational responsibilities for the 'best possible outcomes' that the corporate parent can provide, through, for example, health and education resources, with sensitive support for the child, the foster family and the birth family to promote the child's day to day experience of being loved, nurtured and belonging, including showing respect for the child's ethnicity, identity and culture.

As we looked at the detail of care planning pathways in different local authorities it was helpful to reflect on what had been learned from previous research (Beek and Schofield, 2004; Schofield et al, 2008, 2011), in particular about the importance of having systems that are rigorous in setting clear standards for practice, but flexible and child-centred, given that a plan for long-term foster care may be considered for children of all ages, histories, needs and birth family relationships.

Finally, it was important to reflect on what the SSDA903 data analysis was saying about the differences between local authorities and how that might inform/interact with what we know from the survey and interviews about care planning procedures and matching. The range of local authorities in terms of rates of long-term foster care will be noted here as in the previous chapter by indicating whether the quotation is from a manager in a high, medium or low user local authority.

Systems for care planning and decision making

As discussed in the previous chapter, the perceived positive impact of the regulations and guidance in many local authorities included raising the profile of long-term foster care and supporting more robust procedures for planning and matching. However, there was also evidence of some concerns and negativity about long-term foster care as a permanence option – and some delays in implementing the regulations and guidance and procedures.

In the route through care planning systems to a final, formal confirmation of a child's placement as long-term foster care, most local authorities included some combination of the following: informal professional discussions before or once a child is in care; looked after children review; a care plan recommendation for long-term foster care in care proceedings - either solely or as part of parallel care plans; permanence planning panel; tracking panel; resource panel (for independent fostering agency placements); fostering or adoption and permanence panel; senior manager/agency decision maker (ADM).

As discussed in this chapter, these planning mechanisms can occur in a varied order e.g. in some local authorities the ADM may be involved in signing off a care plan for court at an early stage as well as confirming the match and recording the placement as long-term foster care at the end of the process. Alongside these procedures is going to be a range of practice at different stages: work with the child, including life-story work; work with foster carers and birth families; assessments from a range of professionals; foster carer recruitment; and the nature of participation by children, families and members of the multi-agency network in each panel or decision-making forum.

Managers described care planning systems which included a structure of decision-making meetings or panels, often with different membership and functions, as in this example.

> We set up a permanency service and they are responsible at the moment for chairing PPMs (permanency planning meetings) for children across the services to give a consistency of planning and an independence in the teams, to be thinking about it from the child's perspective...and tracking and monitoring that we're achieving that for them. There's a permanency tracking group that sits above that. (LA24 IRO, High)

The need to clarify the role of each meeting is evident here to avoid duplication, for example between the permanency planning meeting and the looked after children review, with some differences in timing, who attends each meeting, as well as the powers that each has to make recommendations or decisions.

The stages of care planning
There was therefore a combination of informal and formal, statutory and locally devised systems for working towards a care plan, but local authorities were keen to stress the importance of thinking about likely permanence outcomes at an early stage.

> You're thinking about permanence from day one. (LA10 CLA & F, High)

The earliest stages of the discussion about permanence options and plans between social workers and managers were described as beginning in some cases at the Public Law Outline (PLO) stage when care proceedings were being considered. This IRO manager emphasised that a key part of the process for thinking through the child's needs in relation to permanence lay in the focus on early assessments prior to being looked after.

> We're trying to achieve clear processes for a clear focus on the permanency option being sought for the child right from the point that the child becomes looked after - so robust assessments prior to a child becoming looked after, so that any alternative options have been considered. This should lead to greater clarity at the point that the child does become looked after what options are you working through...Is there a possibility of rehabilitation? What's the range of options within the wider family? If not, depending on the age of the child, is

adoption a consideration? …Working through as you would expect from all of those options, there will be a kind of combination of factors that will have to be considered …You are working through assessment processes to both consider either to agree or rule out certain options and you've got your clear evidence or rationale for doing that. (LA 104 IRO, High)

Where long-term foster care was being considered as a permanence option, the regulations and guidance were seen by this same IRO manager to have helped both in clarifying the principles and supporting procedures. And (as quoted above) 'making sure that it is not taken lightly' (LA 104 IRO, High).

In some cases, it was not only long-term foster care as a permanence option that was being considered in principle at an early stage, but which foster carers might be a good match to offer a long-term placement to a particular child.

> Before a child comes into care we have an early permanency planning meeting and we have permanency planning meetings as we move through to work towards what the final permanency option is. When a child comes into care we are trying to match them with what could be their permanent foster carer very early, so I would say that permanent foster care is very much on our mind. Obviously not really for under-fives…but certainly over fives, sibling groups etc. that, that really is on our minds and it is a positive option. (LA 49 CLA, Medium)

Care planning processes prior to court, during pre-proceedings, are required both by law and guidance to take into account the priorities of supporting the birth family to enable reunification or making assessments for kinship care, possibly under an SGO. If birth family options were ruled out, then a case would need to be discussed, often with local authority legal representatives present, as to whether adoption or long-term foster care, with possibly an SGO sometime in the future, would be the most appropriate care plan. But as several managers described, there was a clear sense of commitment to permanency planning that included increased focus on long-term foster care planning since the regulations and guidance.

> Permanence planning has become a real strength…We have increased management oversight… Where adoption is not possible with our older children what we strive to do is to long-term match our children. (LA 78 CLA & F, Low)

It is interesting that the managers here are positive about long-term foster care but have relatively low recorded numbers. It could be that strength in permanence planning was recent and had not yet translated into agreed matches or that the new practice was not being reflected in systems for recording and coding.

So thinking about permanence was said to be happening early and for older children (above age 5 in most authorities) and sibling groups this thinking will include a focus on the option of long-term foster care. During or after court or for children accommodated under section 20, in cases where long-term foster care was likely to be the plan or was one of the twin track care plans, planning involved legal advisers.

Care planning meetings with the service lead, we would also have legal there and the case workers and those tend to happen on a regular basis. It's because care plans can change, especially when it's in proceedings. (LA 8 IRO, Low)

The majority of local authorities included senior management involvement in agreeing the plan.

The care plan has to be agreed by the team manager and the final care plan would be authorised by the Head of Service prior to the final care plan being submitted to court. (LA44 IRO, Medium)

In other authorities, the agency decision maker (ADM) was said to be required by the court to be involved at this early stage:

If the plan is long-term fostering we will then have all the necessary child permanence reports (CPR) and paperwork which would go to the agency decision maker to agree the plan...The court often want to know the ADM's decision, particularly if there is a dispute about it in court. (LA7 IRO, Low)

It is also notable in some of these examples that the child permanence report was required for the ADM and the court prior to the care order and care plan decision. Given the tight timing of proceedings, producing this often lengthy and important document early in the planning process would be a challenge - and updates to this document are likely to be needed after proceedings and when matching becomes the focus.

There were many comments in both survey returns and interviews about the different ways in which procedural changes were occurring. Some local authorities, for example, had moved to using panels for care planning decisions, while in others, as in this case below, the move was in the opposite direction - senior managers had replaced a panel for signing off care plans.

All final care plans and care proceedings are signed off by the Senior Head of Service... Panels used to be in place here, but we found that actually actions could end up with drift and delay whereas having that on the spot oversight and supervision discussions with the Senior Head of Service and agreement it then took away the different varying opinions depending on who was chairing panel that day...It's just having that really clear line of management oversight of a child's care plan we found made it much more streamlined and much more efficient. (LA30 CLA, Medium)

During and immediately after proceedings, when there were parallel care plans and long-term foster care became a possible option, local authorities would start to look for suitable foster carers.

Plans are normally presented at our initial permanency planning meeting. At first you would have a parallel plan, because generally children would be in care

proceedings at that point... long-term fostering may be one part in there. Then as the case progresses...some of those options would fall away... so you would be family finding for potential long-term placements. (LA13 CLA, Low)

This early thinking about planning and then family finding would help to avoid delay. At this point a child may have already spent some time in one or more short-term placements, so moving on to getting settled with a long-term family was important. But where possible care could also be taken in initially placing a child with short-term carers who might be the right family to offer a long-term home to this particular child if it went well and the long-term foster care plan was agreed.

Information and evidence needed to be available and presented to court to compare parallel plans during proceedings and support the recommended care plan, so both targeted and wide-ranging assessment was necessary.

> There are certain kind of specific assessments you might be asking for...If you're in court proceedings, you would have access to a number of specialist assessments that would tell you about those children's needs. You would have your own social worker analysis and assessment and you would also have access to the experience of the adoption team about what's available for adopting these children together or apart. You'd have the experience of the fostering service about what's available at the moment in terms of these children being together or apart, what kind of placement they need. Some of it is written, some of it is about kind of the knowledge base of the professionals around the table. And you'll also be looking at the view of the IRO, the view of the Guardian. (LA24 IRO, High)

The legal status of the child also had to be taken into account. In the survey, almost all (94%) local authorities would in principle place children accommodated under section 20 in long-term foster care, but they were divided almost equally between those who would consider the child remaining under section 20 and those who would expect care proceedings to be initiated if a long-term foster care plan was agreed.

The process of care planning was said to be easier in some respects for children remaining on section 20, although there were also concerns expressed about the need for rigorous planning systems that included these children.

> I think the new arrangements are going to be tighter, there will be less of an opportunity for some children not being considered. But I think certainly the children who are on section 20 are sometimes vulnerable to not being fully considered as robustly as they should be. (LA29 IRO, High)

Looked after children reviews and the role of the IRO
Looked after children reviews have always been an important part of permanence care planning, but their role has evolved, especially since the introduction of the Independent Reviewing Officer role in 2004, and as the planning system has had to take account of changes in legislation, such as the implementation of special guardianship following the Adoption and Children Act 2002 and the more recent

requirements in relation to long-term foster care. However, while needing to remain within the 2015 statutory guidance on care planning, how the IRO role operates in relation to long-term foster care can still vary between local authorities (for example where there are procedural differences around how care plans are agreed) and between individual IROs and IRO managers (for example, in relation to how children are involved in their reviews).

The IRO does have a formal role within the 2015 regulations and guidance as having specifically to be consulted on the long-term foster care plan, as part of their role in ensuring permanence planning, and this was in evidence in this study.

> I think there's been a lot of focus on achieving permanence…They're looking to have a permanence champion. There's much more discussion with the IROs about their role in permanence. (LA51 F, High)

There was generally a sense across local authorities that care planning for long-term foster care was an interaction between the review as a statutory part of the process and other formal and informal systems and practice within and determined by the local authority, as this looked after children manager described.

> A permanence plan is developed by the time of the second review. There may be a contingency plan as well…Where long-term fostering's being considered there will be discussion first of all between the social worker and team leader, and then the social worker and IRO. This will be outside of the review process, and then that will be discussed with the parents, with the child and foster carer, and where it seems to be a viable option and a suitable option, then it will be formally discussed at a LAC review. (LA37 CLA, High)

There were also other individuals involved and other tracking procedures that ran alongside care planning in the reviews. In this local authority a 'case progression officer' was involved in avoiding drift, but not in the substance of the plan.

> We have the second looked after child review in which the permanence plan should be submitted for the IRO to consider. We have a case progression officer who will track the proposed plans, and establish the timescales and the completion of work, but that's more ensuring the processes are completed rather than considering challenge or support or evaluation of whatever plan they produce, put forward. (LA44 IRO, Medium)

Although the review and the IRO clearly have a significant role in care planning, their status was much less clear in practice while cases were in care proceedings.

> The IROs have some frustration that the view of the IRO isn't being heard or that there isn't much of a degree of respect for their involvement with the child within the court process and we're seeking to up the profile of that. (LA44 IRO, Medium)

Once in court, the child's social worker represents the position of the local authority and if the plan is re-negotiated during proceedings, often in discussion with senior managers or the local authority lawyer, the outcome may or may not fit with the IRO's view of the case or the recommendation of the review.

> In court the social work teams might present a view and then they may change their plan mid-stride within the issues resolution hearing or the final stages of the proceedings and IROs are not always content with some of the outcomes from court...The IRO has clearly presented their view of the case and then actually if that then differs from what's been developed by the end of proceedings the IROs aren't necessarily consulted to have their views perhaps unpicked. (LA 44 IRO, Medium)

This highlights the importance of communication between the IRO service, children's social workers, guardians and local authority lawyers not only when care plans are prepared but when they are discussed in court.

Other child level meetings/panels/processes involved in care planning
There was a range of meetings in different local authorities that included those directly involved with a child's case, as a looked after children review does, and with the goal of achieving permanence. These were frequently called permanence planning meetings (PPMs), as mentioned above, and were generally chaired by an independent manager. Some had a very specific membership, others were flexible about participation.

> [Attendance at] those permanency planning meetings really is dependent on who the child is and who needs to be involved in those discussion - social worker, foster carers, supervising social workers, school, health, whoever needs to be there... We've just started to introduce actually, a notification to an IRO after a PPM, so that they're kept in the loop. (LA 13 CLA, Low)

As this comment suggests, the PPM system seemed to operate separately from other parts of the planning system, but with varying links, as others also described.

> They (PPMs) take place outside of the LAC reviews, but are part of the LAC reviewing process... The first one takes place within about six weeks of the child coming into care ...The permanence planning meetings then continue at a regularity that's agreed by the chair of the permanence planning meetings until permanence planning is achieved. (LA 10 CLA/F, High)

> At the next review the IRO will obviously be referencing the PPM and what was discussed, and then what the outcome's been, so they're bringing that into the review minutes. (LA 29 IRO, High)

Running alongside but on different timescales to the looked after children review it seems that PPMs could have an increasing range of people attending. In this local

authority the PPM had started as a meeting for social work professionals, but was beginning to include foster carers and they were considering birth parents attending, both of which would be likely to happen in a looked after children review.

> The permanency planning meetings… have been before solely professional meetings and by that I mean, you have a social worker, a social worker from adoption, a team manager, the chair, potentially an IRO, if they're invited… I think we're at a position where we're saying actually let's involve foster carers in those permanency planning meetings… So they can talk to us about their experience of that child and sharing with us the knowledge of them and their relationship… We're also saying well, if you're talking about reunification, which is a form of permanency for children, why would a parent not be part of that permanency planning meeting? (LA24 IRO, High)

Although children's participation at a PPM was considered, it was thought to be a potentially risky option.

> The pinnacle of it would be to have a child but I think you have to be very careful how you manage that because of the kind of conversations you would be having. (LA24 IRO, High)

This raises the question of how issues are dealt with in all meetings and the possible overlap or differentiation between meetings, as a child would be expected to or certainly invited to attend a review meeting.

The dilemmas regarding how best to consult and involve children in different aspects of care planning through these meetings and panels were an important theme.

> Just because we think that a child would most benefit from an SGO to the foster carer, it doesn't mean that's what the child thinks…We've just got to get closer to the children that we're working for and part of being closer to them is being closer to the people that care for them. (LA24 IRO, High)

Reflecting on the role of the various meetings, it seemed that local authorities were finding the PPMs helpful, but the differentiation between their role and the role of the review in care and permanence planning would need to be clarified at local level.

Permanence or fostering panels and care planning
In most local authorities, permanence or fostering panels had a more fixed membership, with some invited participants from the case on the agenda but independent of the case. Generally they became involved at the matching stage (discussed in the next chapter), but in some local authorities they were also involved with care planning at the court stage – as summarised here.

> The social work team would make that decision about 'Okay we think long-term foster care is the right plan for this child' and that will be presented to a

permanence panel which is chaired by our Head of Service. There are a few people on that panel that would make that ultimate decision from the local authority's point of view.... Obviously then you would go to court with that as your care plan and that would be scrutinised by the guardian and the ultimate decision would be made by the judge. (LA53 CLA, Medium)

An adapted approach to planning and using panels for decisions was said to be needed when long-term foster care was a change of care plan that happened after the court hearing.

> Once we have got a child in care already, the care order has already been made it might be that you had a plan of kinship care, but the placement breaks down after twelve months and suddenly that is not a viable option anymore, there are no other family members...In that instance we would revisit the same things you do in care proceedings... If again you think 'No foster care is the right thing' again we would take that to the permanence panel because the permanence panel would hear cases where there is a significant change of care plan. (LA53 CLA, Medium)

In kinship care cases, the fostering panel may have a significant role at an early stage, because if the panel approves the relatives as long-term foster carers for the named child this is effectively making the match. In these cases, the looked after children review will be an important previous stage in developing the care plan, with the care plan decision or recommendation for a long-term foster care placement with particular relatives then considered as part of carer approval by the fostering panel - probably followed by sign off by an ADM or senior manager. But as discussed further in the next chapter, even with approval for a named child who is a relative, detailed assessment of the match for longer term care still needs to be done, along with an appropriate support plan.

Tracking meetings, panels and processes
The goal of tracking panels and processes was said to be to avoid drift, focussing on particular individual children but also reviewing the whole care population. Even where there had previously been structures to enable effective care planning, managers reported there was always room to 'tighten up' processes.

> We have permanency planning, monitoring meetings, for all children, until the permanent plan has been agreed... We're really trying to tighten up on the process, so we don't have any drift and delay at that point. (LA 60 F, Low)

In some cases, taking longer to make decisions was deemed to be in the child's best interests and even with a tracker panel to help with timescales, it had sometimes been necessary, for example, for care proceedings to go beyond the target 26 weeks. But early thinking about permanence and anticipating the need for placements was necessary even before proceedings.

The [Tracker Panel is] a development ...that is helping us manage these timescales...It's monthly because we check with our legal so we know what is coming through the front door in terms of applications for care proceedings, tracking where things are in proceedings... Trying to fit with the twenty-six weeks, that isn't always possible because of assessment, court timetabling whatever. (LA57 F, Medium)

The role of tracking systems often overlapped initial care planning and subsequent matching decisions – the permanency planning meetings discussed above in relation to care planning before and during court would often continue to track cases through until the formal match was achieved for a child in a long-term placement. These panels typically met at various intervals, drew in different sectors within children services, including child placement and safeguarding teams, as well as health, education, and generally had an overview of the care system.

We do a permanency tracking meeting... usually once every eight weeks where we actually talk about all the cases that are coming through or already in place that haven't got long term match placements yet and our discussions – And that's done with fostering, adoption and permanency teams and the LAC team and if there's any cases that are held by child in need or family assessment and support services, all those managers come and we present kind of the cases, we talk about where they're at with things. (LA19 F, Low)

One of the functions of tracking panels, supported by tracking data, was to check the history and progress of children in care generally within the local authority, but then focus on individual cases in need of an agreed permanence plan. In this example, the IRO was included in tracking meetings organised with a service manager, but drew on tracking software. This was partly to facilitate timely progress in each case, but also to learn lessons.

We've got a permanency tracker that we're getting to grips with...A service manager and their team manager will attend. We'll take out the children that they have and we'll go through them and we'll look at what their current status is. Then we look at that status versus when they arrived into care and explore what's happened. (LA24 IRO, High)

In another local authority, the IRO manager (LA29 IRO, High) described the interaction of separate monthly permanency planning meetings (PPMs) and legal tracking meetings – with PPMs being meetings around the child and often involving discussion with the birth family while the tracking meetings involved a wider review of the care system, more senior managers and legal input.

Managers often expressed concerns about drift continuing, especially for children under section 20, but had some optimism about change as a result of tracking systems.

> The purpose of the monthly tracking meetings is to try and guard against delay...Sometimes there are some cases where they are still drifting today...Not all localities have been rigorous enough in ensuring all of the section 20 cases are included... I'm optimistic that there's going to be more of a renewed focus on ensuring that every child in care is looked at in those monthly permanency and tracking meetings. (LA29 IRO, High)

Some of the joint tracking activity to avoid delay and achieve permanence relied not so much on formal panels, but on teams working together on a daily basis to track cases and work with sometimes parallel plans.

> We work very closely with our adoption team. We're physically in the same office as fostering, LAC and adoption all work together. And so it's always been seen as parallel planning is important. (LA19 F, Low)

But tracking was mainly about having good information about young people in their care and the long-term placements required.

> The tracker meeting [helps us] know our young people that are waiting. We know them well, we know what we need. (LA25 CLA, Medium)

It was important for tracking systems to be clear about when firm decisions on the care plan were made, when information was shared and how discussions would be held with all parties, including the child, the foster carers and the birth family.

Conclusion

The principles of good practice in care planning for long-term foster care are in the long-term foster care guidance and so shared by all local authorities, but systems and procedures differ in some respects. The link between these varied procedures in planning for long-term foster care and the tracking processes reflect the local authorities' awareness of the need to reduce drift and ensure timely permanence.

The variation between local authority rates of long-term foster care placements in the high, medium and low tertiles could not be clearly linked in this study to specific care planning practices, but multiple factors could be involved and the issues raised here would aid a local authority in examining pathways through their particular systems and how care plans were made.

Summary and implications for practice

- Core principles of good practice are clearly set out in the long-term foster care guidance and need to be threaded through all care planning work with children and families. They include direct work with children, the quality of assessments and engagement with birth and foster family members and agencies, and the establishment of rigorous and effective procedures.
- Care planning for long-term foster care needed to take account of the range of children and the fact that some children might already be in the placement that would be assessed to become a long-term match and other children would move to a new placement. This would affect all the work at the care planning stage with the child, the foster family and the birth family.
- There was said to be a focus on early permanence practice in long-term foster care, both as the possible care plan and in terms of early consideration of foster carers who might be a good match for a particular child.
- Care planning procedures were very diverse across different local authorities, with a range of meetings, panels and decision makers interacting with each other and with the court to arrive at a long-term foster care plan.
- There were a number of meetings convened to discuss the particular child: some informal (e.g. between the child's social worker and a supervising social worker); others statutory such as the looked after children review; and others developed locally e.g. permanence planning meetings. There were then standing panels such as tracker panels, fostering or permanence panels where the child's case would be on the agenda for specific meetings. Finally, agency decision makers also sometimes played a role in the care plan as well as approving the match. Ensuring the effectiveness and efficiency of the systems of multiple meetings and panels is an important aim.
- The composition or membership of these meetings and panels may be social work professionals only; a combination of professionals, the foster carers, the child and the birth parents; or, as with a fostering panel, could include a range of people external to the case. Again, the implications of meeting and panel membership or participation, especially by children, should be monitored and kept under review.
- The role of the IRO and the review recommendation were always significant in terms of care planning for permanence in long-term foster care, but once cases were in court plans might change so further communication was necessary with the IRO.
- Tracking meetings and panels could play a key part in ensuring that care plans had been made and also that there was progress towards a match. This combination of a central overview of all children in their care and attention to each child's progress towards permanence would be a key of a local authority's long-term foster care planning in line with the regulations and guidance.
- The variation between local authorities' rates of long-term foster care placements in the high, medium and low tertiles could not be clearly linked in this study to specific care planning practices, but multiple factors are involved. Local authorities would benefit from examining their own systems in the light of the range of practices identified here to see how children's pathways through their particular systems could be improved.

7

Matching procedures and practice – and plans for support

Introduction

The theory, principles and practice of matching are crucial to long-term foster care, as they are to adoption and other permanent placements, such as special guardianship. Entrusting a child of any age and background to the care of a particular family, with the expectation that this family will be able to promote the child's wellbeing across all physical, emotional, cognitive, educational, life skills and identity dimensions through to adulthood, is one of the most significant decisions that professionals will make. Because no match between the needs of the child and the capacity of the foster family is perfect or exact, and those needs and capacities will evolve over time, plans to offer immediate and ongoing support to increase the likelihood that the placement will be a success must be considered part of the matching process. This chapter will consider the nature of the matching and support planning processes which have been established, the principles that lay behind them and the practical applications for the wide range of children and placements where long-term foster care is the permanence plan.

As this study's participants stressed, matching is a decision that could not be taken lightly - and this was a key part of the 2015 guidance, which recognised the role of assessment and matching for long-term foster care.

> Where the permanence plan for the child is long-term foster care this may be where the current short-term placement is assessed to meet the long-term needs of the child for permanence or where a new placement is identified for the child as a result of an assessment and matching process. (Department for Education, 2015b:23, 2.4)

In this explanation of the role of assessment and matching in long-term foster care, two things are made clear: first, that children may remain with existing carers or move

to new carers for long-term foster care to be a formal plan, and secondly, that in both cases the emphasis is on whether the foster placement has been appropriately assessed to meet the long-term needs of the child.

The wording of this statement may appear to suggest, however, that the concept and practice of 'matching' is only relevant in new placements. Previous research (Schofield et al 2000, 2008) has suggested that the principles and practice of matching the assessed child's needs and the carers' ability to meet those needs in the long term are necessary in both new and existing placements. The frameworks for assessment, matching and preparing documentation for reviews and panels can apply in both cases. Although in existing placements there will be more evidence available of the child's current progress and the 'fit' between the child and the foster family, the assessment of the likely longer-term stability and success of the current placement will still require skilled judgement, as it does in new placements.

Here it is also important to note the close link made in the guidance between on the one hand matching the child's needs and the carers' capacities and on the other hand planning for long-term support to give this permanence plan in long-term foster care the best chance of success.

> The assessment and planning process for long-term foster care should address the child's current needs and likely future needs, and the capacity of the foster carer to meet these needs now and in the future. The length of placement will vary according to the child's age and the long-term plan for the child, including the transition to adulthood. These factors must all be taken into account in planning for support and services where long-term foster care has been identified as the plan for permanence for a child. (Department for Education, 2015b:72, 3.104)

The expectation therefore is that local authorities should have an agreed 'process in place' to undertake their assessment, matching and support plans 'to ensure that the placement is stable, secure and meets the child's needs' (Department for Education, 2015b:72, 3.105).

Care plans and other plans

The guidance sets out the relationship between the care plan and other plans, including for health and education. The placement plan (Department for Education, 2015b:88, 3.177) is particularly important in long-term foster care as it needs to clarify for the child, the carer, the birth parents and the professional network 'how day to day parenting will be shared between the child's carer and the responsible authority'. This emphasises the important role of delegated authority in the context of the permanence plan (3.195).

The role of foster carers relative to birth parents in decision making in long-term foster care is contrasted to their role where there is a plan for return home.

Where the plan is for the child to return home, the child's parents should have a significant role in decision making; where the plan is for long-term foster care, the foster carers should have a significant say in the majority of decisions about the child's care, including longer term decisions such as which school the child will attend. (Department for Education, 2015b: 88)

It is made clear, however, that whatever the nature of delegated authority in long-term foster care it is always good practice to 'build effective relationships between parents and others with PR (parental responsibility) so that they understand that appropriate delegation is in the best interests of the child' (Department for Education, 2015b:93, 3.199).

From care plan to matching

As described in the previous chapter, the development of a long-term foster care plan may have been a part of care proceedings relatively soon after a child has become looked after. But it may also have developed over time after a child has been looked after under a care order or section 20 and in a particular foster care placement for some time, while other family or legal permanence options, such as reunification or adoption, have been gradually ruled out. A child being considered for a long-term foster care match may also have had previous unsuccessful permanence placements with relatives, in adoption or with long-term foster carers.

These different histories and routes to a new long-term foster care plan will mean that the timing and process of matching a child with a long-term foster care family who can meet a child's assessed needs will be rather different in each case. This variation was described by managers as requiring a case-by-case approach, albeit within a local authority's system and processes. This presented challenges in terms of allowing case flexibility while maintaining robust assessment and matching systems. The regulations and guidance acknowledge that the matching assessments and decision may be different for matching a child with their existing short -term carer or prior to a move to new placement, but specify that any matching and decision-making process will require the same degree of assessment of the child's long-term needs and the carers capacity to provide long-term care for this child (or sibling group) as part of their family.

The process for matching and confirmation of the match has also to ensure that the three conditions from the 2015 regulations for a long-term foster care placement are met:

- that foster care is the 'plan for permanence' and is recorded in the child's care plan
- that the foster carer has agreed to act as the child's foster carer until the child ceases to be looked-after; and
- that the responsible authority has confirmed the arrangement with the foster carer(s), the birth parents and the child. (Department for Education, 2015b:72, 3.103)

In the regulations and as reflected in this section of the guidance, the child appears to be very much a recipient of the confirmation of the 'arrangement', as are the birth parents. But as discussed in the previous chapter in relation to care planning, it is required that children's wishes and feelings in relation to the match would be ascertained and taken into account, as this is required not only by the welfare checklist (Children Act 1989 S1), but also by the looked after children review process to ensure the 'full participation of both child and parents in the decision-making process where possible and appropriate' (Department for Education, 2015:113, 4.4).

In addition to the significance of matching procedures and practice for the likely success of the placement, since 2015 the point in time when the long-term placement is agreed and the match confirmed is also significant as it is likely to be the point when the placement can be recorded as a long-term foster care placement and thus is included in the submission for the Department for Education SSDA903 annual return. This puts additional focus on how rigour and flexibility in matching practice are managed when they are linked to data management (discussed further in chapter 9).

Previous research (Schofield et al, 2008, 2011) suggested that procedures for agreeing and confirming a match in long-term foster care can be very varied between local authorities and this was certainly reflected in the current study. Key elements of difference include:

- whether procedures vary by age of child
- the level of the decision-making forum in terms of the seniority of staff
- the composition of the forum and whether it is a standing, independent panel (e.g. fostering panel, permanency panel) or a meeting of professionals/ caregivers involved in the case which may have an independent chair (e.g. CLA review/IRO, permanency planning meeting/service manager)
- the range/multi-disciplinarity of professionals present at decision making forum
- the participation and attendance of the child and the foster carer
- the participation and attendance of parents or other relatives
- the documentation on which the matching and confirmation relies
- the extent to which a support plan for the long-term placement is built into the matching decision
- the role of an Agency Decision Maker or senior manager as the final stage in confirming the match
- The nature of the communication to the child about this decision and how the decision is marked (e.g. in terms of certificates, celebrations)
- the degree of flexibility on a case-by-case basis
- the link between the matching and recording process and the data submission to the Department for Education on long-term foster care placements.

One factor that affected all matching decisions and was commented on almost universally was the availability of long-term foster carers, so that there was enough choice of carers for the range of children. In that context there was a clear link between recruitment challenges and matching, with some evidence that local authorities and independent fostering agencies were more open than in previous

research (Schofield et al, 2011) to the idea of recruiting new carers whose motivation was to offer a long-term home and who would not wish to be approved as/provide care as short-term foster carers first. But it was also important that expectations of long-term foster carers and the offer of financial and other support, whether for new carers, carers new to the child or existing carers for the child, are such that being matched for long-term foster care is a commitment they feel able to make.

Local authority procedures and practice for making and confirming the match

In some local authorities, long-term foster care matching procedures had been in place for some time, as previous studies found (Schofield et al, 2000, 2008, 2011). But although the regulations and guidance were issued in April 2015, there was a sense that for some local authorities, procedures for long-term foster care matching were only just being developed and implemented in 2019, at the time of this study.

It is important to note that neither in the regulations nor the guidance is there any specific requirement regarding the type or level of decision making for a long-term foster care placement match in terms of panels (e.g. fostering or permanence panel) or a senior manager/agency decision maker role, although it is the responsibility of the looked after children review and the IRO to ensure that a permanence plan is in place. This flexibility is made clear in the instructions to local authorities regarding how a long-term foster care placement needs to be defined in order to be coded and counted for submission to the Department for Education (Department for Education, 2019).

Matching procedures
From the survey and interview data, a key part of the matching process, providing a matching assessment and report, was said to be likely to start at practitioner level, involving the social workers closest to the child and the carers.

> When the matching paperwork's completed it has to be signed off by the children's social worker and the fostering social worker, the foster carers have to sign it as well. (LA104 CLA, High)

This matching documentation may include a child permanence report, reflecting the application of adoption processes, or an equivalent assessment document and be considered at some combination of, for example, the looked after children review, a permanence planning meeting (PPM), a fostering panel and an agency decision maker/ senior manager.

Care plans for the match in most local authorities were said to be first considered at a looked after children's review, and as discussed in the previous chapter, a range of permanency planning and tracker meetings could then follow the case from initial care planning through to the matching decision. The survey found that a majority (71%) of local authorities used a standing panel for the matching decision – 53% using a

fostering panel and 18% a permanence panel. This independent scrutiny included the role of the ADM or senior manager in providing a final sign off in 87% of local authorities.

A smaller number of local authorities (13%) referenced the permanence planning meeting (PPM) as making matching decisions, with only 5% relying on the looked after children's review. However, the matching processes, as in earlier care planning processes, are likely to link a range of these meetings and panels on the way to a final decision. Children, carers and parents were more likely to be present at the looked after children review than other panels, making this a key point in the process.

Where fostering panels were used for matching, there could be some pressure on panel availability that led to delays.

> [There are] sometimes delays. Sometimes it's about panel capacity. I've got a couple now where we want to go to panel, but we can't go till sort of nearer Christmas time as the panels are full. (LA25 CLA, Medium)

In kinship care cases because the fostering panel approves friends and relatives as long-term foster carers for a named child it therefore effectively agrees or recommends the match to the ADM at the same time. The rates of these placements varied widely between local authorities (as reported in the analysis of this data in Chapter 3) which may reflect different uses of this option or how the matches were formally made and recorded on the electronic systems.

Some local authorities reported using particular theoretical and practical models to help with assessing children's needs and carers' parenting capacity and preparing a matching report: for example, the use of the attachment and resilience based Secure Base model developed by Schofield and Beek (2014, 2018):

> If we're looking at a long-term fostering placement, we have a matching meeting, like a fostering matching meeting where we use the Secure Base to look at the needs of the children versus what the foster carers offer... Once we've done all that matching and the child's been in placement for a year, it then goes to fostering panel. We'll do a matching report and we do a support plan... the assistant director has oversight of those and agrees the match...I do think the matching process we've got now is much more robust, using the Secure Base model as our guide for it. (LA25 CLA, Medium)

Timing of the matching decision
There is no requirement in the regulations or guidance that a child has been in a settled and successful placement for a particular period of time before the match and the long-term placement is confirmed. This is unlike adoption, where the matching is likely to be prior to placement, and special guardianship, but for both of which it is the legal order after a year that confirms the placement. So the term 'matching' can be seen as having a different significance in terms of the timing of the

confirmation of the placement, even if the principles of assessing a child's long-term needs and a caregiver's capacity to meet them are the same.

Although not required in the regulations, one year in placement was commonly expected by local authorities prior to confirmation of the long-term foster care match. Local authorities often had systems for checking all placements that had lasted twelve months to see if a long-term foster care plan was in place and whether an assessment for a match might be appropriate.

> We would expect that the child has been in placement for at least twelve months before you would look to matching. It can start earlier, but they need to have been there twelve months and then it would be assessments and it goes through to the fostering or matching panel. ...I think there is an automatic trigger - if the child has been in placement 12 months – to consider matching. (LA8 IRO, Low)

> We would say that a child that had been with a foster carer twelve months plus, you should be thinking about matching for that child...That indicates to us that if the placement is working that could be considered for a long-term match. That's the rough rule of thumb... (LA24 IRO, High)

The context of this year in placement would be different in each case and could be linked to rather different practice, thinking and experiences for the child and carers. On the one hand a child who had spent a year in a short-term placement, perhaps during care proceedings, might be assessed at the end of the year to see if this could be their long-term match. On the other hand, a child for whom long-term foster care is already thought to be a likely outcome might from first arrival in a placement be supported and reviewed during that year with the aim of building a relationship, that could then be assessed for permanence as a long-term foster care placement at the end of the year. Both routes could be legitimate, may overlap and may depend on the situation when the placement was made, in particular whether care proceedings were not yet started, were ongoing or, post-proceedings, whether there was a parallel care plan meaning that other options for permanence were still being considered. It would also depend on whether current carers had been ruled out or had already ruled themselves out from offering long-term foster care. But in practice 12 months in placement was often a 'trigger' for assessments and action.

Some managers were concerned about speeding up processes for matching, warning that this could be potentially short-sighted if they had not fully taken children's long-term needs into consideration. An almost automatic move to approve placements as long-term after a fixed period, for example, could represent another kind of drift.

> If there was an automatic procedure it would have to be related to length of time which I think is even more risky. Because if you've made an assumption, for example, that once everyone has been in placement for a year, that's a long-term placement, then I think there's a bigger risk of things getting missed

with people or just assuming that that's been sorted out and it hasn't because it hasn't formally been considered. It's just kind of drifted into that position. I certainly know of local authorities who do after a year just automatically adjust the records and they say once it's a year, it's long-term fostering. (LA14 IRO, Low)

Elsewhere too it was acknowledged that it was important not to assume that a placement would be a suitable long-term match just because it had been stable for a year; both the child's future welfare and their wishes and feelings needed to be taken into account, as required in the regulations and guidance.

> So just because they've been somewhere for 12 months doesn't necessarily mean that that is still the right place for them, and I guess that's part of the conversation as well, 'Well this child has been here for 12 months, is it meeting their needs? Is this offering them permanency? Do they have a legal status that supports it? Does the child actually want to be here? What does the child feel about it?' (LA 24 IRO, High)

Matching, recording and using the long-term foster care codes
Following the introduction of the 2015 regulations and guidance with the requirement to submit long-term foster carer data to the Department for Education in the annual SSDA903 return, most local authorities also needed to ensure the appropriate use of the long-term foster care codes. This meant establishing whether children in foster care had a plan for permanence and if this was a long-term foster care plan, whether an assessment was ongoing or either children had already been formally matched with previously short-term carers or had moved to a new placement that was formally matched. If the current placement was seen as 'effectively' long-term foster care, but there had been no clear matching decision, there was a need to decide how best to manage the assessment, matching and confirmation process, as expected by the guidance. This could combine the application of standard matching procedures and taking account of the individual circumstances and feelings of the children and the carers.

One local authority talked about 'fast tracking' to a match being used for 'historic cases' of children in stable placements for more than a year, who had a plan for long-term fostering but had not been formally matched with their carers.

> We have got an agreement now at the review they would agree to do what they call this 'fast track'… We work on the premise that the child has been there eighteen months or a year plus, that it is relatively stable…So you would have a child who has been in placement so long their plan is long term fostering, the LAC review would agree to pursuing the fast track rather than going through family finding…The IRO would endorse it …It wouldn't go to a panel…There would be consultation with a family finder, with the child's social worker who would complete the assessment report with the foster carer's social worker… That would be presented to the area Head of Service who is the Operational

Manager, who would agree that and then the AD would approve it as ADM. (LA 7 IRO, Low)

It is not clear why in this local authority (and others) the process of agreeing a long-term foster care match in a current placement was called 'fast track'. The process described seemed to include appropriate consultation, documentation and senior level scrutiny, but the language seemed to minimise the significance of the permanence decision. It also suggests that matching children's needs for permanence and carers' capacity to meet those needs is less significant in an existing placement. As mentioned above, research (Schofield et al, 2000, 2008, 2011) suggests that the majority of matches in all local authorities are likely to be in a current placement, but there is a risk that labelling the matching process in these placements 'fast track' would mean these long-term foster care placements would be seen as less rigorously matched than other permanence options. Language is important here – it would seem preferable to think of these positive 'historic placements' as having been appropriately assessed and matched in their current placement rather than 'fast tracked', to give the message that this is a significant decision and that there has been necessary compliance with the regulations and guidance.

It would be expected from the guidance as well that even in 'fast track' processes for matching, the child or young person in well-established placements would have been properly involved in expressing their views, especially as these were often older children. But it was widely acknowledged by managers that approaching children and carers where placements were longstanding but had not been formally matched /officially recorded as long-term foster care needed considerable sensitivity in practice. For carers and children in stable placements that had lasted years in some cases and where presumably the appropriateness of the placement as a long-term or permanence plan had been agreed at previous reviews, to be asked whether they wished placements to be 'officially' confirmed as long-term may be unsettling and even risk disrupting placements. It may also cause very different potential unsettling concerns with birth parents, either suggesting this would be an arrangement closer to adoption and reduce their role or as suggesting that a long-term foster family arrangement that they thought was settled was up for discussion.

Matching for older children
Factors such as the child's age often contributed to some formal or informal procedural differences, involving the type of meetings and panels but also the documentation. In one local authority, for example, recommendations from PPMs led to cases being considered at the matching stage by the fostering panel for children up to the age of 14, with young people over 14 going through a different process in which a looked after children review made the recommendation, supported by a shorter matching report than expected by the fostering panel. A matching case note was then placed on the system, with final sign off by the ADM who would be signing off cases for under 14s coming through the fostering panel. Key here again is both the practice with the young person and the foster carers but also the point at which this decision is formally recorded on the local authority's electronic system as a trigger for

other decisions (e.g. in relation to the placement plan, greater delegation of authority to carers, frequency of social work visits and review meetings) and for inclusion in the submission to the Department for Education.

Challenges in matching older children were often linked to an appropriate reluctance to use certain procedures if they were too rigid for older children, as in previous research (Schofield et al, 2008. 2011). In particular, older children may have complex and evolving loyalties and relationships with both foster families and birth families that needed to be handled carefully. Some placements that may be going through difficult times could still be thought to be the best option for the child's future, but expecting children or carers in those placements to make public commitments through to adulthood at a fostering panel at those times might make the process unsettling rather than reassuring. Thus the process of matching and confirming the placement as long-term foster care, especially for older children, did depend on how that process, whatever it was in a particular local authority, could be adapted to the needs of the child and the placement.

This IRO manager described a system that could be flexible for older children and was being introduced. As with some other local authorities, flexibility did not necessarily mean less rigour and decision-making could still include assessments and a matching report, ensuring the child's views were heard and obtaining approval from the ADM, with the social worker's knowledge of the child playing an important part.

> Any child 14 and above would have their match, a recommendation made by the IRO at the child looked after review, and then that would be ratified by an agency decision maker... My sense is that there will be, with children that are 14 and over, sufficient evidence if social workers prepare it, because there's still going to be a matching report to the child looked after review which will contain that information. (LA24 IRO, High)

Where the looked after children review and the IRO were significant in making the matching decision or recommendation for older children, there was also a focus on the IRO's relationship with the child and the child's role in the decision. The emphasis here is on the quality of practice outside the meeting.

> I think the IRO talking to the child about it and then bringing the child's views into the meeting, the child being in the meeting, whilst that matching is discussed. I think will be the best check of its validity... But we need to be really on it, to make sure that everybody is thinking about it and talking about it and working towards it outside of those meetings. It's all about the preparation outside of the meetings...I think there will be sufficient information...mainly in the matching report. (LA24 IRO, High)

Managers frequently referred to the need for flexibility arising from the fact that some young people may not want to go through the matching process or certain aspects of it.

> There are a very small group of children whereby we have no intention to move them, but they don't need to go through that [matching] process. They don't want to go through that process and so it has helped us clarify that in our own thinking. (LA91 F, Medium)

This reluctance by some older young people to engage in matching processes was often said to be due to birth family loyalties.

> I think for those children coming in to care in adolescence, they have got such strong bonds with their families and I suppose they don't want to make that commitment to their foster family in the way it might feel a bit disloyal. But they are not saying they want to move, they are not saying they don't like where they are, they are just not wanting to make it official as it were. (LA91 F, Medium)

But as with some other examples, this local authority's system nevertheless allowed these young people to be considered officially as matched long-term foster care placements.

> Now we're clearer about 'Well we know this isn't short term because it's actually, we have no intention of moving this child' but we don't necessarily have to go through this process to match them for permanence because it's not necessarily in their best interests or what they want...We have got that extra band whereby they might have remained short term and now we think 'It is not a short term placement, it's a long-term placement'. (LA91 F, Medium)

It was unclear whether a long-term placement in this situation has emerged from any kind of assessment and matching, which should be required. When children are reluctant to go through 'the process', as also happened elsewhere, it suggests that the matching process may need some extra thought. What is involved, for example, in 'making it official'? What language would be used? What meetings or panels might the child be expected to attend?

Most local authorities who appear to adapt to the needs of older children and adolescents felt that some flexibility of processes was permitted for the defining of a long-term foster care placement in relation to coding and submission to the SSDA903. This flexibility is allowed in the regulations and is also in the guidance to local authorities on the long-term foster care codes, although assessment and matching for permanence should still be a considered rather than automatic decision.

However, there were some local authorities where adolescents who did not wish to participate in long-term foster care matching processes were not considered to

be in long-term foster care and were not included in returns to the Department for Education (discussed further below in the section on data management). It is difficult to know then how the requirement for all children in care to have a permanence plan is managed for these children who seem to be excluded from the definition of long-term foster care but have no alternative permanence plan.

Flexibility about matching processes for older children had included some uncertainty and flux in some local authorities where age boundaries and procedures were described as having varied over time, including when new senior management came into post. In this example, it was still possible to be matched and recorded as in long-term foster care if the young person did not want a 'fanfare'.

> We keep changing the view about [the age of children that go through the panel] in the last few years…It's changed over time here…[now] we tend to go up to 16… We've had a few that have been ratified through the review process with the ADM looking at the process afterwards. Because they're older, they wanted to state their views, they wanted to remain, but they didn't want a fanfare, they didn't want to celebrate. And that process was still considered a long-term placement. (LA51 F, High)

The questions of both participation and celebration are key areas where child-centred flexibility needed to be managed in local authority planning systems. As discussed above, although a child's agreement is not required within the regulations and guidance, they do need to be consulted concerning the care plan and associated decisions matching for permanence. Previous UEA research (Schofield et al 2008) found that children and young people's experiences of attending or being invited to attend panels could vary from very positive to very negative, sometimes depending on the panel's approach but mainly because of their own feelings and situation. Managing this sensitively continues, inevitably, to be a significant part of practice.

There were concerns that participation by a young person in fostering panel discussions in particular might not always be appropriate

> I don't think routinely as a matter of practice we involve children massively in the panel process …I don't know if that is necessarily a conscious decision or just the way that we do things…I don't think they would because there is a possibility for whatever reason for that match not to be approved. (LA53 CLA, Medium)

Asking a young person the question as part of the matching procedure - do you want to stay with these carers? – may be part of a process designed to increase security in the long-term but may create anxiety in the short-term that moving is a possibility. Young people's participation in these procedures had to be treated with care. This manager described having a difficult case where the young person was well-settled and had a positive, loving relationship with the carer, but the panel had refused to agree the formal match on two occasions because of concerns about the carer's health.

If we had involved [the child] in any of that ...it would have made her feel unclear and uncertain, so I think you have to be a bit careful about how much you involve children in the panel bit until it's gone through and been approved. (LA53 CLA, Medium)

This example is not only about the complexity of participation by children, it also highlights the challenge for a panel to approve a long-term match with a carer about whom they have concerns, even when the placement is said to be working well and there is no plan to move the child. This could arise in both kinship and non-kinship placements.

As in other areas of care planning decision making, it was emphasised that participation did not have to mean attendance at a matching panel and that social work practice with the child was key to ascertaining the child's wishes and feelings.

It's the social worker's direct work with the child rather than the actual panel attendance...As the social worker you would be generally working with that child on an ongoing basis to understand how they feel about the placement and what their views are... By the time you have got to panel you have gone through your work with the child, got to the point of thinking 'Yeah I can represent this child's views that they actually do want to be here and they feel that this is the right place for them'. (LA53 CLA, Medium)

It was important to reflect not only on processes for achieving an agreed match, but also on the perceived significance of the long-term foster care matching decision for local authorities– what was going to change? In this example the manager described the implications of agreeing a match in an existing settled foster care placement, including an emphasis on delegated authority.

I've just done a formal permanency planning meeting for a child where we were matching them long term... The main conversation (with the carer) was about 'This does have an impact on our relationship with you and your relationship with the child' and 'This is now their permanent placement.'... So there is that conversation. It doesn't change the relationship per se because the child is there and settled, but I think it adds to their sense of stability...Things like our LAC visits would reduce, because the child is settled, they're in a family environment. We have the foster carer with delegated authority to make those decisions for the young person which is much more concrete when it is long term compared to short term... We would review delegated authority at that point and we would look to see whether there were areas that we could change and make more flexible or broad. (LA13 CLA, Low)

Taking this longer-term view of a placement and a family that would evolve over time was a valuable part of the matching 'conversation'.

Matching for long-term foster care with Independent Fostering Agency (IFA) carers
Respondents to the IFA survey commented on the important role they were playing in providing permanence in long-term foster care - and that is reflected in the data, with about 40% of long-term foster care placements being in IFAs. Each IFA has to work with the varied procedures of different local authorities, but the core elements of assessment and matching need to be present and these processes would involve the IFA staff and foster carers in contributing their perspectives and information about the child.

A number of references were made in the survey and in interviews to some procedural differences in matching children for long-term foster care with carers in independent fostering agencies. Resource implications were often subjected to further scrutiny.

> The [matching] process is just slightly different so all the things are the same but for an IFA we come to our resource panel for them to be signed off not fostering panel. (LA49 CLA, Medium)

On the whole managers reported a positive approach by their local authorities to IFA placements where these were considered 'right for the child', while describing the additional checks in the system, mainly around funding, which have to be agreed first before formal matching on the usual criteria of a placement that can meet the child's needs.

> So it's more of a financial oversight, I suppose, so that panel then gives an endorsement to say this looks like a legitimate long-term match. Then it will progress to foster panel, which is much more about the child's needs versus the foster carer's ability to meet those needs. So that's the kind of dual or double-pronged process that we've got for those different sources of matching. (LA107 CLA/F, High)

There were suggestions that where local authority social workers wanted to argue for an IFA long-term foster care placement for particular children, the regulations and guidance that emphasised the value of long-term foster care as a permanence option could offer some support (LA91 F, Medium).

It was clear that in some cases there was still a wish to move a child from a short-term IFA placement to an in-house long-term foster care placement in order to keep the child closer to birth family, familiar communities and the child's social work support team.

> We have a number of children who are in IFA places who we would want to bring into the local authority, bring them back more locally, if we could, who need long-term foster placements as well. (LA 107 CLA/F, High)

Marking the confirmation of the long-term foster care placement match - the question of certificates and celebrations

The difficult question of how the confirmation of the placement as an agreed, matched long-term foster care placement is marked for the child and the foster family has been raised in previous research (Schofield et al, 2008; Schofield et al, 2011:46). This topic captures and extends the debate on some of the issues about child-centred practice around the matching process discussed in the previous section. The message from previous research and reflected in the current study is that whatever the local authority procedure for final approval of the match and the placement, there needs to be some flexible thinking in practice about what the process means to each child before decisions are made about how the change of status is marked.

Taking long-term foster care cases to a panel or to a senior manager for a decision about or confirmation of the match has two very different functions; on the one hand, it marks the official, corporate parenting recognition of this fostering arrangement as the long-term foster care placement for this child; and, on the other hand, it is an event in place and time which children may or may not value and wish to participate in or 'celebrate'. Because long-term foster children have very varied histories and are at varied ages and developmental stages, the question of which process for marking the change of status will be right for each child must be addressed on a case-by-case basis.

It appears that at the heart of the dilemma about appropriate practice around marking the confirmation of the match for long-term foster care is a comparison with adoption practice, where the day on which the adoption order is made is often a focus for celebration at the time and in subsequent years. However, there needs to be consideration of the wider range of children and circumstances in which the confirmation of a long-term foster care match is made - in particular, the age of the child and the nature of the child's relationship with their foster, birth or in some cases adoptive family. From our previous research (Schofield et al, 2008, 2011) we know that young people may have a wide range of feelings about the confirmation of the placement as long-term which are reflected not only in their different reactions to the decision-making process, the formality of the panel and their possible panel attendance, but also the nature and appropriateness of any certificate or 'celebration'. Managers in this study discussed this dilemma in some detail and local authorities had clearly taken a range of approaches to it.

First it is important to note that it seems likely that the impetus from the introduction of the regulations and guidance to increase recognition of long-term foster care as a legitimate permanence option has increased the emphasis on both the significance of matching procedurally but also the need to mark the occasion, for example with a letter or certificate. The sending of certificates or letters from a service manager is not a new practice – a number of local authorities in our studies from 1997 to 2011 were sending certificates to mark agreed long-term foster care matches. This practice was quite common in the current study, and of course, confirming the long-term foster care decision to the child is in the regulations.

> There is a recorded ADM decision that goes onto the record and is communicated to the child/young person via a certificate. (LA31 IRO, survey)

The certificate was often seen as communicating to the child not only the local authority's commitment to the permanence of the placement, but also the nature of the commitment of the foster carers.

> And then the young person gets a certificate saying it's been agreed, etc. And knows that it'll be permanent as well. And that normally has their photo on as well. It just endorses that feeling of being claimed for them. (LA25 CLA, Medium)

Here the language used, 'claiming', links again to a concept and language from traditional adoption practice.

Marking the occasion of the final matching decision was often referred to by managers as requiring a 'celebration' for the child and the foster family, again with parallels to adoption, a connection these managers explicitly named.

> The match is agreed at the fostering panel then the ADM signs that off... [There would be] a celebration, a card, a little party, flowers for the foster carer. What we want to do is make it as meaningful really as the adoption process, I guess, because it is about a permanent family, or a forever family. (LA10 CLA & F, High)

> It's a big deal, the matching process. Most of our foster carers come dressed in their Sunday best shoes and ties and dresses and the children come along as well and invariably they are going out for a celebration party afterwards. It is like adoption for those families, it's not just a rubber-stamping exercise... It's another step towards celebrating a child and welcoming that child into their family in real terms - it is not a small step for them. When we started off the process, I think I personally underestimated how important it was to the children and for the foster families. (LA78 CLA & F, Low)

Most managers clearly saw the idea and act of celebration as an indicator of how significant this move was in securing the child's place in the foster family. In this next local authority, the match and long-term foster care placement confirmation was described as a 'second birthday'.

> We have celebration hearings for them ... So after it's been to panel they come to me and they have a second birthday, which is the day they come to me. So it's their official second birthday; they get given the newspaper of the day, they get a certificate, we have cake, we have photos and it's a celebratory experience. (LA49 CLA, Medium)

It was explained that this idea of a second birthday would be put to children as a way of demonstrating the significance of the match for their future in the foster family, though with the foster family role here described as being additional to rather than replacing the birth family.

> So it is marked in time, so it's their sort of second birthday of joining their second family and we very much sell it: 'You have got two families now isn't that marvellous? Most people only have one, you have got two that all love you and are very involved with you'. (LA49 CLA, Medium)

A 'second birthday' is a powerful metaphor for the matching event. However, it was acknowledged in this local authority that for some older children this approach may not be appropriate.

> [For older young people who may feel it's a negative option] we don't pursue it for them in the same way but we still consider your placement as permanent … It's not that process it's that way of being, so of course some will say you know 'I don't want to, you know I don't want it to go to panel' or 'I don't want that so much'…The only time the children don't really want to do it is either they don't want a negative message to the birth family or actually it's a pragmatic, 'Things are fine leave alone, don't really want to do that thing, not my cup of tea'. (LA 49 CLA, Medium)

In most local authorities there was some flexibility said to be built into their systems and celebrations would be based on age, as in this local authority example below– an account of celebrations targeted at the under 12s and associated with the meeting with the service manager who will finally sign off the local authority's decision that this will be the child's long-term foster care placement.

> So at that meeting it's really been my aim to make that a celebration and a reflection of what's going really well and how the placement is working for that young person and making them feel like this is a special occasion… That's the flavour of our under 12s. I don't really know if there's a standard way. I think that individual social workers celebrate it with the young people and the carers in their individual ways. (LA13 CLA, Low)

For older children, over 14 in this example below, the nature of any celebration was an important element of the planning – in part because other aspects of the process were more low-key than for younger children.

> With the 14 plus…part of the flowchart we put together is to specify when the recommendation is made for the match about how that child will celebrate it… Will it be a certificate? Will it be a picture of the ADM that's made the decision? Will it be an event with their foster carer? … Some kids might say 'Give me a piece of paper, I'll just put it under the bed'. Say, 'Take me to McDonalds, that will be much more fun'…That might be where they are. Others might say

'Actually, great, you know, I collect my certificates, I value that kind of thing, I privilege that, so I'll keep that, I'll put it in my life story work or my book'...They need to be thinking really explicitly about well if this match is made, what will the celebration be for the child? Because part of the fostering permanency panel process is that it kind of significantly marks a match and that signifies something to the child and the carer. So if these children 14 and over are matched by an ADM outside of that process, how do we help them mark that? (LA24 IRO, High)

As with other examples of long-term foster care practice, IROs were clearly playing an important role in thinking about the role of celebrations. This was seen as an important part of the advance planning for the child. In one local authority certificates had been discontinued, but other elements of celebration, in this case, a cake at a looked after children review, were seen as appropriate for certain children, but 'It's very much on an individual child basis'. (LA14 IRO, Low)

For other local authorities, the approach to certificates and celebrations was also based on what each child may feel comfortable with and a social worker may be needed to help with that decision.

> For each child it will be different. So there's this little girl that I met with earlier this week. It all depends on her social worker to think of what she likes, what she enjoys and we will tailor it to her just to mark it. (LA13 CLA, Low)

Managers were aware that a key issue for children that made this a sensitive area of practice was the question of children's anxiety about potential losses that might in some cases be associated with the matching decision. The culmination of the matching process may be experienced as a positive confirmation of the current placement and the child's future with these carers, but also as a further loss of their birth parents or the dream of returning home. Some children may have to manage very mixed feelings; being invited to celebrate the gains of the reassurance that the foster family is committed to them and that they would not have to move again, while experiencing a powerful sense of loss and uncertainty about what it might mean for their relationship with the birth family.

> We had some discussion about celebration and sometimes it's very suitable. But sometimes that also marks the last loss of birth parents, so we're kind of trying to keep that on an individual basis really. Because we might be celebrating permanence through the way that we've celebrated adoption, but for the child it might signify a loss and they might have very mixed feelings about a celebration but they're not able to live with their birth parents...
> It's something that a foster carer will discuss with supervisor and child social worker and decide what is the best course for that child. A quiet going out for a meal might be on the day ... I'm cautious about over-celebrating like adoption, because it's a complex area. ..I'm very conscious that for some children it's not their first choice, it's their second choice. (LA51 FM, High)

It will be the sensitive practice by foster carers and social workers that can help the young person who may have unresolved longings for their birth family to reconcile these feelings alongside their now accepted place in the foster family. Complex feelings about the birth family would not be a reason not to go ahead with a process of naming the placement as a long-term foster care placement, but it needs a great deal of subtlety from the time the care plan is first raised through to the decision and any marking of that decision to show that the child can belong to both families.

Although the child's loyalty in relation to the birth family was often mentioned as an issue to be taken into account in matching practice and in relation to certificates and celebrations specifically, it is also important to bear in mind that for the child and the foster carers there might also be some mixed feelings or anxiety about the making of the commitment to each other with the label 'permanent'. So effective and timely matching needs to be in tune with the young person, the foster carers and the pace of their relationship. Thorough assessments for the match are always necessary, but low-key approaches to marking the match may be more appropriate at times, and this came across from a number of managers in this study.

Matching and support plans
In adoption it is expected in most cases that a support plan will be agreed, presented at the time of the match and approved by the adoption panel. This expectation of a support plan is also included in special guardianship. Even though resources may often not be as available as needed, there is a recognition of the need for tailored support for each placement. Support is also mentioned as a requirement of a long-term foster care plan in the 2015 guidance (Department for Education, 2015b:72, 3.104) and there was some evidence that support plans were becoming more common as a result, but they should be available in all cases.

The challenge for long-term foster care is that it may be expected that any child in care and their foster and birth family has appropriate support. But the support plan in long-term foster care needs to be specifically related to offering permanence in terms of offering security through to adulthood.

> The matching paperwork looks at [support] needs. It'll go through things like education, health, and will be saying how it's being met and that would carry on. They're still looked-after so there's still a care plan for the placement [which] makes it clear how those needs will be met...It's the same looked-after care plan that we'd have for the other children. (LA104 CLA, High)

Although there was an idea here that long-term foster children had the same support needs as other children in care, there could still be expectations that as support needs beyond the 'core offer' emerged over the longer term they would be met.

> Foster carers would go into the matching knowing what the core offer looked like, and they might have had the conversation with their network beforehand that would say, yeah, I think I can provide this if these things are in place. And

if they are within the scope of our service to put in place or to identify, then we'll do that. I suppose our fundamental position is that if it's right as a long-term option, we shouldn't have those blocks in the way; we should be able to find a way to shift them. (LA 107 CLA/F, High)

In some local authorities it was put rather differently, in that support was said to be good for their long-term carers, because all foster carers got a high level of support and from a diversity of specialists.

> There's a long-term linking report done, as well as a support plan as part of that. But support plans are for all of the carers...there is huge amounts of support for our foster carers...the plan is that we're going to have psychologists for each [area], we've got mental health coordinators that come and do direct work with children, direct work with families. We've got twelve households per supervising social worker, which really promotes the relationship based social work. There are lots of positives in the general fostering service. (LA 34 F, Low)

In this example below and some other local authorities, there was a perception that a more 'robust' approach to developing long-term foster care plans recently included the addition of specific support plans as part of the match.

> Once we've done all that matching and the child's been in placement for a year, it then goes to fostering panel. We'll do a matching report and we do a support plan... We're probably more robust with our matching process than we were previously. We never used to do support plans, we do support plans now. (LA25 CLA, Medium)

The fostering panel or other forum can provide a checking stage in the matching and support planning process and managers were keen to point out the importance of the availability of, for example, training on attachment and appropriate psychological support services, both for assessments and for therapeutic input to placements (LA34 F, Low).

An effective and responsive support service provided to all fostering placements would have a special role in sustaining stable and thriving long-term foster care placements. But a plan available at the point of matching would reassure the child and the foster carers as well as give a signal to other agencies of the commitment that had been agreed.

Long-term foster care placement endings
Managers talked about how difficult it was to anticipate the longer-term chemistry and support needs through assessment and matching, even though a child would be likely in most local authorities and most cases to have been in placement for at least a year before the permanence decision was made. Inevitably there were some placements that did not last as planned after the match was agreed. The majority of local authorities talked of trying to ensure lessons could be learned from these disruptions. In this case, the manager focused on the feelings the child and the carers had towards each other- and how resilience in the placement will depend on whether they actually 'like' each other over time and how hard that may be to predict.

Sometimes we can look at disruption and we can say 'Well this didn't work because of this' or 'It didn't work because of that'. But...sometimes the relationship between the child and the carer is crucial ...sometimes when you have the right chemistry between people...some carers will tolerate more with some young people or some young people will tolerate more with some carers because they really like them...We can do all the matching but sometimes it is about just whether people get on and actually like each other...But we don't really know, we can't quite often quantify what that's about. (LA7 IRO. Low)

Lessons from early placement endings could be particularly important to learn from.

Just this child has been through a lot, do you feel confident about some of the issues that they may present later on?...We've got out matching reports when placements have broken down to say well, did you do this, this, and this as it said at that time... I've done that, not routinely. But I think it's useful, if you've done a match, particularly if it breaks down fairly quickly, you think well what's gone wrong there, we only matched that placement a year ago. (LA12 CLA, High)

Disruption meetings were therefore an important part of local authority practice, but so also were interventions to support long-term placements in difficulties.

Conclusion

Assessment and matching the child's needs and the foster carers' capacity to meet those needs has always been an important part of fostering practice, especially where the plan is long-term foster care (Schofield et al, 2000, 2011). The 2015 regulations and guidance highlighted the importance of rigorous matching and the provision of support to make the matched long-term foster care placement a success and made this a requirement for local authorities. Although matching practice and its varied forms were recognised in earlier studies, the regulations and guidance are reported as giving a new focus to decision-making around matching. Issues raised by these previous studies by Schofield and her colleagues in relation to how this can be done rigorously, but in a child centred way have, perhaps inevitably, continued to preoccupy local authority staff and do suggest an ongoing need for good quality supervision and close monitoring of the operation of the care planning and matching systems as experienced by children, carers and birth families.

The introduction of the new long-term foster care codes added an additional element to matching principles and procedures in suggesting there needed to be a point in time when a decision has been made to officially recognise the status of this placement. This chapter has demonstrated a range of what can be thought of as good practice and is consistent with the regulations and guidance. It seemed likely that how matching procedures were used in combination with other factors such as attitudes to long-term foster care and recording practice could explain some of the differences in rates of recorded long-term foster care.

Summary

- The point in time of matching a child and a foster family is a crucial element in long-term foster care practice in both existing and new placements. Building up to this point is a period of uncertainty, of assessments of other options as well as long-term foster care, of careful work with all parties, especially the child - and after the match and the status of the placement is agreed, there needs to be a commitment to support this child throughout their childhood in this foster family.

- Key to understanding the variety and differences in local authority matching processes were the numerous meetings and panels involved. Key elements of difference included: the level of the decision-making forum in terms of the seniority of staff; the composition of the forum in terms of whether it is a standing panel (e.g. fostering panel, permanency panel) or a meeting assembled from professionals/caregivers involved in the case (looked after children review/permanency planning meeting); the range of professional disciplines present; the participation and attendance of parents or other relatives; the participation and attendance of the child; the documentation on which the matching confirmation relies; the extent to which a support plan for the long-term placement is built into the matching decision; the role of an agency decision maker or senior manager as the final stage in confirming the match; the nature of the communication to the child about this decision; the marking of this decision for the child in terms of certificates or celebrations; the degree of procedural flexibility for the child on a case by case basis; and the link between the matching and recording process and the data submission to the Department for Education on long-term foster care placements.

- Central to the issue of matching across these varied local authority processes was the common goal of achieving a robust system in terms of high-quality assessment and decision making, but also one that is sensitive to the needs, circumstances and wishes and feelings of the individual child.

- As all children in care need to have a permanence plan, it is important to consider how to manage care plans where matching procedures are rather rigid and children are excluded from the definition of long-term foster care but with no alternative permanence plan.

- The system for matching also needs to be rigorous and flexible to accommodate the range of placements with family and friends, with local authority carers and in the independent sector.

- The birth family's role in the life of the child must also be a focus in the matching decision and in support plans. Although the regulations do provide for a role for the birth family in procedures and the guidance provides a framework for practice, it remains an area of work than can become marginalised by the pressure of meeting other support needs for a placement, as also found in previous research (Schofield and Ward, 2011).

- Finally, from the data available, no individual elements of matching procedures and practice seemed to be clearly associated with the rates of recorded long-term foster care placements when considered in terms of high, medium and low local authority tertiles. However, it seemed likely that how matching procedures were used in combination with other factors such as attitudes to long-term foster care and recording practice could explain some of these differences.
- Local authorities should be able to use this analysis of matching practice to reflect on their own foster care population profile, use of care plans and matching, and practice in coding foster care placements - as well as reflecting on the more detailed, and subtle professional practice clearly needed in matching to accommodate the needs of the range of children and long-term foster care placements.

8

Social work visits and statutory reviews in long-term foster care

New in the 2015 regulations and guidance for long-term foster care was the reduction in the statutory minimum frequency of social work visits and also the potential reduction in the frequency of looked after children review meetings. The changes in these two aspects of long-term foster care placements have the same goal, in the sense of achieving a less intrusive role for the local authority and a more 'normal' family life for the child in a planned permanent placement.

Trying to capture the range of attitudes, approaches and changes that have actually occurred as a result of these permitted reductions has proved one of the significant tasks and challenges of this project.

Frequency of children's social worker visits

The previous Care Planning Regulations (2010) did recognise the need for some possible differences in monitoring and support for long-term foster care placements and allowed for a reduction in social work visits to the child from six weekly to three monthly where the placement was 'intended to last until the child is aged 18'. (Department for Education 2010, Regulation 28 (2)).

From 2015 the statutory requirements for the frequency of visits in long-term foster care allowed a reduction to six monthly after the first year of the placement.

> Where the child is placed in a long-term foster placement, the child should be visited within one week of the start of the placement. Thereafter, the child must be visited at interval of not more than six weeks for the first year of the placement [regulation 28(2)(b)]. Visits during subsequent years must take place at intervals of not more than six months, where the child, being of sufficient age and understanding, has agreed to be visited at this minimum frequency. [Regulation 28 (3A)]. (Department for Education, 2015b, 3.234)

Unfortunately, preceding this paragraph in the 2015 guidance (repeated in the 2021 edition), there is a paragraph suggesting that there is also provision for a 'permanent placement intended to last to age 18', which retains the statutory minimum of three-monthly visiting from the 2010 guidance. This is clearly a drafting error, as the definition of long-term foster care is that it is a permanence option and intended to last to 18. So not only does the guidance suggest there are two different options, permanent and long-term, but they are to have different levels of statutory visiting. It was the intention of the 2015 regulations and guidance to ensure that there were not two separate permanent and long-term foster care options, as research had previously found existed in some local authorities and was confusing and unhelpful (Schofield et al, 2008, 2011). It also seems possible that this error has added to the uncertainty we found in local authorities about whether the current regulation was for a three or six-monthly statutory minimum for visiting in cases recorded as long-term foster care but considered a permanent placement.

Another important element in the regulations was that the decision to reduce visiting to six monthly depends on the child's agreement i.e. 'where the child, being of sufficient age and understanding, has agreed to be visited at this minimum frequency'. Though it would be hoped that a child would always have the opportunity to discuss the frequency of visiting by the social worker, this regulation does require a more formal and recorded approach. It would also rule out the idea that there could be any automatic reduction in visiting to six monthly when a placement was approved as long-term foster care.

The guidance also supports both consultation and assessment, making it clear that decisions about the frequency of visits must be made on a case-by-case basis and the social worker should always visit when requested.

> However, the frequency of visits should always be determined by the circumstances of the case and the authority must arrange a visit whenever reasonably requested by a child or foster carer regardless of the status of the placement. (Department for Education, 2015b 3.235)

The permitted flexibility from 2015 for local authorities to reduce the statutory minimum for social work visits, whether to three monthly (as in 2010) or further to six monthly in agreed long-term foster placements raised a number of issues for local authorities around both the child's experience of permanence in foster care and the role of the corporate parent. So it was not surprising that local authorities and individual managers differed in their response to this aspect of the regulations and guidance and in their accounts of whether, why and how reductions in visiting were implemented.

Local authority policy and practice on the frequency of social work visits
In the questionnaire for the local authority survey the question on social work visits reproduced the regulation regarding the potential reduction to a new statutory minimum frequency of six months in long-term foster care. A majority of looked after children managers 72.6% (n=77) reported that they had reduced the frequency of social work visits in line with the regulations and guidance to at least some children

in long-term foster care placements. However, twenty-four of these local authorities noted in the survey comments box that visits were actually reduced to three monthly, the previous 2010 statutory minimum in long-term foster care and not the 2015 permitted six monthly. As these comment boxes were optional, it is possible that other local authorities also saw the reduction as being to three-monthly. The majority of the managers interviewed focused on possible reductions to three-monthly from standard visiting practices- which could be monthly or six-weekly. A minority (25.5%, n=27) of the survey respondents reported that their local authorities had not reduced visiting frequency, with 1.9% (n=3) not knowing if visits had been reduced or not.

Just over half (52.9%, n=45) of the respondents said the decision to reduce social work visits was made at the looked after children review, with 23.5% (n=20) reporting that the decision was made by a team manager. A further 23.5% (n=20) mentioned other decision-making options, which could be a decision by the head of service, a senior manager or a joint decision following the looked after child review. On the whole, managers were positive about their decision-making processes, but there were still concerns about it being a difficult decision in some cases - and one manager felt that the decision-making was 'too inconsistent, we need to tighten this up'.

Some managers reported in the interviews that they felt that the guidance from the Department for Education on reducing visits in long-term foster care was unclear and difficult to find. This perhaps contributed to incorrect interpretations by a number of local authorities of the 2015 guidance as reducing minimum statutory visit frequency to three months in long-term foster care.

> The one thing that will change [after matching] is the visits. Statutory visits can be twelve weekly rather than six-weekly...I think [the guidance] is actually quite unclear and there was a discussion in the office not long ago about where it is actually written into the procedures that we can do this because no one could find it. (LA53 CLA, Medium)

Even service managers seemed unfamiliar with how to check current government regulation and guidance. This rather supports the idea that it would have been useful for managers and practitioners to have the regulations and guidance relevant to long-term foster care available together in one document or set out in the local authority's own permanence policy, as had happened in some areas.

Numbers of children in long-term foster care experiencing reduced visiting
Respondents in the survey and interviews could not specify the numbers of children in long-term foster care placements who were experiencing reduced visiting, partly because this data is not aggregated, but also because visiting frequency did, as would be expected, fluctuate. In the survey, several respondents noted in general terms that a reduction was 'not common', was 'rare' or 'unusual', although three local authorities noted that it was 'common'.

The interview sample gave examples of a full range of attitudes and practice in relation to social work visits. Two managers reported that visits were reduced in the majority of matched long-term foster care placements. One of these suggested that this 'lighter touch' approach was due to the culture of the authority seeking to make foster care as 'ordinary' or 'normal' as possible for children (a theme discussed in more detail below).

> Probably about 60% or 70% of our formal long-term matched foster arrangements have got lighter touch. We've got quite a high number of lighter touch arrangements in place, I think, in comparison with other local authorities. … We see it as a positive thing where it's right to do… It's along the lines of what I was talking about in terms of making foster care a more ordinary experience, and as ordinary as it can be. (LA107 CLA, High)

A fostering manager suggested that 80% of their long-term foster care placements had reduced visiting, although they specified only reducing to three-monthly and even this was done gradually.

> We might reduce to six weekly and then after a period of time we might go to eight to twelve weeks so that it's not an overnight thing. (LA19 F, Low)

In contrast, another manager reported that reducing visits was 'very infrequent' and only for children who were settled in a foster family and 'don't see themselves really as in care'. (LA109 IRO, High). In general even where local authorities did have a policy of allowing visiting six-monthly, managers could identify very few cases where this had happened. One manager suggested that no children in their local authority were currently experiencing this arrangement.

There were managers who were firmly against the full reduction.

> I mean the guidance goes up to six months. I don't think we've even told our social workers that…Because I cannot think of any children where that's appropriate. (LA12 CLA, High)

The decision not to reduce social work visits to the extent allowed in the regulations and guidance was also said to be due to feedback from foster carers who appreciated regular input from the child's social worker and saw it as recognising their role in the 'professional team'.

> [Visiting reduced to] twelve weeks depends on how long the child has been with us, but we do not do the maximum [gap of] six months…Foster carers tell us that the success of the placement is partially because of the role of the children's social worker… Foster carers sometimes are disenchanted because they don't see the children's social worker enough. They don't feel it's a kind of intrusion, they actually feel a sense of working as part of the professional team. (LA57 F, Medium)

In some authorities, practice in this area was still developing, but cautiously, to build confidence in foster carers and social workers.

> At the moment I would say it's a growing minority. We started off with very few, but we are seeing that that is growing in momentum now and I think it is more to do with confidence all round that the foster carers don't feel they are left unsupported, but equally social workers are not worried that they are not seeing the child frequently enough and to get to manage the child best and certainly they are very confident. (LA8 IRO, Low)

Managers in local authorities where reduced visiting in long-term foster care took place stated that there was flexibility in this decision and that more frequent visits could easily be reinstated, either because it was requested by the child or the foster carer, as in the guidance, or as deemed necessary by social workers. The awareness of this flexibility to increase as well as decrease visits was a feature that helped reduce some of the anxiety in reducing visiting.

Themes influencing attitudes towards reduced visiting

There were three themes that in particular informed attitudes to the principle and practice of reduced frequency of visits for children in long-term foster care, and the perception of the balance of potential benefits and risks: achieving a more 'normal' family life for children in foster care; fulfilling the safeguarding responsibilities of the corporate parent; building the relationship between social worker and child.

Achieving a more 'normal' family life for children in foster care
A number of managers suggested that the possibility of reducing social work visits could be beneficial to children who wanted to belong to a more 'normal' family and that the 2015 regulations and guidance were helpful in allowing practice to be more child-centred and child-led.

Managers from both children in care and fostering teams mentioned having engaged with a number of children over their careers who were settled in their foster families and had been in a stable placement for some years. They described some of these children as not wanting to have a social worker. While this was not possible without a legal change, such as a special guardianship order, reducing visits from six weekly to twelve weekly (NB still more frequent than actually permitted by the 2015 regulations and guidance) was seen as a way of listening to and meeting these children's needs.

> One child I could think of specifically who's like, 'I don't really need a social worker, I don't want anyone coming around' ...Well let's just do twelve weekly. She's doing okay, the carer is more than able to meet her needs, she's fourteen and doesn't want to be a LAC child...If they are old enough and they have been in the system long enough then they let us know. (LA33 F, Low)

Managers frequently described children as wanting to be 'ordinary' or 'normal' with visits and reviews acting as a constant reminder that they were, somehow, 'exceptional.' As the following looked after children manager describes, reducing social work visits and meetings was a way of meeting the needs of these children and helping them increasingly feel part of their foster families.

> The child is settled, they're in a family environment...Often it's the kids that want that to happen much quicker than what we do it...They want to just feel normal and don't want to be continually having social work meetings, or LAC reviews...So it fits nicely in terms of children settling and having a more normal kind of family experience really. (LA13 CLA, Low)

Managers suggested that reducing visits and meetings can be particularly helpful in connected persons long-term foster care placements, where it was often both the children and the carers who wanted less oversight from social services, but perhaps were reliant on the financial and other support that came with the children remaining in the foster care system and so did not seek special guardianship.

> Some of the kinship placements we've had... a couple of the teenagers...they don't really want to be looked after. Their grandparents would prefer us not to be there. It is because of our financial regulations and the government assessment ...It's (SGO) means-tested, so if they were not foster carers they would get nothing because of their income. So they remain as foster carers. But actually the young person doesn't want to see the social worker, they don't turn up to their looked-after reviews, so they do the minimum for a long-term match. Because that's about tolerable to everybody involved and that's sticking to our statutory duties. (LA104 CLA, High)

Other managers, however, found it difficult to come to terms with reducing visits within long-term fostering arrangements, feeling that if placements were very settled and foster carers and children wanted less input from social workers, carers ought to apply for a special guardianship order.

> If you have got that level of settledness, then you have probably got a very self-supporting carer who is just getting on with things...In those cases, you would be wondering why they are not going for an SGO... I think often it's because they have some sense that they won't get the support or their lack of trust. (LA109 IRO, High)

There were also some other difficult questions that needed to be addressed: for example, whether requests for reducing social work visits may in some cases be the idea of carers and not necessarily reflect the wishes or be in the interests of the child.

Fulfilling the safeguarding responsibilities of the corporate parent
While some managers described the potential benefit to children and their long-term foster care families of reducing visits because it was thought to help to normalise lives

and reduce the stigma of being in care, most managers expressed some concerns about the anxiety which reducing visits generated for social workers and the tensions that arose in fulfilling the safeguarding responsibilities of a corporate parent.

Managers frequently highlighted the legal responsibilities that they and children's services had for the child and that this legal responsibility meant being accountable as corporate parents, but also feeling personally responsible for that child and their needs.

> When you're a corporate parent, you are these children's parents in a way their foster carers legally aren't. And you're accountable and you're responsible for making sure their needs are met. So I'd be quite anxious as a social worker, unless it was really, really settled, that I was only visiting a child six months later. I'd feel quite anxious about that. (LA14 IRO, Low)

For some managers, reducing visits was seen as high risk in that there could be serious consequences for the children and the local authority if safeguarding concerns were missed. This could generate anxiety for both social workers and managers, who without direct contact with the child could not be confident about knowing the truth about the child's safety or well-being in a placement, especially when social workers changed quite frequently.

> If the same social worker has been involved with a child for a large chunk of their history and so they know them well ...all will be well and that's fine. But if you are having a lot of change then how do you ever come to that judgement that it is safe to reduce the visiting frequency? It's a really difficult one you know...I imagine everybody is just sort of a bit terrified to come to that point where they've done all that reduction of visiting and then something really awful happens and the child is abused or killed or something and everybody is saying 'What did we miss?' and 'Why did we let this happen?' (LA109 IRO, High)

As the IRO above describes, social workers and managers needed to be able to trust their assessments when reducing visits, knowing both the child and the foster family well. Often the conditions where managers felt reducing visits was 'safe' meant continuity and lengthy duration of the relationship between the child, the social worker and the foster carers; good communication between them; and trust that all parties, but particularly the child, would proactively seek out the social worker if any problems emerged.

Given the challenges of satisfying these criteria, there were local authorities who for safeguarding reasons felt that reducing social work visits in long-term foster care to six-monthly was never appropriate and so had not done so.

> I know we haven't really totally embraced the further stairway of the local authority in monitoring long-term matched placements. We still have a high level of those. Perhaps says a lot more about [LA 78] and where we come from than actually the long-term matching process that we need to still have that degree of confidence and reassurance that our children are all safe and secure. (LA78 CLA & F, Low)

It was interesting that this local authority perceived itself as having a high number of matched long-term foster care placements, but relative to other local authorities this was not reflected in recorded data submitted to the Department for Education.

The local authorities who were reducing visiting even to three-monthly reported that they were supplementing this with other types of checks in order to feel confident that what were described as 'lighter-touch' visiting arrangements were working. This could include, for example, extra 'check-ins' with schools and the child's foster carer.

> Not less than three-month frequency with email or phone calls in between... What you need to do is have a check-in point between those visits with the schools and with the foster carers to make sure problems are not coming up, but no one is telling you, so you do need to have a good checking and maintenance I think in-between. (LA49 CLA, Medium)

Additional safeguards mentioned included relying more on the supervising social worker to maintain awareness and knowledge of the whole household, including the child's wellbeing.

> We always insist on at least three-monthly visits even for long-term foster placements...It's the default.... And of course the supervising social worker is visiting more regularly, and what we've said to our supervising social workers is that, look, you should be the professional that knows the fostering family better than any other professional, and your job is not just to supervise and support the foster carer, but actually to get to know the whole of the household, and also to see the child, the foster children there as well. (LA37 CLA, High)

On the whole there was less than expected discussion in both the survey and the interviews of the potential role of supervising social workers as providing additional support and monitoring in long-term placements where children's social workers visited less often. But this account from a looked after children manager was a clearly-articulated account of the role of the supervising social worker in helping to monitor the child's development and progress, relevant whatever the frequency of visiting by the child's social worker or indeed the type of placement.

Relationship building between social worker and child
A number of managers interviewed described their concerns about reducing social work visits because this might impact negatively on the relationship between social workers and children, which they felt was mainly built through visiting the child. It was acknowledged that there was a range in the quality of these relationships, a point clearly reflected in the research team's consultation with the Cafcass Family Justice Young People's Board, however it was important to give that relationship the best chance of success.

For some local authorities this concern about relationships meant deciding not to reduce visiting in long-term foster care placements to less than three-monthly

and in fact, as with managing any safeguarding or support concerns, to encourage more frequent contact of different kinds in between statutory visits. The following looked after children manager argued that they were dealing regularly with children's complaints that they did not see their social worker often enough, rather than that they wanted to reduce visits.

> We are still three-monthly for children in long-term placements and I think there is something very positive about that as well… This authority very much functions on the relationship basis of work with children and young people, and sees that to have a meaningful relationship you have got to see your children more often and actually have support for building a good relationship with a child where they want to see you. (LA79 CLA, High)

Other managers took a similar stance of not wanting social workers to reduce visits, suggesting that children would only confide in social workers they knew and trusted, which meant seeing them more regularly than the regulations allowed.

> We never encourage our staff to do even what the old procedures would say…I struggle with it…Why would they talk to you if they just see you every three months?… I think [the guidance] says you can reduce it to these levels, it never says you have to. (LA104 CLA, High)

Other managers suggested that once the relationship between social worker and child was established and good communication was a feature of the relationship, they would be more open to the idea of visits being reduced, but again this was not to the six-monthly statutory minimum allowed.

> There would need to be good communication [with those children] and the social worker, that they feel that actually if I don't go every four weeks, I know that child is going to contact me or that child is going to tell their foster carer, for instance. (LA24 IRO, High)

The overall message from this and the other two themes was that even when a long-term foster care placement was formally agreed and stable, reducing the frequency of social work visits was not a decision to be taken lightly.

Factors in making individual decisions

Linked to these themes identified by local authorities regarding the frequency of social work visiting were factors said to be taken into account in individual cases.

Experienced carers who would share any concerns
It was emphasised that placements where it was decided that visits could be less frequent usually had the common features of experienced carers who would know to contact the social worker if it was needed.

If they truly are stable placements then they are likely to be with carers who are robust, skilled and experienced carers who are able to advocate well for children and know who to contact if they're concerned about something... I think there probably is an inevitability that there is a reliance on the carers to inform the social worker, to flag issues if something significant has changed, or if things are feeling as though they are changing for the child, and that the child therefore needs more regular visits. (LA29 IRO, High)

Children who are able to be proactive
Another key factor in considering a reduction in social work visits was confidence that the child would be proactive enough to contact the IRO or social worker if they had concerns to communicate.

Part of my decision making would be, would this young person or child contact me if they needed to, or somebody? I'd want to feel confident that they could do that...We don't use social media in our team...but quite a lot of my young people text me and say, 'Can you call me?' or sometimes they just text me to tell me something nice has happened... There's few situations where life is that settled I think for anyone. (LA14 IRO, Low)

This other IRO manager also suggested that encouraging children to communicate themselves, in a variety of in-person and technology-friendly ways, was ultimately positive and protective for children and would be especially relevant if social work visits were to be reduced.

And there's other ways, isn't there, of children communicating that can be a protective factor depending on the age of the child... If they're a child that's got access to social media they can contact the social worker themselves, using the app for example. They can even contact us over the phone...They can also contact things like our participation team, who have a regular presence on social media, they can contact that team as well. (LA29 IRO, High)

The availability of other people ready and trusted to listen, who might be independent of the social worker, such as teachers, is an important resource for any child in care, but might be especially valuable where visits had been reduced. But although it was important to encourage every child to take the initiative to communicate any concerns they may have, the consensus view was that this would not be a substitute for the social worker accessing other sources of information about the child's well-being, even in settled placements.

Young people on the Cafcass Family Justice Young People's Board had very different experiences of relationships in their foster families and with social workers, suggesting that young people would vary as to whether they would feel confident in communicating concerns, depending on their situation and confidence in key people.

Age and stage

As in all aspects of decision making in long-term foster care, age was a factor in decisions about the frequency of social work visiting. While managers suggested that it was teenagers who were predominantly the ones requesting reduced visiting, it was teenagers even in apparently settled placements who often caused the most concern. The teenage years were said to be when previous traumatic experiences might be triggered, new behavioural difficulties might emerge and, as a result, placements might break down.

> I think you might say, well the child's been in placement for five years or six years and they're very settled. But if they've been in placement that long, they're just hitting adolescence. And we know that adolescence brings up lots of issues for children. I've known of cases where people have said you know, we really don't want social workers because it's so settled, and then things break down and it's teenage stuff... As teenagers I think they need visiting more frequently. Even if they don't want to see you and tell you to get lost, at least that's a good sign... So, our minimum is three months. (LA12 CLA, High)

These adolescent placements, therefore, were also sometimes the ones where the option of reinstating more frequent visiting was anticipated. Fostering managers echoed the concern that teenagers often required additional support, resulting in increased visits at times also to foster carers.

Having a consistent social worker

Having stable and consistent social workers, as well as carers, was said to be a key factor in allowing reduced frequency of visiting to happen.

> I think having consistent carers and consistent workers helps because then you get those relationships ...The social worker knows the child, the child knows the social worker. (LA66 F, High)

In line with this view, visiting frequency could be automatically increased if, for example, the child was assigned a new social worker. Managers felt that this was necessary for relationship-building between the social worker and the child.

> I've had a few where it's been three-monthly, but I've had a new worker start, so they've gone more frequently to set up those relationships and get to know the young person...So it's three-monthly, but there's flexibility there within it. (LA25 CLA, Medium)

Good communication in the wider professional network

Ensuring the continued well-being of the child was said to rely on more than the frequency of visits or expecting the foster carer or the young person to get in touch when needed. As this looked after children manager describes, good communication from the wider professional network that surrounds the child was important and necessary.

It's that link with other professionals... speaking to schools, speaking to health, etc. IROs in agreement with the plan... Keeping those lines of communication, so if there is anything going amiss, people know who to ring and how to get in touch sooner rather than later. (LA25 CLA, Medium)

Keeping the child in mind: flexible views of statutory visits
A range of important strategies for prioritising communication with the child and about a child's well-being could mean taking a more flexible and perhaps creative view of what visits or more generally 'contacts' could be. Taking such an approach would perhaps satisfy both children's and carers' desire for a more 'normal' family life and managers' expectation that social workers stay in contact with the child in order to maintain both a safeguarding role and positive relationships.

I would like to see people be a bit more flexible about what they understand by statutory visits to be honest. So then you can still maintain contact, but you don't have to do the visit...I think it is probably the way people do it that is the problem. (LA7 IRO, Low)

Other IROs described how 'visits' could be tailored to the individual child, in the shape of regular face to face meetings, interspersed with brief conversations with the child, telephone calls, messaging or other strategies to signal they are still in the child's life and are keeping them in mind.

It is more about supporting that interest in that young person and showing that they are being kept in mind, are visible...Different children are going to experience that in a different way...It's about that individual thinking about actually how will it work best? We might have a social worker visiting and they may see that child quite briefly and they are talking to the carer...It's about how they kind of do those things... to support the placement... How the social worker communicates their 'Well done!' or what the next steps are and keeping them in mind about key points for that young person really throughout their lives... It depends on the needs of the child. (LA 49 IRO, Medium)

Rigorous decision making
Finally, the acceptability of reducing the frequency of visits for a child, even to three monthly, was said to rely on taking an informed and individualised approach to their welfare and wishes.

There are children who may need that visiting, that frequency - and then there will be others who are so stable and they are doing things appropriately that may need minimal visits...[or] it can be communicated by telephone... It depends on where the child or young person is in placement and how they are faring...and also the wishes and feelings of the child... (LA 49 IRO, Medium)

But in particular it meant having robust decision-making procedures and sensitive practice, including, as in this example, having perhaps a gradual, trial reduction in visits in the context of a good relationship with the foster family.

Obviously certain checks have to be taken beforehand in that there is senior manager agreement to move to flexible visiting. But it is then about the relationship between the social worker and the family ...We need to make sure that it's not detrimental and so it is not automatic. It is open for further consideration but we are very confident that if we go to flexible visiting at the twelve month review it is a fairly stable secure placement for that child... (LA 8 IRO, Low)

While many managers described being ready and flexible to resume more frequent visits after reducing them, most local authorities had not had to do this. This was in part because few placements experienced reduced visits, but mainly because they felt careful decision-making was in place around which placements and children were appropriate for a reduction in social work visits – and, also, the reduction was just to 12 weeks.

I think by and large [the reduction of visits to three-monthly] has been beneficial and it is something that fostering has also been taking on board because that's something that the whole fostering culture has been asking for and we haven't yet seen situations where we had to go back and increase those. (LA65 F, High)

In these examples it seems as if local authorities are now working more comfortably with what was actually permitted in the 2010 guidance in placements planned to be permanent in preference to moving to the 2015 guidance on six-monthly visits in long-term foster care, which appears to be rarely used.

Frequency of looked after children review meetings

The focus on avoiding potential intrusion by the local authority and the need to secure normal family life for long-term foster children applied also to the frequency of review meetings. The possibility of a reduction in meetings as part of the six-monthly review was an important statement about the distinct difference expected in the practice for supporting/monitoring a long-term foster child and managing a long-term foster care plan/placement.

This change did not require a change in the regulations as a statutory review is still held every six months, but it is based on the same principle as the regulation for reductions in visits i.e. that the child should be placed in a long-term foster placement and have been in placement for more than a year. In these circumstances, 'consideration should be given to whether it is necessary to hold a meeting as part of each review.' The use of the word 'should' is important – and also applies to the process of consultation.

The social worker should consult with the IRO and the child (where appropriate to age and understanding) in reaching a decision about holding a meeting. The

consultation, information gathering and review process will continue on a six month cycle. In circumstances where it is agreed that a meeting will not be held as part of every review, a meeting should be held at least once a year. The factors leading to the decision to hold review meetings on a less frequent basis should be recorded in the child's care plan. (Department for Education, 2015b, 4.18)

Unlike the frequency of social work visits, the child does not have to formally agree to this arrangement for one review a year to be conducted without a meeting, but it would be expected that the required consultation with the child as well as the IRO, would be a key part of the decision.

There is no specific guidance on the process for the review without a meeting at the intervening six-month point, but there needs to be appropriate alternative arrangements that perform the same function as a review that includes a meeting. As discussed further below, reviews without meetings were sometimes referred to in the survey and interviews as 'light touch' and could include paper reviews, telephone reviews or reviews that involved the IRO meeting with the child, the carers, the birth family and other key people.

From our survey, the extent to which this option for reducing review meetings had been implemented ranged, rather as with social work visiting, between a small number of local authorities for whom the change to one review meeting a year was almost automatic in long-term placements; through a range of 'light touch' approaches, some with staff more positive about reductions than others, but mostly leading to low numbers having a reduction; to local authorities who continued to have review meetings every six months in all cases.

What emerged from the data was that there was great variety in how both review meetings and the reviews that did not include meetings were managed. This will be an important theme throughout this section, just as what was valued and could be flexible in a social work visit was a key theme in the previous section, in order to reflect on what might be seen as models of good practice.

Numbers of local authorities who had reduced the frequency of review meetings
According to the survey of IROs, a minority 44.6% (n=41) of local authorities had reduced looked after children review meetings, 52.3% (n=48) of the respondents had *not* reduced the frequency of looked after children review meetings and 3.4% (n=3) of the respondents did not know if their local authorities had reduced the frequency of meetings in any cases.

How the decision was made
The decision whether to reduce the frequency of looked after children review meetings was made at a review meeting according to 73.8% (n=31) of respondents. 26.2% (n=11) said the decision was made elsewhere, but often jointly between the IRO and a senior manager.

The approach was often cautious, but IROs were key to the decision to undertake what was described as 'light touch' reviews (i.e. without meetings) and they would apply certain conditions; in this case, the need for the child to be well-known to the IRO was said to be a priority.

> The policy is that once children have been linked and matched for twelve months [light touch reviews] can be considered.... In practice it's an IRO decision [and] it is probably going to be you know quite a bit further down the line really before people think that's going to be a good idea to reduce to that level and an IRO is going to really want to feel that they know a child really well before they make that judgement. (LA109 IRO, High)

Uncertainty about the regulations and guidance on review meetings
As with the guidance on social work visiting in long-term foster care, there seemed to be a lack of familiarity in some local authorities with the Department for Education guidance on review meetings and a perception that the guidance was unclear, which was said to lead to uncertainty and, therefore, playing safe.

> I am not sure that people are always as fully aware of that option [to reduce review meetings/visiting] as perhaps they should be...When it has been discussed it sort of feels like almost like a bit of a surprise and therefore people feel wary about accepting it, because they feel they are stepping away from regulations and guidance, albeit that they are not ...People feel insecure about it and they feel that they are being safer by sticking with the older standards. (LA64 IRO, High)

It seemed that, also rather like potential reductions in the frequency of social work visiting, the 2015 option regarding reducing looked after children review meetings was only just starting to be disseminated or implemented in 2019 in some areas.

> The IRO service manager only recently sent round the proposal about the reviews. Perhaps they thought it was not the right time because there was too much change, or they were getting more settled looked-after children, who were matched. (LA51 F, High)

Perceived benefits of the potential reductions in review meetings
Although there was widespread caution, it was clear that having the option of reducing the frequency of review meetings had been welcomed by some authorities and, for a range of reasons, was seen as a potential benefit for the child.

One reason given for welcoming the opportunity to reduce the frequency of review meetings in some cases was that they were perceived to have become more bureaucratic and therefore less positive for the child's participation.

> We do reduce the number of looked-after reviews at times...I think some young people don't want to feel different and don't like our reviews. Over the

time that I've been a social worker, the nature of those reviews seem to have changed...26 years ago I started as a social worker, almost every review was in the foster carer's home with birth parents there and the IRO, the social worker and the child. Over the years, in order to gather information the meetings have become much more bureaucratic, professionals round a table. It becomes much more challenging for a young person to come into. (LA104 CLA, High)

Other UEA research (Schofield et al, 2011) found that young people in long-term foster care had very varied views on what they preferred in terms of participation and venues for review meetings and this was confirmed by the consultation with the Cafcass Family Justice Young People's Board for this current project. For example, one young person very much disliked having the review at school, whereas for another young person this was their preferred option. The need to ensure that the review is able to undertake its statutory role while flexibly meeting the child's needs and wishes is clearly an important part of the work of the team around the long-term foster child.

A related benefit to reducing the number of meetings was said to be that this option can help the child to feel 'less singled out'. In this example, unusually, both reductions in social work visits (though only to three monthly) and review meetings were automatic following the match.

> Once a match has been agreed, we do reduce social work visits to once every three months... And the LAC review, it's a paper one, every six months, so a formal one every year...It just kind of helps the child feel less singled out as looked after and less different from their peers. (LA60 F, Low)

This positive view was said by another manager to be reflected in children's feedback.

> It has been well received by some children... Those children who do want less intrusion, they are the ones who have been saying they don't want to be made to feel like they are in care, so it's been better from that point of view. (LA109 IRO, High)

For children who were settled in placements with connected persons or kinship carers, reductions in review meetings were described by managers as allowing caregivers to maintain more 'normal' family identities.

> They don't see themselves as professionals - they are grandmother, grandad, auntie and the meetings can often feel the opposite of normalising...They just want to get on with things as a normal family and forget that the child is looked after and that they are kinship carers. (LA53 CLA, Medium)

The theme of 'It's good to have it as an option' to reduce meetings, even if not often used, was also said to be more relevant where children were placed at a distance, again especially with relatives. But here too, this decision would be conditional and for this IRO manager it meant ensuring that other good support was available for the placement.

> I think for my (IRO) contacts both regionally and nationally it's not that often used really. It's good to have it as an option. Say for instance, if you've got a child placed at a distance whose been placed with relatives for five years or more, the young people are saying well actually we hate this whole review process. We've got somewhere where we would do an alternative review as a consultation system process without having to have a meeting. But, again, you would want to be satisfied that placements at that sort of distance are still well supported. (LA104 IRO, High)

It was also common to suggest that even where reduced frequency of reviews was thought valuable as an option, flexibility in each case and over time was key to policy and practice.

> I think we may have one paper, one direct...Of course, it's flexible and of course if something changes and shifts and it needs to kind of go up, as it were, then that's what we'll do, because it's about making sure that it's the right arrangement...I think the lighter touch [part of the regulations and guidance] has been useful, because it's giving permission, I suppose... to reduce the load on all concerned and bring that experience down to something that may be a little less extraordinary for children and for the people looking after them. (LA107 CLA, High)

This theme of the benefit to the foster child and the foster family of arrangements that were 'less extraordinary', reflects the intention of the 2015 regulations and guidance to reduce the frequency of meetings where children were settled in agreed long-term foster care placements. But it was clear that there was felt to be a need for caution and a case-by-case approach in most local authorities, as indicated in the guidance, was necessary, given the range of factors involved.

Concerns and reasons for low take up
Some degree of caution, even in local authorities who had taken up the option of reducing meetings, seemed to lead in most local authorities to the provision only being used for a limited number of children. In some authorities it had been established as an option in policy, but was rarely used in practice.

> They (2015 regulations and guidance) affected us a bit in that we changed our policy to say that you could have annual meetings so every review didn't have to have the meeting and you could reduce visiting to six monthly. But ...I only know of two cases that that's happened in. (LA14 IRO, Low)

A number of issues were contributing to the fact that few placements were deemed appropriate for this reduction in meetings. But, as mentioned above, one factor was a lack of awareness and confidence in the guidance, nationally and locally.

> I'm not sure if I would (do a paper review instead of a meeting). There's about two young people I think that would be OK...I don't think there's enough

national or local guidance on that. I don't think there's enough discussion about it either. (LA25 CLA, Medium)

Other reasons offered for the low take up of this option included similar reasons to those given for not reducing the frequency of social work visits, in particular safeguarding concerns that a child would not get in touch if they had problems.

> I've got 78 cases and I think there's probably only one that I think I would be happy to say that actually if I didn't see the child I'd know that they would contact me if they needed to. Because that would be the other thing for me, part of my decision making would be, would this young person or child contact me if they needed to, or somebody? (LA14 IRO, Low)

This example seemed to suggest that the lack of a meeting would mean a lack of direct contact between the IRO and the child. The absence of a meeting in some areas led to an expectation that the review process would include an individual meeting between the IRO and the child and other parties, while in others it meant a 'paper review'.

Some local authorities who had reduced the frequency of social work visits in long-term placements were then reluctant to also reduce review meetings, as this combination was thought to result in too little oversight.

> We tend to rely on the LAC review meeting [every six months], actually, if visits aren't as regular. And that is because we really support the role of the IRO, the independent person and overseeing the care plan, making sure that the LAC team and the fostering team are complying with the agreements that we've made. (LA19 F, Low)

It is important to reflect on this perception that the absence of a review meeting affected the rigour of the review process in relation to the IRO's role in following up the care plan. In long-term foster care this would have moved on from planning a placement choice and be focussing on resources to support placement stability and the quality of the child's progress in the foster family. Given the range of approaches to reviews that did not include meetings identified in this study, this does suggest that the quality and rigour of alternative processes for gathering and sharing information and communication outside of a meeting would need to be ensured by the IRO, fostering and looked after children managers working together with the carer and other agencies, good practice as recommended in all reviews (Dickens et al 2015).

The role of reviews in avoiding drift was frequently stressed in the study generally, so it was perhaps not surprising that concerns about a risk of drift were also raised in relation to reducing the frequency of meetings. In this example, the risk of losing the child's voice is also mentioned.

> I used to manage an IRO service when all that was originally being talked about and I know there was anxiety around whether that then introduces potential

for drift and delay and the child's voice potentially getting a bit lost within that. (LA30 CLA, Medium)

As the plan had been confirmed as long-term foster care, 'drift' would be about resources to meet needs - for the child, the foster family or the birth family - not being addressed in a timely fashion. Here too, the nature and quality of practice in reviews outside of meetings needs to be considered. Perhaps some of the anxiety related to the fact that even with review meetings there are often some concerns about the quality of participation, rigour and effective follow up of decisions to address problems (Dickens et al, 2015). So it is perhaps not surprising that local authorities were cautious about reviews without meetings - even though it would be expected that if there were any concerns in the placement then a meeting would be held.

From the discussion about what happened in the conduct of a review where there was no meeting, another concern emerged - that this 'lighter touch' approach could actually take more staff time than holding a meeting, a factor which may have added to reluctance to use this option.

> From what I can see, the amount of work it generates for the IRO is almost more than the standard review...I don't think there is a sense that 'Oh this is a really big thing and it has made a big difference'...So it's definitely used, but I don't think it's a huge part of our practice. (LA53 CLA, Medium)

> We looked into it and the IROs just said 'But it's more work. We need to go and see the child, talk to the carer, have a conversation with parents separately.'... It sort of defeated the object of everything. (LA7 IRO, Low)

The comment that this potential increase in work 'defeated the object of everything' suggested that the aim was perhaps thought to be to reduce staff time rather than a child potentially benefitting from a less intrusive system. Although whether the carer and child would prefer a one-to one meeting with the IRO to attending a review meeting and would find it less intrusive may be different in each case.

Flexibility about the nature of review meetings
One argument for not reducing review meetings to once a year was that some local authorities felt they preferred to be creative, informal and flexible in managing more child-centred review meetings, particularly if the child was in a long-term placement.

> Invariably when you have got really good well-established long-term foster placements, your six-month reviews anyway are usually really informal to be honest. (LA 7 IRO, Low)

Reasons for maintaining two review meetings a year were linked not only to concerns about paper reviews, but also to the idea that if the IRO did decide it was necessary to see everyone in person then a meeting was actually more appropriate and a child-centred meeting format could be agreed with the child.

I still feel quite uncomfortable with the annual review meeting, just because if I'm going to have a review anyway, so a paper review every six months, I would feel slightly uncomfortable not having seen a child for a year. So, therefore, if I'm then doing all that stuff and actually the child and I have agreed that the only people at the review is going to be them, their foster carer and their social worker for example, I may as well just have the six-monthly review meeting. (LA14 IRO, Low)

There were examples of flexibility in the meeting format designed to help a young person feel more comfortable about review meetings, while also facilitating participation by other relevant people, such as birth parents and school. This too was preferred to doing paper reviews.

> The IROs sometimes do a kind of part one and a part two of the meeting, and that's, I think, to ensure that everybody who needs to be involved is involved…If the young person is keen just to have a sort of a small meeting with the young person, and then a second part … Sometimes children and young people really don't want the school attending their LAC review, for example. So, they do a part one and part two to be flexible and maybe to be able to include parents… to get the best out of the meeting. But, no, we generally don't hold paper LAC reviews. (LA 10 FM & CLA, High)

As this suggests, children's wishes and feelings about review meetings, including wishing not to participate, were taken into account and this occurred in similar ways in other authorities.

> We still do them [a looked after review meeting] every 6 months… The IRO will consider how that review takes place, who is involved in it, we may use a series of meetings, how we capture the child's participation and their voice within it as well. (LA49 IRO, Medium)

The desirability of this kind of flexible and child centred approach was also highlighted by this looked after children manager.

> And so participation, that's what we record now, rather than attendance…I keep having this argument with my colleagues in the IRO service… If they didn't [attend], maybe we're not making a meeting that's as ideal for them as it should be for them. I think some of the meetings are not particularly enjoyable for children to go to. So less of them would probably be quite nice. (LA104 CLA, High)

Conclusion

There were some positive voices here, welcoming the option of reducing the frequency of social work visits and review meetings in some cases to reduce the perceived intrusion of bureaucracy in the child's and carers' family life in long-term foster care, but there were a range of concerns.

As the 2021 guidance has retained these options, it will be important for each authority to develop a clear policy and procedures to ensure that decisions about the frequency of both social work visits to the child and review meetings can be taken in a child-centred way and that they can review how any reductions are working.

Summary

Frequency of children's social worker visits
- The 2015 Regulations and Guidance allowed the statutory minimum frequency of social work visiting to the child in agreed long-term foster care placements to be reduced from every three months to every six months. According to the national survey of local authority looked after children managers, 72.6% (n=77) had reduced social work visits to at least some children in long-term foster care placements; 25.5% (n=27) of the respondents reported that their local authorities had not reduced visiting frequency; 1.9% (n=3) of the respondents did not know if visits had been reduced or not.
- However, the majority in the interview sample talked of reductions to three monthly (as already allowed in placements planned to be permanent in the 2010 care planning guidance) rather than six monthly as in the 2015 regulations and guidance. This may in part be because the regulations and guidance 2015 have retained both options, permanent and long-term, causing uncertainty in practice.
- Positive comments about the option of flexibility included supporting children in long-term foster care to feel more normal and to reduce intrusion by the state.
- However, concerns were expressed regarding reduced visiting in the context of their safeguarding responsibility as corporate parent and positive relationships with the social worker were thought to benefit the child and need a certain level of visits.
- Solutions to this tension regarded rigorous decision making for each child, but also social work visits that included more creativity/flexible availability/different kinds of contacts and connections between the social worker and the child. These models of practice would be helpful in all placements, but are especially relevant in long-term foster care.

Frequency of looked after children review meetings

- Although there were good examples of local authorities who had thought through their policy and practice on reviewing long-term foster care placements following the regulations and guidance, it was unclear for some how much they had been taken into account and this may have contributed to the considerable variation between local authorities in their views and policy on this provision.

- There appeared to be some reluctance to take up the potential reduction in the frequency of looked after children review meetings that combined uncertainty about what was allowed with questions about whether the benefits in 'normalising' a child's life were outweighed by the potential loss of monitoring and the cost in time for IROs.

- There were some examples of local authorities who could see the benefit of using the flexibility to undertake reviews that did not require meetings, were sensitive to the particular child's situation and would still be rigorous. In these cases, there may actually be more work for the IRO, potentially, directly with the child or with the birth parents, but this could be defended as being in the interests of the child when six monthly meetings were deemed not necessary or appropriate in the particular case.

- The key message here is that in long-term foster care, reviews both with and without meetings need to be carefully thought through. There needs to be discussion by service managers across the IRO, fostering and children in care teams and consultation with children, foster families and birth families to ensure that reviews work not only to support the local authority's corporate parenting responsibility, but also the child's experience of long-term foster care as a permanence option, being part of the family.

9

Data management in long-term foster care

Introduction

In 2015, as part of the regulations and guidance, the foster care codes for the SSDA903 submission were increased from two to six, which, as described in the introduction to this report, included new codes for 'foster placement with relatives or friends- long-term fostering' (U1) and 'foster placement with other foster carer- long-term fostering' (U4). There were also new early permanence codes for 'Fostering placement with relative or friend who is also an approved adopter – FFA/concurrent planning' (U2) and 'Fostering placement with other foster carer who is also an approved adopter – FFA/ concurrent planning' (U5).

As also discussed above, at the time of this research study, national and local authority level figures on long-term foster care had not been published by the Department for Education since the creation of the two new long-term foster care codes. In 2020 the Department for Education published the national figures for the six fostering codes 2015-2019, including data on whether placements were inside local authority boundaries or not, as discussed above in chapter 3 on the analysis of administrative SSDA903 data. But at the time of writing the local authority level data has still not been published. This has raised significant questions about whether the data recording and management reflected appropriate implementation of the long-term fostering regulations and guidance.

It is important to emphasise that in long-term foster care placement decisions, data recording and management is significant both for individual children and carers, and for policy development and system management. The implications for children and carers of being recorded as a long-term foster care placement should offer first and foremost support and protection as a planned placement for permanence, but also include consideration of such matters as the frequency of social work visits and review meetings and the delegation of authority. At the systems level, the goal of all

children's social work is said to be to achieve permanence so an understanding of their care population in terms of permanence is essential for a local authority, whether that involves achieving a plan to move out of care (reunification, adoption, special guardianship) or achieving a plan to remain in long-term foster care with family and friends or local authority/IFA carers.

This chapter explores findings on a range of linked data management and practice issues and draws on interviews with data managers and both interview and survey data from service managers (children in care, fostering and IRO). It is divided into four related sections:

- tracking children in care to avoid drift and achieve timely permanence
- systems for recording long-term foster care placements
- data managers' working relationships with service managers
- submitting data to and working with the Department for Education.

Tracking children in care to avoid drift and achieve timely permanence

One of the priorities for local authorities and described by all data managers as a key part of their role was to prevent drift for children in care and to help them achieve permanence. For those children for whom long-term foster care was the plan for permanence, this meant achieving a matched long-term foster placement. As part of a local authority's tracking system, data managers took a key role in identifying from their data bases the placements where matched placements had been confirmed or where drift might be happening. This often occurred as part of the process of updating care records, but also ensuring the accuracy of their long-term foster care figures for submission to the Department for Education.

Most of the data managers interviewed described a routine practice of querying those placements coded as short-term but which had lasted some time.

> If we had children in short-term placements for a significant amount of time, we would ring up the social workers and say, 'Is this correct? It's been recorded short-term, but they have been there a number of years.' (LA53 D, Medium)

The length of time in placement seen as 'significant' varied between local authorities. One data manager said their local authority had a requirement to check short-term placements that were longer than 12 months and where the child had a recorded plan of long-term foster care to check if they were potentially incorrectly coded.

> We tend to believe that any case that has been in placement with foster care for 12 months and the care plan for the child is long-term foster care but if it's not recorded as such, we send those ones out to the team saying, 'If the plan is long-term fostering and the child is in a long-term term placement that has been for a year or more, why isn't it recorded as such?' (LA45 D, Low)

Another local authority described a screening process for any placement that had lasted longer than 14 months to be identified as potentially drifting, resulting in permanency meetings for that child where long-term foster care was one of the options considered (LA51 D, High). Similar practice is described here in relation to data and case management by managers from authorities with low, medium and high rates of recorded long-term foster care . Once longer lasting short-term placements had been flagged for review by data managers, this often prompted further assessment and decision making around permanence for the children in question. Data managers would ask service managers either to explain the plan in the child's current placement or potentially assess and confirm the existing placement as long-term foster care.

> We're getting the service to scrutinise them and come back to us and give us a definite yes or no, and if it's a no, if the plan says long-term then what are we actually doing about making sure that they are put into a long-term placement? Or it might be that we just need to ratify that placement through a panel process and sort of communicate to that the young person as well. (LA45 D, Low)

Here it can be seen that data managers can be contributing to processes described in the previous chapter on matching; for example, implementing a policy that after 12 months in a short-term placement, the placements might need to be assessed to go to panel and/or be ratified by an agency decision maker.

> When the child is placed there I think it is up to a year, coming up to a year that the child has been there, it's been a stable placement etc. and then we look to then booking the young person for the fostering panel to agree the long-term match, following that the recommendations from the panel are sent to the agency decision maker, who then ratifies the decision or makes their own comments and then provides the decision. (LA 51 D, High)

The notion of booking the panel for a long-term foster care match after a placement had been stable for 12 months might suggest rather limited assessments, but it would be expected that the long-term foster care plans and matching reports would have been discussed initially at the looked after children review and then both the panel process and the involvement of the ADM should mean that a certain quality of assessment and matching practice was required and would be scrutinised.

Time and stability are not enough to formally recognise and recode a placement as long-term foster care as the assessment and matching requirements in the regulations and guidance are explicit. The change of a child and foster carer's status to long-term foster care should be a meaningful process as it has significant implications for the child, the foster family, the birth family and all the agencies in the team around the child. It should not become an administrative change, a matter of adjusting the records. However, using data to track children in foster care and to achieve timely decisions after appropriate assessment and matching is of course valuable and necessary. The interviews with both data managers and service managers revealed

tensions between what were sometimes competing issues around recording and data e.g. data to support the drive for permanence; the need to avoid drift; the importance of practice rigour that can still be flexible to individual children's needs; and, in some cases, pressure to increase long-term foster care figures.

Systems and criteria for recording long-term foster care placements

Managers described a number of different long-term foster care recording practices and processes but also referred to a variety of software systems, reflecting the interaction between the role of practitioners and service managers and the data managers in generating accurate data that reflected and supported practice. But the requirements of the Department for Education submission also played a role.

Department for Education guidance on coding long-term foster care placements
The guidance to local authorities on data submission to the SSDA903 included example scenarios for determining a placement as long-term foster care and coding it accordingly. It was not clear whether operations managers as well as data managers were aware of this guidance, but data managers referred to it.

> Example scenarios in which responsible authorities may determine a placement as long-term:
> - a child has been identified as requiring a long-term foster care placement and is matched with a foster family approved for long-term placements, and who are able to meet the child's needs immediately and for the remainder of their time in care. This has been agreed by all parties and is determined in the child's care plan.
> - whilst in placement and as part of the care planning review process, the child's responsible authority and foster carer have consulted with the child and birth family and agreed that the child will not be moved for the duration of the child's stay in care. This has been recorded as a care planning decision and the placement is defined as "long-term"
> - a short-term placement, which changes in nature due to a change either in circumstances or a particular connection between the child and foster family or evolves into a placement over time from which the child will not move for the duration of care, should be considered as "long-term".
> (Department for Education, 2019:73)

Unfortunately, although these examples describe local authority agreement on the long-term foster care placement there is no reference to the placement being the child's plan for permanence as stated in the regulations. Only the first example makes any reference, by implication, to assessment and matching and the commitment to at least the remainder of the child's time in care. This first example may also be seen as worded to suggest moving to a new placement. The second and third examples seem to relate to an existing placement and rely only on 'agreeing the child will not be moved' which is far from the expectations of the regulations and guidance and the

links to the plan for permanence. However, the reference to 'care planning review process' should mean that a local authority is still bound to follow the regulations and guidance that do make the need for assessment and matching explicit in all cases. These examples were provided in the year in which the research was conducted (2018/19) and have remained the same up to the most recent guidance (2020-21).

However, these examples at the very least can be seen as having set a low and flexible threshold for decision making processes that enable the long-term foster care codes to be applied and cases to be included in the SSDA903 return. So not including cases in the long-term foster care codes and return to the Department for Education because, for example, a young person with close birth family ties is reluctant to participate in a fostering panel process (as discussed above) would not be justified by the guidance for completing the SSDA903 submission.

Data management systems and the new long-term foster care codes
Types of data management systems used by local authorities included Liquidlogic, Mosaic, Eclipse as well as additional permanence trackers using Excel. Several of the local authorities reported having recently migrated to new data management systems, often in the hope that the system would improve the accuracy of their figures. In the short-term, however, migrating to new systems was experienced by service and data managers as disruptive and leading to delays.

> Having a new case management system has been highly disruptive. I think we knew that was going to be the case. I think we have probably taken six to nine months to get to a point where we're perhaps at a similar level you know to reinstate all our reporting capabilities and to get to a point where people are familiar with the system. (LA107 D, High)

According to managers, the move from two to six fostering codes was initially difficult. It was suggested that long-term foster care had not yet been defined when the codes were created. One local authority reported that they had been told by the Department for Education not to use the long-term foster care codes in the first year until definitions had been agreed.

> I think back in the first years of the new codes being used we were told not to use the U4 code because they hadn't properly come up with the definition of what long term foster care was. (LA53 D, Medium)

Data managers across local authorities also described initial confusion from social workers and service managers around how and when to use these long-term foster care codes.

> It's just about them understanding what these new codes mean and then the definition came out. Prior to that there was a lot of discussion around it and I think the DFE wasn't totally clear ...When those U codes first came in, and the guidance was quite vague. (LA45 D, Low)

This uncertainty about the codes, according to service managers, was also an ongoing issue for them and their staff.

> I think one of my issues has been that the 903s and the DFE codes are so confusing. (LA79 CLA, High)

As a result of this uncertainty, some data managers reported that social workers and service managers were turning to them for clarity around the codes, clarity which they did not feel equipped to provide.

> Thinking back to when we introduced the codes, and if I go back for four years, five years, I think possibly some people who were wanting us to define what the different categories meant at the time and our reply to that was 'We're not trained social workers. This is the DFE guidance. We can tell you what the DFE guidance says, but that practice judgement of what goes into those categories isn't for us as data collection staff to tell you'. (LA53 D, Medium)

Recording processes for long-term foster care
In many local authorities, managers described social workers as responsible for directly inputting the changes in status in their data management system—such as Liquidlogic—or for updating a form which triggered administrative teams to change the code in the system. Depending on the local authority, the recording and coding of long-term foster care cases could also be carried out by a range of administrative staff, business support and placement hubs.

Despite having what some local authorities felt were clear recording processes, managers reported receiving ongoing feedback from auditors and data management teams that there were errors in their long-term foster care recording.

> The placement codes have changed and [auditors] say that the placement codes aren't changed enough...There's quite a lot of worker error there ...When the match is made and the ADM's decisions are made, the placement codes should change to reflect and be able to be pulled from the system how many children are in long-term permanently matched placements in fostering or residential or whichever. I don't think ours are entirely accurate. (LA51 F, High)

Other service managers attributed some of these errors to social workers failing to ensure the appropriate online changes are completed due to the busy nature of their role.

> After the permanency panel it should be sent to the admin business team...You have to do a specific thing in our computer where we would change that to be long-term...a different code...It could be missed if you go to panel and then you come back to the office or you go on to a visit or another meeting and then you forget to tell the business person to do it... It's like no-one is sort of monitoring that. (LA33 F, Low)

Service managers described ideas for improving data recording practices, including the possibility of changing the responsibility for the recording from social workers to administrative staff, although it was social work decisions that needed to trigger such recording of placement status changes.

As the fostering manager described above, a lack of confidence in their local authority data or perhaps a wish to keep their own records led some service managers to devise their own data or permanency tracking systems, which they felt were more accurate. This resulted in the use of multiple data systems within local authorities.

> It's got to be maintained on a weekly basis...We're depending on people from other teams to make the right entries to Mosaic, and for this to be at any given week up to date...I think at the moment we need the spreadsheet, because we are not confident enough in the Mosaic information, the way it's input. So people aren't correctly categorising this placement and reflecting it in the care plan. So we're in the position of having to use a tracker and a database... it's definitely more accurate. I think this gives us a more accurate reflection of the children who have not had their care plan fulfilled. (LA51 F, High)

For data managers, having multiple places for recording the data could be beneficial in some respects as mismatches between the systems resulted in queries to social workers about which placement information was accurate. However, double systems and double checking resulted in more work and a risk of potentially less accurate information.

> Two places in the system - we have one place where we record what is essentially the 903 DFE code for the placement like within one year, two year, three, and we will have another place on the system which is more sort of local, where we record what we call the care package and then you know we have short-term, long-term fostering all sorts of things in that care package... The data itself is generally fine, but like having a disconnect between two different parts of the system that need to essentially say the same thing and are recorded by two different groups of people does definitely cause us some issues. (LA53 D, Medium)

The theme of multiple systems for planning, discussed in previous chapters, is reflected here in multiple forms of data recording and placement recording management systems, even within one local authority. This issue was replicated in a number of local authorities and was further complicated by, for example, having different systems for decision making and therefore recording practice for children of different ages.

Recording long-term foster care: the role of panels and decision makers
Data managers and service managers described several decision-making processes and procedures involved in recording long-term foster care placements, some linked to panels and ADMs or senior managers. Although there was variation across local authorities, as discussed in the previous chapter, for most authorities, long-term foster

care could only be recorded after a formal process within that local authority, which often consisted of a matching, permanency or fostering panel and/or being agreed and ratified by an agency decision maker.

> It should be recorded only when it has actually been agreed that long-term foster care is the permanent option for the child and this has been ratified/gone through the internal processes. (LA104 IRO, High)

This formal process for recording can support good practice in relation to ensuring appropriate assessment, consultation and matching, but does not make it inevitable, nor is it a criterion from the Department for Education SSDA903 guidance for long-term foster care codes. So it was important that procedures for recording were informed by and promoted good practice with children, fostering and birth families.

One source of error in recording was when a child's placement was coded as 'long-term foster care' when this was the care plan for the child rather than after the child had been matched in a long-term foster care placement. Several managers described this practice as problematic, and it was also reported as an issue in previous research (Schofield et al, 2008), suggesting it is a longstanding challenge. In that context a local authority would have doubts about their own data, even though this might be what was submitted to the Department for Education.

> On our recording system, people input their plan, the type of placement that a child is in, but we don't record, we don't have a place in our system that then determines that the child is a long-term match... So we don't have a place where we can easily distinguish between our plan for the child is long-term fostering and they're in a placement that can offer them long-term fostering... And that's the bit that we're working on, a system to put that right because it means that we can't really reliably or accurately identify the cohorts of children. (LA24 IRO, High)

Many managers described various ways of correcting recording and coding processes which were not working. Some data managers and teams, for example, provided assistance by picking up on patterns in coding and recording errors, which service managers could then use to re-educate their staff and to adjust recording practices.

> We've picked up recently that some people are ticking that box when it's not long-term matched. So, I've done a whole bit of work recently about saying go and redo that... I think we've had a lot of flux and a lot of changes, so you just have to keep reminding people of things. (LA12 CLA, High)

Changing the recording of short-term placements to long-term foster care
One of the other related issues in terms of incorrect recording for local authorities were placements where children and young people remained with the same carer when the care plan moved from short-term placement to a long-term placement. In some cases, this was not appropriately updated on the system.

Probably what happened was when children were matched as permanent or long-term placements with their previous short-term foster carers sometimes the recording never changed from short-term to long-term…It's a system oversight. (LA7 IRO, Low)

Although described as a 'system oversight', it is a key practice issue for social workers and managers and IROs, all of whom are responsible for ensuring every child has a permanence plan and its status (achieved/not achieved) recorded in the system. For the majority of local authorities these placements were then subject of queries by either data or service managers and if they had in fact been matched and agreed as a long-term placement this could be changed on the system.

For some local authorities, however, these placement codes were more challenging to change or correct because the recording systems were linked to financial packages. This meant that changing the placement code to long-term foster care but in the same placement could lead to incorrect payments to the carers. One local authority with this problem of finance linked to placement codes chose not to record the long-term foster care codes, even though they had an established process in practice, involving ratifying these cases at a panel. This meant that they appeared to have no long-term foster care placements for that period until the local authority migrated to a new recording system.

We didn't have any long-term fostering. There was an issue around that on the old system and it was because we had a financial package linked to the old system that was paying foster carers…. i.e. carers might get paid incorrectly, maybe more than they should do or even less than they should do, so we took the process decision that we didn't do that. But since going onto Liquidlogic that started to go on. (LA78 D, Low)

Another local authority who found the finance link to be an ongoing issue, responded by assigning a dedicated member of the data team to deal with these cases individually, which was time consuming.

We've had to resort to having one of our colleagues… when we're finding particularly long-term ones. Not long-term but it's longer placements that haven't been recorded correctly. Then it's a case of … he makes all the changes and then reactivates the connection to Contrast so that the payments don't go through while it's being changed. And then manual amendments are made afterwards. It's quite a long process, because I think the further back it goes, the more financial years have to be slightly changed. (LA45 D, Low)

There obviously needed to be software systems solutions to these recording issues, but this highlighted the challenges of having software systems that do not easily and separately record changes in plans and the status of placements.

The links between long-term foster care decision making and recording often reflected practice challenges of other kinds. The issues involved in working with older children and giving them a choice about participating in formal long-term foster care matching processes, discussed in the previous chapter, had implications for the data.

> If [young people] are strongly opposed to [the matching process] for any reason, sometimes we find that. We found that with our traveller children where they've got a strong family loyalty and it doesn't sit well with them. There's no pressure so we would never do [the formal matching process] if a child didn't want it to happen. ... We can only change it on our system when that process has been followed. So there's an understanding in my supervision with my senior head that that is effectively what it is. But in terms of reporting and input in the systems it wouldn't show as that. (LA30 CLA, Medium)

So there could be an 'understanding' that a placement was long-term foster care, but the placement could not be recorded as such and would show up in their figures as a long short-term placement—the type that data managers reported frequently querying with social workers. Other local authorities had decided that because these were 'effectively' long-term foster care placements, they could be recorded that way. In both cases, questions would need to be raised about the assessment, matching, preparation and support planning processes that lay behind the recorded care plan. These are not just bureaucratic or data issues, they affect how cases are managed and the experiences of children, carers and birth families, including practices linked to a recognised long-term foster care placement, such as frequency of social work visits and review meetings.

Recording family and friends long-term fostering placements
Recording family and friends/connected persons placements as long-term foster care raised specific issues for some local authorities, particularly for local authorities whose recording processes meant they only counted long-term fostering placements that had gone through a panel for the match to be confirmed. Service managers discussed the need for the local authority to make an exception from their standard long-term foster care processes in order to count these placements in their long-term foster care figures.

> Connected persons don't have to go to panel just for a long-term matching, but there is an exception for connected persons that can be agreed and actually amended on the system for those children. But just not for ones that are [mainstream] foster carers. (LA30 CLA, Medium)

It would be expected that local authorities could show how these cases that did not go to panel were still subject to appropriate assessment and matching scrutiny. As discussed in the previous chapter on care planning, these were often cases where special guardianship would be considered by local authorities to be a possible and in some cases more desirable option. So the point at which it was agreed to formally agree a long-term foster care placement match with relatives or friends could be delayed while this was explored and ruled out.

While the 2015 regulations and guidance did provide a connected persons long-term foster care SSDA903 code (U1), some service managers seemed not to be aware of this and instead described difficulties knowing how to record these placements accurately.

> If they went to a family placement it didn't convert to being called a long-term foster placement, it was called a Connected Persons assessment placement, but it was a permanent placement...We did have a whole issue with recording and understanding which I think is something we are seeking to resolve. (LA7 IRO, Low)

Other kinship related issues were around a lack of differentiation of these placements, which would have also made accurate reporting under the long-term foster care codes a challenge.

> In terms of kinship it is really difficult to differentiate between because they go into the mainstream foster caring pool...There isn't a separate category for kinship but that is something that we are working on. (LA65 F, High)

These accounts suggested that although at the time of the data collection for this study it had been four years since the regulations and guidance were introduced, some local authority staff may not yet be familiar with the detail of them (e.g. the separate codes for kinship carers in short-term and long-term foster care) and the framework they provide for practice.

Working relationships between data managers and service managers

As these examples have illustrated, there is a necessary connection between practice with children and families, decision making and recording which emphasises the value of service and data managers working together. Managers reported on a range of practice involving these working relationships that included tracking data and cases, reporting to the local authority and the Department for Education, and performance management functions.

The most common form of working relationship consisted of electronic communication where data managers shared information with service managers through self-service reports, often supplemented by other online service-oriented weekly or monthly reports. Other patterns included mainly electronic joint-working with some scheduled in-person joint-working, at least in advance of submitting end of year returns. One local authority described engaging in monthly in person joint-working meetings between data and service managers. Service managers and data managers also described attending tracking meetings with other managers and sometimes practitioner teams, where there would be regular in-person contact.

Managers also described differences between local authorities in terms of the types of data management services available; the types, quality and ease of use of data

systems; the ownership of the data in terms of quality; and whether data quality was viewed as the responsibility of the data management teams, service teams or both. Service and data managers reported that varied ways of working could be successful, often in combination, with the most important elements being that both data and service managers were equally committed to children's welfare, accuracy and using data constructively, so took shared ownership of the data.

Effective electronic working
Many of the managers interviewed described how electronic forms of communication and sharing data dominated how they worked together. This included 'self-service' approaches, relying on service managers accessing data when needed, but could also include the supply by data managers of various service-specific daily or monthly reports as well as regular audits. Through these activities, data managers felt they developed oversight of the data in general and an understanding of recording practices which they could highlight with service managers.

> We have a self-service report that we have running all the time, so you know they run every day and there's our CLA caseloads reports, for example, that will list the placement type that the individual is in, that we report internally on. It will be the same for the other local authorities on most of the kind of performance measures we have around CLA placement stability, we have reports like that that run every day. (LA107 D, High)

Data managers were also able to monitor the frequency with which service managers and heads of service accessed and viewed the reports. This was linked to a performance monitoring and management role, that included 'deeper dives'.

> We monitor who is obviously using those. We have a kind of a performance framework that obviously is reviewing those reports and what the data is saying on a regular basis and might then do deeper dive audits into placement recording accuracy. (LA107 D, High)

This link to performance monitoring then had to accommodate the impact of new software systems and identify problems, including the change of placement plan and status.

> So when we moved to this Liquidlogic system you know because it was such a change in process ...we identified quite early on that we had some problems with social workers not fully understanding how they effected a placement change so ...that kind of led to wider audits of the case to make sure children were in the correct placements. (LA107 D, High)

In spite of some of the drawbacks with the data, there was some evidence that it was being checked quite frequently. This was supported by regular reporting and more sophisticated tools which 'visualised' the data.

We have a lot of reports that I could say that are being used on a daily basis and dashboards that people can see what the data looks like on the system. We have monthly, a monthly kind of management report which summarises a lot of data including kind of CLA Permanency. We have these monthly Looked After Children Performance and Outcomes Groups that do those deep dives, looking to something called … the Children's Analysis Tool which … you load in your lists and it visualises the data. It's an Excel workbook but it visualises the data and makes it easier for people…on a monthly basis to kind of shine a light on the data and that's across the whole kind of child's journey, through CIN, CLA, CP adoption … We're quite data driven and there is quite good ownership of data at a senior manager level which is helpful. (LA107 D, High)

As the data manager above describes, the shared ownership of the data by senior service managers was crucial in order for electronic working to be successful. Good ownership of data in the view of data managers meant that service managers and senior management were not only frequently viewing the data and acting upon queries presented by the data management team, but also actively collaborating on data quality with the data team by ensuring their data was up-to-date and regularly re-educating their staff in recording practices as necessary.

For data managers, proactiveness from service managers, such as in the form of queries about the data, led to the sense of an 'interactive approach' and shared responsibility for a task which was recognised as complex for everyone involved.

We have got something called 'Insight' which is the internal reporting system that fits in SharePoint really. It's just the managers are on it every day, all day, and the social workers are on it. We've got a shared email Inbox now and we get loads of queries saying, 'Why has this happened on the system and what do I need to do to fix it?' and so it's like a really interactive approach to the data quality on a daily basis really. (LA78 D, Low)

Service managers, similarly, recognised the value and importance of having a knowledgeable and skilled data management team, particularly when they were relying on electronic working. Here the link is clear between data management and performance management, with an active role for service managers with both the data and the practice teams.

We have a very good performance analysis service here actually, which is positively commented upon by Ofsted and others who come across it… We check and verify our data on a very regular basis. We have monthly performance analysis coming out…We're quite data rich and we use it in very many ways…Because we look at the data on a monthly basis, we can pick up where the team leader and the service leader for the number of teams, they will be aware that oh, this child was matched, but it's still showing this child's not matched…We're constantly looking at the data within the groups of teams. (LA37 CLA, High)

As the following service manager describes, taking or sharing ownership of the data, combined with careful investment in the data management team, meant not only being able to almost immediately correct data errors, and thus maintain the data quality, but also to feel they 'knew' their children, fulfilling an important part of the corporate parenting role by accurately recording a child's life. Here the link is made between effective performance management and investment in accurate data by the local authority.

> Our performance management system here is probably one of the best in any local authority that I've ever worked in... Our data is up to date as of nine o'clock last night. [This is due to] shrewd investment and our Director of Children's Services at the time who managed to persuade the wider council that what we needed was a very refined performance management system... We like to say it's within a maximum of twenty-three hours, fifty nine minutes out of date, we can do a search on individual social workers and individual cases and work out for example which statutory child visit hadn't been undertaken, which visit is overdue, which supervisions are overdue. We can drill down to the ground level of that information on social work practice, but also on young people's positions. (LA78 CLA & F, Low)

Here, performance management and data were seen as having value not just for the effectiveness of the system, but for recording the story of the individual child, of particular value for children growing up in long-term foster care.

> It is not just about performance management. In fact probably the most important thing about proper data in the care system is that this is the child's story...We will have our own families who have repeated urban legends, motives, narratives about our own childhoods. But for children in care those narratives get lost if they move from placement to placement or leave care and in fact the only reliable source they will have about their childhood journey will be from their own case files and that's why it's so important to record...The reality of the situation is that the most important thing about good case file recording is that it's the child's story. (LA78 CLA & F, Low)

This very positive account of data management is from an authority that actually records a low (bottom tertile) rate of children in long-term foster care, while the quote from LA37 also reports positively on use of data but is from a higher rate (top tertile) authority. There is no clear pattern in the practice and systems for what may be driving the difference in rates of recorded long-term foster care, but it seems likely to be a combination of decision making and recording practice.

Less effective electronic working
Reliance on electronic working, in contrast, was sometimes described as an impediment to communication, with both data and service managers reporting frustration, for example, about not receiving answers to their queries.

We do some checking, but we don't necessarily get responses from everybody. (LA7 D, Low)

In contrast to the active involvement of service managers in data checking in some local authorities described above, one data manager reported that they had never been asked by a service manager to run figures specifically on long-term foster care. Where checking this data was through self-service, local authorities differed as to whether filtering specifically for long-term foster care codes was an option for service managers or not.

We do have self-service as well, so managers can actually filter on it, however they want, and one of the options is 'long-term placements'. (LA12 D, Low]

In local authorities where filtering for long-term foster care figures was not an option, these figures had to be specifically requested from data managers. This was less helpful, as this IRO manager explained.

It tells me how many children are in care on a full care order, how many are Section 20, how many are on an ICO, how many are on a placement order, how many on EPOs, but it doesn't tell me how many are in long-term foster care. It's not sophisticated enough to know, based on the way it's presented to me currently… I would have to put in a special request if I wanted that data. … Then depending on whether or not that functionality is already there, then he would just say, yes, I can run that report now, or no, I will have to go and build this. (LA29 IRO, High)

This captures the challenges for service and data managers of gathering data on care plans and type of foster care placement, as reported by a number of local authorities.

Working together in person
While data and service managers described their joint working as mainly based on accessing and sharing electronic data, many local authorities supplemented this by working through in-person meetings.

For local authorities that had dual or multiple systems of collecting data, this face-to-face working represented a particularly useful opportunity to compare and update figures together.

So often it will be the team manager and the service manager that sit with the data people. So they have their spreadsheet which is quite good from the system. We have our cases collected from the team and then we check it. (LA19 F, Low)

For many service managers, timely face-to-face meetings where they went through the data with data managers led to feelings of collaboration and a joint product.

We have an information team who meet with us on a regular basis. We are

provided with weekly and monthly performance reports ...We do meet with them and go through all the figures. So they do collate them electronically and then the analysis behind that is a joint piece of work... We are fortunate in having a well-established performance team. The capacity is there to provide us with the information that we need to be able to make strategic and operational decisions as and when. (LA66 F, High)

One local authority described having monthly in-person meetings between data managers, team managers and the IRO, where they scrutinised cases that the data managers had flagged as potentially miscoded, with a particular focus on long-term foster care.

There's basically a monthly scrutiny meeting and that involves [data staff member] and myself. [IRO] chairs that and key people from our friends and family fostering, from mainstream fostering, and people from the children looked after service as well, they represent the child's social workers as well. So it's kind of covering all options basically. So [data manager] and I will present the data broken down, so these are the teams, these are how many children are long-term in each team, these are how many we think may be long term in each team but aren't possibly recorded correctly, or we need to do further work to make sure that it's been ratified as being long term...So it's a mixture of kind of process, but also bits of practice as well. (LA45 D, Low)

This summary point made here is key; scrutinising the data has to take account of and interact with practice.

Finally, an important example of communication in person regarding the data was an annual meeting with the Director before each end of year return to the Department for Education, in this case, in the context of regular updates during the year.

I normally pull off like a data report and we go through it with the Director of Children's Services and just make sure that they're happy with what we're submitting. A lot of the time there aren't any surprises because they've got overview of the data on a sort of monthly basis anyway, so they're not surprised by any of the sort of outcomes. (LA104 D, High)

Submitting SSDA903 data and working with the Department for Education

The data managers interviewed reported that the annual SSDA903 return to the Department for Education was generally the responsibility of one person from the data management team, following input from service managers as described in previous sections. The length of time the data managers interviewed had held this post varied, but was up to ten years, so a post that could benefit from experience and knowledge of the local authority.

The local authorities reported varied experiences of working with the Department for Education in relation to the data return. Some described a positive working relationship, suggesting that they found it easy to communicate with the Department for Education.

> We can say we have a really good relationship with the DFE… If I've got an issue, I just raise it with the DFE anyway and sort of email them and ask them for advice. So we tend to have a good working relationship with them. (LA78 D, Low)

Other data managers found getting a response from the Department for Education more difficult, with one manager citing it had taken two years to get a response to a query. While managers recognised the Department for Education were dealing with many local authorities, slow response times affected their sense of the working relationship. Several local authorities mentioned that the previous year's 903 data submission was particularly difficult due to technical difficulties on the Department for Education site. This resulted in a delayed submission, which in turn also affected their submissions to Ofsted – so the relationship with the Department for Education was an important issue for all managers, especially data managers.

The SSDA903 long-term foster care validation check
Local authorities, particularly data managers, described an SSDA903 long-term foster care 'validation check' which had been introduced by the Department for Education at the time of the study. This was following concerns about the validity of the annual returns on long-term foster care placements which had led to local authority figures not being published. The long-term foster care validation check identified local authorities with long-term foster care figures outside the range of 40-60% of children in care. Some data managers were not aware of this validation check if their figures were within the range. Other local authorities, however, particularly those who had figures lower than 40%, expressed anxiety about the validation check, questioning where this figure had come from and how it had been calculated.

One local authority believed that the 40-60% figure must be derived from research. Another local authority data manager related what they had been told by the Department for Education after querying this figure.

I thought they might say, 'Oh, it's in this document', because the Government releases various publications, so I thought 'Oh they might direct me to that', but no, no it is nothing like that. They just said it was a figure they'd come up with, because they felt they needed to query some of the figures. (LA7 D, Low)

Local authorities questioned the usefulness of this figure, particularly as it was said to be a percentage of children in care in the local authority rather than in foster care.

I mean we've got quite high proportion in foster care…So it needs I think the target should really be a proportion of those children in foster care, not the proportion of those children in care. (LA45 D, Low)

Further doubts emerged because the percentage did not differentiate between connected persons and 'other' long-term foster care placements. This manager believed the figures were a percentage of children in foster care.

That was another question we had about how you actually calculate the percentage and I think they just took all the fostering cases as the denominator and then both the two, the family and the non-family, long-term fostering as the numerator added together yeah, they didn't split between or distinguish between them. (LA7 D, Low)

Local authorities whose long-term foster care figures were outside this 40-60% range were asked to submit an explanation. These local authorities raised concerns about what the check meant e.g. what was the significance of being outside this range? This local authority would have had figures above 60%.

You know that check is in place, but what does that mean? So does it have to be in 40% to 60%? (LA107 D, High)

Some local authorities with percentages of long-term foster care under 40% focused energy and resources on checking and increasing their figures through data checks, using joint-working as well as 'fast-tracking' approval processes.

The DFE then put into the 903s and validations a couple of years ago that basically said, 'We're expecting between 40 and 60 percent of your cases to be long-term foster cases.' And so with that we've been trying to work around getting these correctly recorded. (LA45 D, Low)

There was some anxiety within these targeted local authorities that remaining outside the range would lead to negative repercussions. Without a sense of the national range of long-term foster care data, the average, and the processes used by local authorities to achieve these figures, managers felt uncertain whether their efforts to get within the 40-60% range were necessary or whether getting to within the range was a reasonable and achievable goal for their local authority. They also felt at a loss as to what might be the perceived good practice that would achieve the desired/required

figures. This was different to other performance indicators, where discussion with other comparator local authorities was quite well-established.

> If we could see some other comparable authorities or even a national figure … At the moment we've got nothing to gauge it by basically and it is a lot of work. The targets we set and everything is all based on benchmarking and looking at what our statistical neighbours are and all that, and what the national average is, and we're a bit in the dark really… Sometimes it's helpful if you can see an authority, say we might have been an authority that's got 55 percent or something and then we could get in touch with the authority and actually say, how did you go about doing it, what was your practice setup, did you insist on every single long-term placement being ratified by a panel or did you just agree if they were in care for a certain amount of time and that's what the care plan said? And it would be useful to know. (LA45 D, Low)

The Department for Education had been trying since 2015 to ensure that the data was accurate and could be reported, including changing the guidance on completing these codes, giving case scenario examples, as above. But as this study has shown, there were a number of difficult judgement calls to be made by practice managers and followed up by data managers regarding effective long-term foster care practice and recording. Shared ownership of the data was key, but both data and operations managers also had to rely on the technology to support good practice that worked for children and families.

Summary

- Some of the main priorities for local authorities in relation to long-term foster care were to prevent drift for children in care and to help children and young people achieve permanence. Data managers had a key role in identifying placements where drift might be happening as part of the process of updating data and ensuring the accuracy of long-term foster care figures.
- Data and service managers described a number of different long-term foster care recording practices and processes with implications for data accuracy generally and the use of the new long-term foster care codes.
- One source of errors affecting the accuracy of recorded data was that in some cases long-term foster care could be recorded and coded when this was the *plan* for the child rather than after a child had been *matched* in a long-term foster care placement.
- Recording of long-term foster care cases could be undertaken by a range of staff including finance teams, administrative or business support, placement hubs, social workers or fostering teams.
- According to managers, the move to the new codes was initially difficult, particularly as they felt long-term foster care had not yet been defined when the codes were created.

- Data managers described initial uncertainty from social workers and service managers around how and when to use the long-term foster care codes. Some social workers and service managers were turning to them for clarity around the codes, which they did not feel equipped to provide.
- Two of the three example scenarios for long-term foster care provided in the guidance for completing the SSDA903 could have contributed to these dilemmas as they did not reflect the requirement for assessment and matching of the child's needs and the carers' capacity to meet those needs – substituting the idea of 'agreement not to move the child' from an existing placement. It seems possible that this low threshold for coding a placement as long-term foster care was to encourage local authorities to use the new codes, but if used more widely as a definition of long-term foster care it could undermine the intention of the regulations and guidance to promote a high standard of practice in care planning for permanence and to promote successful long-term foster care placements.
- Lack of confidence in their local authority's figures led some service managers to devise their own data or permanency tracking systems, which could lead to the use of multiple data systems within local authorities.
- In local authorities with good tracking systems or active data management, recording errors generally could be identified and corrected on the system, but long-term foster care placement codes could be more challenging to correct when recording systems were linked to financial payments.
- Managers reported on a range of practices that included some degree of joint working between service and data managers, ranging from regular face-to-face meetings to an expectation that all managers would access online reports.
- Service and data managers suggested that all ways of working could be successful, with the most important element being that both data and service managers took shared ownership of the data and understood the significance for the service and for children and families of getting the data right.
- The data managers reported that the annual SSDA903 return was generally the main responsibility of one person from the data management team, following input from service managers.
- Local authorities reported varied experiences of working with the Department for Education. Some described a positive working relationship, other local authorities found getting a response from the Department for Education more difficult.
- Data managers described their difficulties with an SSDA903 long-term foster care 'validation check' which had been introduced by the Department for Education as part of the annual return process. The validation check flagged the local authorities whose long-term foster care figures were outside the range of 40-60% of children in care and were asked to check their data and send an explanation to the Department for Education. This process had caused some concerns, although the Department had made clear it was not a performance indicator.

10

Conclusion: discussion and recommendations

The introduction of the first long-term foster care regulations and guidance in 2015 was a landmark event in the development of permanence in England. Long-term foster care had been included in policy as a legitimate permanence option by successive governments since the 1980s, but this was a significant recognition of the value of long-term foster care and of the need to establish an appropriate and supportive policy and practice framework as part of delivering the government's overall policy on care planning for permanence.

This research project began as an investigation of the implementation of the new regulations and guidance and has addressed this aim. The privileged access we have had both to government data and to national survey and interview data provided by colleagues from across England has allowed us to look at wide ranging aspects of long-term foster care practice in the context of the regulations and guidance.

It has also been possible to set the findings from this project in the context of findings from previous projects on care planning in long-term foster care (Schofield et al, 2008, 2011). Other projects on long-term foster care (Beek and Schofield, 2004; Biehal et al, 2010; Biehal, 2014; Schofield, 2002, 2003; Schofield et al, 2009, 2012; Schofield and Ward, 2011; Beek et al, 2016) have provided in-depth insights into the experiences of young people, foster carers, birth parents and social workers. These insights have also provided a valuable context for the findings of this project and contributed to our recommendations for a model of good practice in long-term foster care.

The goal of achieving permanence for children is an important part of government policy, but it is also seen as a helpful if challenging framework by practitioners. Focussing on security, stability, identity and family belonging for the child, the aims of permanence are a necessary and valuable way of thinking about what is important for the child's happiness and well-being and deciding between the options available, including long-term foster care. But decisions about permanence options are never

easy as they involve weighing up the complex evidence for any child, from new-born baby to adolescent, and choosing the plan that has the best chance of providing high quality family relationships through to adulthood, when so much in the child's future development and in the possible placement family will be hard to predict.

All participants in surveys and interviews for this study demonstrated a clear commitment to doing the best they could for each child, which meant wrestling with the dilemmas of each permanence decision; for example, whether to recommend keeping siblings together or separating them. Such dilemmas were often accompanied by a sense of the external pressure to favour certain options, accompanied by resource concerns, such as the need for suitable foster carers and for future therapeutic support for placements. There is no doubt that achieving successful long-term foster care placements, as with all permanence options, presents local authorities with a range of distinctive challenges at both the systemic and the child and family level.

This chapter will begin with a discussion of the main findings, starting with the analysis of the Department for Education data, and then make links with findings from the survey and interview data regarding implementation in practice of the regulations and guidance. This will lead to our recommendations for policy and good practice in local authority long-term foster care planning systems, linked to the regulations and guidance, but also with implications for social work practice with children and with foster and birth families.

Findings from the Department for Education looked after children data

A significant minority (39.7%) of children in foster care were coded as in long-term foster care in March 2018. This is likely to be an underestimate of children in placements understood to be long-term, as it was reported in some interviews and surveys that there were uncoded foster placements considered in practice to be 'long-term' in some local authorities, but which were not formally acknowledged or recorded.

The data shows, however, that there has been a gradual decline nationally in the numbers and proportion of foster children coded as in long-term foster care from 48.5% in March 2015. This decline may have arisen from an initial push to formally match and record pre-existing long-term foster care placements in the early years of the regulations and guidance or other factors, such as changes in recording practice. There has, though, also been a decline in adoption orders and reunification, alongside a rise in SGOs (special guardianship orders) in this period (Department for Education, 2020). The possible connections between these permanence trajectories are unclear, and trends may relate to a range of different factors.

Nevertheless, the number and percentage of children in long-term foster care nationally contrasts with the public and policy perception, and focus in much foster carer training, that foster care is predominantly a short-term service. These figures

indicate how important it is that services develop around both children who will stay short-term in foster care and return to their families or move to adoption or special guardianship and children for whom the plan is that they will build a family life in a long-term foster family, while maintaining their relationship with and membership of their birth families.

The Department for Education data highlighted the wide range of children in long-term foster care in England and some differences in terms of type of long-term placement. For example, there were differences between placements with friends and relatives and non-friends and relatives, both in long-term and short-term foster care. In both long and short-term placements, friends and relatives cared for proportionally more girls, more white British children, younger children, and children with lower/less problematic SDQ scores. The data thus seemed to suggest that friends and relatives carers may have children placed with them who tend to be less challenging to care for, but all children placed in long-term foster care will need support for themselves and their caregivers.

The role of the independent sector in providing long-term foster care placements was an important element in planning, matching and resourcing placements. The data shows that 42.3% of non-friends and relatives placements (U4) were in the independent sector, which is marginally more than their share of short-term (U6) placements (39.2%).

When long-term foster care was compared with other permanence options it appeared there were some differences in the characteristics of children. Whilst children being long-term fostered were broadly similar to those being adopted or subject to special guardianship orders in terms of reason for care entry, gender and ethnicity, they differed in age from the adopted children and those under special guardianship orders. In particular, proportions of very young children (0-5) were much lower in long-term foster care, this permanency route being predominantly used for children age 6-16.

Comparing the long-term foster children to those reunified, proportionally more boys, black and minority ethnic children, children entering care because of their disability, and children in voluntary care went home. The average age of children who were reunified was 10.4 years, compared to 8.6 years for children becoming long-term fostered, although for reunification there were higher proportions of both the very young (0-2) and the oldest (16-17) following this pathway compared to the age profile in long-term foster care.

Local authority level data and practice

The data at local authority level revealed a wide range in the percentage of foster children who were coded as in long-term foster care – from less than 10% to more than 80%. Such a range had been hard to explain, given the shared framework of the regulations and guidance for implementing long-term foster care. This wide range

had persisted over the years since the regulations and guidance were launched and contributed to the Department for Education's decision not to publish the data on long-term foster care by local authority, because of doubts about its validity and reliability.

A key finding, however, was that the *strongest* predictor of whether a child was placed in long-term foster care was not the child's characteristics, but rather whether a local authority was a low, medium or high user of long-term foster care. Children in local authorities that were high users of long-term foster care were 38.5% more likely to be in long-term foster care, taking account of all the other variables included in the analysis. However, the quantitative analysis, supported by the qualitative data, raised questions as to whether being a high user of long-term foster care was necessarily 'better' in terms of good practice or more compliant with the regulations and guidance. There were, for example, some indicators that long-term foster care placements were slightly less stable in local authorities which were high users of long-term foster care. But this difference between high and low authorities might be inevitable, given the higher numbers and probably wider range of children in recorded long-term foster care in high authorities. There was also the possibility that in authorities with low rates there might be unrecorded long-term foster care placements where disruptions also occurred, making statistical comparisons unreliable.

Given the finding that it appeared to be individual local authority practice which was the key factor in whether a child was recorded as in long-term foster care, it was important to look in more detail at the 30 sampled authorities by tertile to see whether there were differences in terms of attitudes, procedures and practices that might explain the differences. Initially there appeared to be no clear pattern of difference between the high, medium and low tertile authorities in relation to, for example, specific types of planning procedure such as using a fostering panel or ADM to approve matches – in part because these were present in the majority of local authorities.

However, further checks on the survey and interview data for the four highest and four lowest authorities in the sample of 30 did find interesting differences between local authorities with high and low rates and within high and low rates. Differences between authorities with high and low rates appeared to be linked to a combination of factors across the themes raised in the chapters above rather than single factors. So, for example, in some of the authorities with the lowest rates (below 20%) of long-term foster care, there was an explicit rejection of long-term foster care as a permanence option, said to be linked to prioritising adoption, special guardianship and reunification. There was often also a combination of negativity about or lack of confidence in long-term foster care alongside, but probably linked to, a lack of confidence in the process or value of matching, associated in some cases with anxiety about whether formal matching would be helpful or disruptive. One local authority referred to 'not needing a piece of paper'. This approach could itself lead to drift and delay, as it did become more difficult to raise the question of matching with children and carers after the placement had been treated informally as long-term for some time.

In authorities with low rates there could also be a less rigorous approach to labelling or recording long-term foster care placements, again probably linked to the lack of confidence in their systems, with particular groups of children either being automatically included and recorded as long-term (e.g. unaccompanied asylum seeking children in one case) or effectively excluded (e.g. long-standing cases). There could also be delays in matching in these authorities caused by local authority restrictions, such as only being allowed to consider an external placement after a fixed period of family finding within the authority. In addition, a lack of confidence in the quality of the support on offer for foster carers was mentioned as affecting confidence in planning for permanence in foster care.

It was not clear if in these authorities with low rates, placements that were not formally matched or recorded but still expected to last were considered as long-term foster care in terms of other aspects of the regulations and guidance; for example, were there care plans for permanence in these placements? Was there expected to be any consideration of reducing the frequency of social work visiting or review meetings?

More positively, in some lower rate authorities there had been a realisation that they had unrecorded de-facto long-term foster care placements and that new systems needed to be developed to plan for, record and support long-term foster care. In some cases, these new systems were starting, and managers reported that attitudes were changing.

Looking closely at the four authorities with the *highest rates* in our sample of 30 (above 70%), generally there appeared to be more confidence in long-term foster care as permanence and in their procedures for achieving it. However, very different practice can lead to similar outcomes. A high rate of children in long-term foster care could result from effective long-term foster care planning, matching and support, with other foster children leaving care through equally effective and timely use of adoption, special guardianship and reunification. On the other hand, a high rate of recorded placements could be due to an almost automatic labelling of placements as long-term foster care after 12 months, without necessarily having undertaken the appropriate assessment and matching. In that situation or where managers felt that more effort should be put into achieving adoption, managers could be anxious about the over-use of long-term foster care.

It seems likely from the data that differences in recording and coding practice were interacting with attitudes and the use of decision-making systems and this could be contributing to differences within and between low, medium and high tertile authorities.

The impact of the regulations and guidance on policy and practice

The findings chapters in this report have looked at the range of practice issues at local authority level, including the perceived impact of the regulations and guidance. Overall, the message was that the long-term foster care regulations and guidance

were valuable but needed to be underpinned by robust systems of assessment, care planning and matching, which operated in the context of sensitive and skilled social work practice with individual children and with birth and foster families. Systems for tracking have also proved to be an important element in most local authorities' care planning for permanence and appear to be more common than in previous research on long-term foster care (Schofield et al, 2008).

From the survey and interview data, there appeared to be a general welcoming of the regulations and guidance as reinforcing the role of long-term foster care as a permanence option. But there seemed to be a spectrum of different patterns of impact on local authority policy, practice, culture and attitudes. The data are mainly qualitative and this does not allow for numbers or percentages of local authorities to be linked to these patterns. However, the patterns described here provide a helpful framework for local authorities to use in reflecting on their own approach to long-term foster care and their responses to the regulations and guidance.

- **Confirmed, supported and enhanced existing procedure and good practice**
  For local authorities who had well-established systems for care planning and matching for long-term foster care, there were not perceived to be major procedural and practice changes since 2015. However, there was acknowledgement that the regulations and guidance had strengthened a positive culture around long-term foster care as permanence and that good practice, such as support plans associated with matching, was becoming more established. There was a rather cautious welcoming of flexibility around the frequency of social work visiting and review meetings, because previous systems were thought to have worked well. The risk for these local authorities may be that their confidence in their well-established practice may reduce the sense of a need to review how well aspects of their long-term foster care service is working.
- **Increased focus on long-term foster care as permanence, with new procedures and practices that were robust but still flexible and child-centred**
  These local authorities welcomed the regulations and guidance for similar reasons around the positive culture change, but were more likely to have developed new long-term foster care systems, perhaps increasing the use of panel systems and ADMs as part of decision-making. But they had also developed some flexibility in practice around these systems (for example, whether older young people with strong birth family ties were necessarily expected to participate in panel procedures). As with all new developments, these would need reviewing with children, foster carers, birth families and practitioners.
- **Increased focus on long-term foster care as a permanence option, with new procedures and practices that were seen as robust but could be rigid**
  In some local authorities the wish to implement the regulations and guidance in a thorough and robust way could lead to new systems that were rather rigid e.g. young people must participate in a fostering panel process for the placement to be agreed as a long-term foster care match. This could affect how the child's placement plan was treated (e.g. Would a long-term foster care placement that had not gone to panel be deemed a permanence plan for the child? What was expected

of the foster carers?). But it could also affect the coding of the placement and the figures supplied to the Department for Education.

- **Increased focus on long-term foster care as a permanence option, but without fully applying the regulations and guidance**
  This appeared to be a smaller number of local authorities but would still be of concern. It would include some where the agreement that this was a long-term foster care placement might be automatic at one year without appropriate assessment, matching and support planning. This decision could also lead to an automatic expectation of reduction in the frequency of social work visiting at this point, raising concerns that this may be happening without full assessment and consultation. There were concerns expressed that stretched local authorities could use this approach as a way of increasing caseloads and managing social work staff shortages.

- **Lack of evidence of implementing the regulations and guidance on long-term foster care as a permanence option**
  Where local authorities had low numbers recorded as in long-term foster care - less than 20% – it seemed that they were less likely to be fulfilling the expectations of the regulations and guidance, leaving some children in unplanned foster care. It was, however, unclear how many of these local authorities were engaged in recommended practice around care planning and matching for long-term foster care, but were simply not recording and coding placements and submitting the figures to the Department for Education, and how many were not engaging with appropriate recognition of long-term foster care as a plan for permanence.

Key recommendations for policy, procedure and practice in long-term foster care

Department for Education

- Maintain a policy focus on long-term fostering as a key part of fostering services and as a legitimate permanence option.
- Consider issuing the long-term foster care regulations and guidance as a single and separate volume or commissioning another agency to do so. This would support local authorities, courts and other agencies in understanding as well as implementing the legal and practice framework.
- Review the regulations and guidance on social work visiting in the *Children Act 1989 guidance and regulations Volume 2: care planning, placement and case review (2021)* and remove the provision (para 3.233) for 'a permanent placement which is intended to last until the child is 18', where the statutory minimum visiting is three months. Then amend paragraph 3.234 so that it states that after a year in an agreed long-term foster care placement, the statutory minimum frequency of visiting can be reduced from six weeks to three months, with a further reduction to six months, if this is in the child's best interests and has the agreement of the child.
- Review the guidance for completing the SSDA903 submission to ensure that the examples provided for the long-term foster care codes are consistent with the requirements of the regulations and guidance i.e. long-term foster care as a child's

plan for permanence; appropriate procedures and practice in assessment and matching in both new and existing placements; appropriate consultation with the child, the foster carers and the birth family.

Ofsted

- Specifically inspect and name long-term foster care in their inspection of local authority permanence planning and judge how well it is being implemented. This would include the good practice elements of the regulations and guidance in relation to assessment, matching, support planning and recording placements for submission in the SSDA903.

Local authorities

Long-term foster care policy
- Set out their local authority's permanence policy, incorporating national regulations and guidance and their own procedural pathways for assessment and decision-making for each option, including long-term foster care.
- Build a positive culture around long-term foster care alongside other permanence options, which is reflected in all documents and communicated to all current and new staff, and to other agencies, including the family courts.
- Support this positive policy on long-term foster care by resourcing other relevant policies within children's services, in particular long-term foster care recruitment and support for long-term placements in terms of education, mental health and the involvement of birth families.
- Ensure that policies on leaving care, Staying Put and support for care leavers are tailored to promote supportive networks, relationship continuity and family membership in foster and birth families during and after the transition to adulthood.

Care planning systems and practice in long-term foster care
- Clarify the procedure for deciding on a long-term foster care plan by defining the role of different meetings, panels and decision makers, to ensure the system is effective, efficient and transparent.
- Focus at each stage of care planning from prior to coming into care to a confirmed permanence plan on how participation by children can best be achieved in different panels and procedures and across the range of ages, developmental stages and circumstances.
- Build relationships with both foster and birth families that facilitate gathering information, promote understanding of long-term foster care as well as other options and encourage participation in care planning.
- Ensure the IRO service is supported to play an active role in care planning in individual cases and in promoting good practice in care planning for permanence, including long-term foster care, across the authority.
- Develop good practice in preparing and presenting permanence care plans to court, especially for sibling groups, including, where appropriate, arguing the case

for long-term foster care using developmental and research evidence to underpin the assessment and recommendations.

- Use tracking panels and processes to increase the local authority's knowledge of the needs and care plans of all looked after children, to avoid drift and achieve timely permanence, including in long-term foster care.

Matching and support systems and practice in long-term foster care

- Provide clear frameworks and systems for the decision-making procedures and practice involved in assessing and matching the child and the long-term foster carer in both existing and new placements, and in both local authority placements and placements in the independent sector.
- Make sure these systems are rigorous, but also flexible and child centred to suit the needs of all children and sibling groups from early childhood to adolescence.
- Ensure high quality social work assessment and documentation of the child's current and long-term needs and caregivers' capacity to meet those needs through training and reflective supervision.
- Promote sensitive practice in facilitating children's participation in assessment, matching decisions and marking the matching decision; for example, developing an individualised approach to whether certificates and celebrations may be appropriate.
- Facilitate creative approaches to life-story work with children of all ages as part of the matching process, including ensuring that foster carers are enabled to build on this work over time. Also use life-story work when young people are leaving care to ensure they have the best possible understanding of their history as they enter adulthood and can explore their feelings about it.
- Linked to life story work but essential for the future care of the child, ensure file records are complete and accurate at the point of the match in relation to a child's history in the birth family and in care, written in a child sensitive way and appropriate for when the child may wish to read their files.
- Ensure placement plans are updated at the point of the match, for example to reflect any changes in delegated authority, and to clarify the role of the foster carers and the approach the local authority will take to supporting the aim of security and stability in this family and normalising the child's experience of family life.
- Build multi-agency support plans into the matching process for all long-term foster care placements, including those with friends and relatives. Ensure that friends and relatives are offered support tailored to their needs, as they will often be managing complex family dynamics.
- Provide supportive interventions for placements in difficulties and develop a procedure for reviewing and learning from placement disruptions in long-term foster care.

Frequency of social work visits

- Ensure there are criteria and systems in place for making the decision regarding the frequency of visits by a child's social worker in long-term foster care, in the context of an assessment of the child's wishes, needs and situation. Include in the plan the process/criteria for reinstating more frequent visits, for example if the child needs extra support or there is a new social worker.
- Develop a model of good practice that includes assessment of the child's overall

well-being, consultation with the child about the frequency of visiting and obtaining the child's agreement for visits to be less frequent than every three months and up to the statutory minimum of six months.

- Ensure that whatever the frequency of visits by the child's social worker, the placement plan needs to include relationship building, safeguarding and enable the child to experience and enjoy secure family life in the foster family while maintaining positive links with the birth family and with their communities.
- Support through supervision the high degree of sensitivity and creativity needed, with face-to-face visits being only one of a range of contact and communication points that the social worker needs to devise in partnership with the child.
- Whatever the frequency of visits, promote a positive working relationship and regular communication between the child's social worker and the fostering social worker to support the child's and the foster carer's long-term well-being.

Frequency of looked after children review meetings
- As with the frequency of social work visits, provide clarity from the local authority about how the decision will be made to have one looked after children review meeting a year for a particular child and the other review conducted to the same guidelines and standards but without a meeting. Include in the plan the process/criteria for reinstating a review meeting when necessary or requested by the child.
- Build consultation by the child's social worker and the IRO with the child and the foster carers into this decision-making process, with a careful assessment of other factors in the child's overall development and situation also taken into account.
- Tailor both review meetings and reviews without meetings in long-term foster care to the particular child and to achieving the goals of permanence in terms of stability and security for the child as a full part of the foster family, while maintaining the child's key relationships and identities with the child's network of friends, birth family members and the wider community.

Recording and data management
- Provide a recording protocol to ensure that there is a point in the matching process when the long-term foster care placement is formally agreed and can be recorded in the local authority's database. Specify who is responsible for undertaking this recording.
- Ensure that software systems enable both service managers and data managers to access, track and ensure the accuracy of the separate data for children with care plans for permanence in long-term foster care and children in agreed /recorded long-term foster care placements.
- Facilitate joint working between data managers and service managers, teams and social workers to achieve joint ownership of the data, support data accuracy and avoid drift.
- Review numbers and rates of long-term foster care in comparison with other local authorities, check own data, learn from good practice and work towards matching those children in unrecorded and informal long-term foster care.

Strengths and limitations of the study and need for further research

The strengths of the quantitative analysis of local authority data include the nationwide analysis of all children in foster care, avoiding issues of bias due to sample selection or local authority variations. The analysis was however limited to the variables available in the dataset, and in some cases these only give broad indicators of the child's situation. For example, the reasons for care entry are coded from a hierarchical list; this obscures factors that may be affecting the family in addition to reasons higher up the list (for example a child's disability is only recorded if this is the main reason they enter care. Disabled children who enter care because of abuse and neglect cannot be recognised as disabled from the looked after children statistics). Future analysis should take advantage of new linkages in Department for Education data, such as the links to the Children in Need and educational outcomes data sets.

The regression analysis was able to include a wide range of variables and to explore the effect of these simultaneously. The analysis included not just child characteristics, but measures of local authority variation. This was helpful and demonstrated powerful associations between local authorities' approaches to long-term foster care, and the likelihood of being long-term fostered for individual children. The local authority variables used, however, cannot account for variation within local authorities - for example deprivation level is looked at from the local authority as a whole, whereas in reality some areas of the local authority may be very wealthy, and other areas very deprived.

It will be useful in a future research study to use the Department for Education datasets to explore questions of 'what happens next' to children once they have been coded as being in long-term foster care. For example, how long do they stay in this foster home, what are the reasons for the foster placement ending, what ages do children leave care, and how many children 'stay put' into adulthood with their long-term foster carers, what are the educational outcomes of children in long-term foster care?

The strength of the survey and interview methodology was that it was possible to capture a wide range of information from diverse local authorities, both to allow detailed exploration of policy and procedure but also to capture something of the day-to-day dilemmas of staff making difficult and finely balanced permanence decisions about children. This analysis both benefitted from having the analysis of the Department for Education administrative data available *and* could put those statistical findings in context. It was also a strength of the study that the team was very experienced in examining the issues in long-term foster care planning and practice and could draw on earlier research studies for ideas and research methods – and to connect with elements not included in this study such as the experiences of children and foster carers of life in a long-term foster family and the experiences of birth parents.

There were some limitations in the data on implementation from the surveys and interviews that related to the data available to local authority managers. For example,

it was not possible for service managers to say how many children in long-term foster care had a reduced frequency of social work visiting, because this data was not aggregated. This is not surprising as frequency of social work visits may appropriately vary over time according to the child's needs, but it has made it difficult to assess in a measurable way the impact of some of the practice changes that were included in the 2015 regulations and guidance. Although some managers were able to say that they had only one or two children out of all the children in their care who had reduced frequency of social work visiting, which was a powerful indication of their reluctance to use this provision.

In terms of the need for future research, it would seem valuable, as with the suggestions for future research using the SSDA903 data, to follow up this study in terms of outcomes and experiences for children. When a previous study was undertaken of care planning systems (Schofield et al, 2008), it was followed up by a case level study in six local authorities with different planning systems, when files, interviews with children, foster carers and focus groups with social workers were undertaken (Schofield et al, 2011). This would be a possible model for a follow up to this study and would supply significant information on the quality of care planning practice and the experience of long-term foster care, especially by children, carers and birth families, in the context of the now established long-term foster care regulations and guidance.

What has been learned from this study, and would need to be built on in any future study, is that analysis of long-term foster care policy and practice in local authorities quantitatively and qualitatively, is best understood in the wider context of their policy and practice in other permanence options, such as adoption, special guardianship, informal kinship care and reunification.

Conclusion

The important role of long-term foster care as a placement and as a permanence option for children has been acknowledged for many years in research, policy and practice. But the issuing of government regulations and guidance in 2015 was nevertheless a very important step in both confirming the status of long-term foster care as a legitimate permanence option and providing a legal and good practice framework.

Local authorities had varied greatly in their approach, procedures and practice in long-term foster care prior to the introduction of the regulations and guidance and, as this study has shown, there continues to be variation. However, the culture around long-term foster care and the focus on care planning, assessment, matching and support appears to have benefitted from both the official recognition of its status and the guidance on how care planning in long-term foster care can and should work.

But it is clear that some aspects of matching and recording of long-term foster care placements still need to be addressed in some local authorities. There also remains

widespread concern and uncertainty about the benefits of reducing the frequency of social work visits to six monthly and review meetings to annually, and in these areas the associated practice and decision-making seemed less clear and less confident.

The context of this study at national and local authority level needs to be kept in mind. Although there has always been an important debate about the meaning and goal of permanence and the role of different options, there is no doubt that the period from 2015, when the regulations and guidance were issued, and 2019, when the data for this study was collected, is one where the debate about permanence was brought into sharp focus. The increasing numbers of children in care during and probably linked to a period of austerity left local authorities with significant challenges around resources, managing the thresholds of care and being able to provide placements of all kinds for children who could not return home. Judgements in adoption cases led to concerns about how adoption would now be seen in courts, while at the same time the legal and practice implications of special guardianship were still emerging. In the meantime, the longstanding and daily practice dilemmas for local authorities and social workers continued: for example, sibling placements, the role of birth families, support for care leavers and the role of the independent sector.

The future of long-term foster care, therefore, does not rely only on the quality of care planning and social work practice in these placements but is affected by a range of political, cultural and resource questions. However, the core principles of valuing long-term foster care as a permanence option and establishing rigorous systems for assessment, decision-making and support which are also sensitive to the needs of all children, foster and birth family members need to be maintained. Having the 2015 regulations and guidance on long-term foster care in place has been a very good starting point.

References

Ball, C. (2005) The Adoption and Children Act 2002: A critical examination *Adoption and Fostering* 29 (2) 6-17

Beckett, S. (2018) *Beyond Together or Apart: Planning for, assessing and placing sibling groups* London: CoramBAAF

Beek, M. and Schofield, G. (2004) *Providing a Secure Base in Long-term Foster Care* London: BAAF

Beek, M., Schofield, G. and Young, J. (2016) *Supporting long-term foster care placements in the independent sector* London: Department for Education

Beek, M., Neil, E. and Schofield, G. (2021) *Moving to Adoption: using the UEA model to help children to move from foster care to adoption* London: CoramBAAF

Berrick, J. D. (2021) Adoption from care: policy and practice in the United States in Poso, T., Skivenes, M. and Thoburn, J. *Adoption from Care: International Perspectives and Children's Rights.* pp 67-86   Bristol: Policy Press

Biehal, N. (2014) A sense of belonging: Meanings of family and home in long-term foster care *British Journal of Social Work* 44, 955–97

Biehal, N., Ellison, S, Baker, C and Sinclair, I. (2010) *Belonging and Permanence: Outcomes in long-term foster care and adoption*, London: BAAF

Boddy, J., M. (2013) *Understanding Permanence for Looked After Children: a review of research for the Care Inquiry* London: Nuffield Foundation

Bullock, R., Courtney, M.E., Parker, R., Sinclair, I. and Thoburn, J. (2006) Can the corporate state parent? *Children and Youth Services Review* 28 (11) 1344–58

Care Inquiry (2013) *Making not breaking: building relationships for our most vulnerable children* London: Nuffield Foundation

Child Welfare Information Gateway (2017). *Extension of foster care beyond age 18*. Washington, DC: U.S. Department of Health and Human Services, Children's Bureau.

Chistolini, M. and Salvadori, G. (2017) *Permanent placement in foster care: how to provide support in ambiguous frameworks* (Conference paper: 9th International Foster Care Research Conference, Paris)

Churchill, S. R. (1979) *No Child is Unadoptable* Beverley Hills, California: Sage

Department for Education (2010) *Children Act 1989 Guidance and Regulations Volume 2: Care planning, placement and case review* London: Department for Education

Department for Education (2015a) *The Care Planning and Fostering (Miscellaneous Amendments) (England) Regulations* London: Department for Education

Department for Education (2015b) *Children Act 1989 Guidance and Regulations Volume 2: care planning, placement and case review* London: Department for Education

Department for Education (2018) *Fostering Better Outcomes* London: Department for Education

Department for Education (2019) *Children looked after by local authorities in England: Guide to the SSDA903 collection 1 April 2018 to 31 March 2019 - Version 1.3* London: Department for Education

Department for Education (2020a) *Children looked after in England including adoptions* London: Department for Education

Department for Education (2020b) *A guide to looked after children statistics in England, Version 1.5*. London: Department for Education.

Department for Education (2021) *Children Act 1989 Guidance and Regulations Volume 2: care planning, placement and case review* London: Department for Education

Department for Education and Science (2003) *Every Child Matters* London: HMSO

Department for Education and Science (2007) *Care Matters: Time for Change* London: HMSO

Department for Health and Social Security (1984) *Report of the House of Commons Social Services Committee* London:HMSO

Department of Health (1989) *The Care of Children: Principles and Practice in Regulations and Guidance* London:HMSO

Dickens, J., Schofield, G., Beckett, C., Young, J. and Philip, G. (2015) *Care Planning and the Role of the Independent Reviewing Officer: Research Report* Norwich, England: Centre for Research on Children and Families, UEA.

Education Select Committee (2017) *The Education Select Committee Inquiry into Fostering* London: Houses of Parliament

Fratter, J., Rowe, J., Sapsford, D. and Thoburn, J. (1991) *Permanent family placement: A decade of experience.* London: BAAF.

Goldstein, J., Freud, A. and Solnit, A. J. (1973) *Beyond the Best Interests of the Child*, New York: Free Press.

Golombok, S., Mellish, L., Jennings, S., Casey, P., Tasker, F. and Lamb, M. (2014) Adoptive gay father families: Parent-child relationships and children's psychological adjustment. *Child Development*, 85, (2) 456-468.

Harwin, J. and Simmonds, J. (2019) *Special Guardianship: a review of the evidence: Summary report* London: The Nuffield Foundation

Howe, D. (2011) *Attachment across the lifecourse: A brief introduction* London: Palgrave Macmillan

Kemp, S.P. and Bodonyi, J.M. (2000) Infants who stay in foster care: child characteristics and permanency outcomes of legally free children first placed as infants. *Child and Family Social Work* (5) 95-106

Lloyd, J. and Borthwick, S. (2008) *Together or apart: assessing siblings for permanent placement* London: BAAF

Maluccio, A.N., Fein, E. and Olmstead, K.A. (1986) *Permanency planning for children: Concepts and methods* London: Batsford

McSherry, D., Malet, M.F. and Weatherall, K. (2016) Comparing long-term placements for children in care: Does placement type matter? *Children and Youth Services Review* 69,56-66

Moffatt, P and Thoburn, J. (2001) Outcomes of permanent family placement for children of minority ethnic origin *Child and Family Social Work* 6 (1) 13-21

Narey, M. and Owers, M. (2018) *Foster Care in England: A Review for the Department for Education* London: Department for Education

Performance and Innovation Unit (2000) *Prime Minister's Review of Adoption* London: Cabinet Office

Re B-S *(Adoption: Application of Threshold Criteria)* [2013] EWCA Civ 1146, [2014] 1 FLR 1035

Rowe, J. (1984) *Long-Term Foster Care* London: BAAF

Rowe, J. and Lambert, L. (1973) *Children Who Wait: A study of children needing substitute families* London: Association of British Adoption and Fostering Agencies.

Schofield, G. (2002) The significance of a secure base: a psychosocial model of long-term foster care *Child and Family Social Work* 7(4) 259-272

Schofield, G. (2003) *Part of the Family: Pathways through foster care* London: BAAF

Schofield, G., Beek, M., Sargent, K. with Thoburn, J. (2000) *Growing up in Foster Care* London: BAAF

Schofield, G. and Beek, M. (2009) Growing up in foster care: Providing a secure base through adolescence *Child and Family Social Work* 14 (3) 255-266

Schofield, G., Beek, M., Ward, E and Sellick, C. (2011) *Care planning for permanence in foster care: report* Norwich: University of East Anglia

Schofield G., Beek, M., and Ward, E. (2012) Part of the Family: Care planning for permanence in foster care *Children and Youth Services Review* 34, 244-253

Schofield, G., Beek, M., Ward, E, and Biggart, L. (2013) Professional foster carer and committed parent: role conflict and role enrichment at the interface between work and family in long-term foster care *Child and Family Social Work* 18 (1) 46-56

Schofield, G. and Beek, M. (2014) *The Secure Base Model: promoting attachment and resilience in foster care and adoption* London: BAAF

Schofield, G. and Beek, M. (2018) *Attachment Handbook for Foster Care and Adoption* London: CoramBAAF

Schofield, G., Moldestad, B., Höjer, I., Ward, E., Skilbred, D., Young, J. and Havik, T. (2010) Managing loss and a threatened identity: Experiences of parents of children growing up in foster care, the perspectives of their social workers and implications for practice *British Journal of Social Work.* 41, 1, 74–92

Schofield, G. and Ward E, with Warman, A, Simmonds J and Butler, J. (2008) *Permanence in Foster Care: a study of care planning in England and Wales* London: BAAF

Schofield, G. and Ward, E., (2011), *Understanding and working with parents of children in long-term foster care* London: Jessica Kingsley Publishers

Sinclair, I., Baker, C., Lee, J. and Gibbs, I. (2007) *The Pursuit of Permanence: A Study of the English Child Care System* London: Jessica Kingsley Publishers

Skivenes, M., Poso,T. and Thoburn, J. (2021) *Adoption from Care: International Perspectives on Children's Rights, Family Preservation and State Intervention* Bristol: Bristol University Press

Thoburn, J. (1988, 1994) *Child Placement: Principles and Practice* (2nd ed.) Aldershot: Arena

Thoburn, J. (1991b) Survey findings and conclusions. In Fratter, J., Rowe, J., Sapsford, D. and Thoburn, J. *Permanent family placement: A decade of experience.* London: BAAF

Thoburn, J., Murdoch, A. and O'Brien, A. (1984) *Permanence in child care* Oxford: Basil Blackwell

Thomas, C. (2013*) Adoption for looked after children: Messages from research* London: Adoption Research Initiative and BAAF

van Ijzendoorn, M. H. and Sagi-Schwartz, A. (2008) Cross-cultural patterns of attachment: Universal and contextual dimensions. In J. Cassidy and P. R. Shaver (Eds.), *Handbook of attachment: Theory, research, and clinical applications* (pp. 880–905). Guilford: The Guilford Press

Ward, H., Moggach, L., Tregeagle, S. and Trivedi, H (2021) Outcomes of Open Adoption from Care: An Australian contribution to an international debate London: Palgrave Macmillan

Wissö, T., Johansson, H. and Höjer, I. (2019) What is a family? Constructions of family and parenting after a custody transfer from birth parents to foster parents *Child and Family Social Work.* 24, 9–16

Appendix A

Methods used in the analysis of SSD903 data on looked after children

Research questions

The research questions for the analysis of the CLA data were derived from the original research questions on profiles and pathways of children and young people in long-term foster care. They included:

1. How many children were in coded long-term foster care placements in the study years, 2014/15- 2017/18?
2. What are the numbers and characteristics of children in long-term foster care in the year ending March 2018?
3. How does the use of the long-term foster care codes vary across local authorities by numbers, rates and child characteristics?
4. How does the use of permanency in long-term foster care compare to the use of other types of permanency?
5. What factors predict a child in care becoming a long-term fostered child?

Methods

The dataset

The data used came from the SSDA 903 Children Looked After (CLA) dataset from the Department for Education. The data were obtained from the Office of National Statistics and were accessed via a secure lab at Manchester University connected to ONS. Data were analysed using STATA software.

The data set captures personal and administrative information on children in care, and the analysis made use of nine years of child level data dating back to 2009/10 for all children who were looked after in the four years from 2014/15 until 2017/18 in England.

The analysis is based on yearly snapshots of the CLA data. To obtain a sample of children in foster care we took a yearly snapshot of data for all children that were remaining in foster care on 31st March of each year. We did not include information on children who left foster care on the 31st March of each year. We made this decision as a rule of thumb to avoid doubling counting children that could have ended and started a foster placement on the 31st of March. As all children in the sample must have an episode of care that includes 31st or March of any year, data we extract from a child on the 31st of March is from an episode of care which must at least end in the following financial year. This means for example, that data for financial year 2014/15 is extracted from an episode that ended no sooner than financial year 2015/16.

Our analysis focuses on *children in foster care*. We therefore identified all children on one of four main foster placement codes in the CLA data: U1, long-term foster placement with relative or friend; U4, long-term foster placement with 'other' foster carer; U3, short-term foster placement with relative or friend; and U6, short-term foster placement with 'other' foster carer. Given our focus, the relatively small numbers of children placed in foster care for adoption codes (U2, U5) were excluded from the analysis as they were on adoption pathways. We also excluded children who were accommodated on a series of short term breaks (codes V3 and V4). We report the counts and percentages of children in foster care in England during the study period 2014/15 to 2017/18 in Table 2.

In reporting the data we used different ways of looking at the child's time in care: The child's 'period in care' refers to the whole time they were in the data set during the 9 years for which we had data. A new 'episodes' refers to any change to the child's legal status, placement or placement provider. Thus when we refer to the 'most recent episode' this refers to the child status at the most recent change of any of these factors. When we refer to a placement, this means the actual foster home the child is living in or the number of foster homes they have lived in.

Child level variables used in the analysis

The CLA data set also contains a wide range of child level information used for the descriptive and regression analysis. These include date of birth, gender, ethnicity, SDQ score (if applicable), convictions, Local Authority of residence and unique identifiers used to link child records. The data set also contains administrative information used to derive a series of variable used for the analysis. The numbers and characteristics of children in long-term foster care placements for the latest financial year available to us (the year ending March 2018) are provided in Table 3 and compared to the characteristics of children in short-term foster care placements in the same year. The child characteristics examined were:

- Gender: coded as 'male' or 'female'
- Age at 31st March 2018
- Age at Start of episode
- Age at Start of period of care (POC): (age when the child first appeared in the dataset)
- Age at the start of the year: (coded in years as: 0-2; 3-5; 6-10; 11-15; 16-17). These age categories were used based on previous research suggesting that end trajectories of children in care tend to be similar within these age groups. They

also reflect common groupings in real life e.g. very young, pre-school/reception, primary, secondary, 16+). (Neil, Gitsels & Thoburn, 2019).

- Ethnicity (coded as: White British; White other; Mixed ethnicity; Asian; Black; Other; Refused/no data).
- Legal Status: (coded as: care order/interim care order; voluntary (Section 20); placement order; other). Legal status is coded at start of most recent episode).
- Reason in care (From Department for Education category of need codes, eight possible reasons are available as to why a child may need care. Local Authorities can enter only one reason and are directed to an ordinal scale with 'abuse and neglect' heading the list of options. Other options are: Disabled Child; Parental disability; Family Acute Stress; Family Dysfunction; Child Behaviour; Low Income Family; Absent Parents). The code was taken from the episode of when we took the snapshot, and not from the start of period of care. If a child leaves and re-enters care the reason for care entry may differ on subsequent admissions.
- Placement provider (Coded as: Local Authority; private fostering agency; Voluntary fostering agency; other).
- Placement Stability. The unique child identifier was used to derive three measures of placement child stability. Firstly, *'total placement changes in care'* were computed over the entire period of analysis (from the financial year 2009/10) and for each financial year that a child appeared in the dataset. This figure represents the total number of different placements the child had been in during their entire period/s of care back to 2009/10 (coded as 0,1,2,3+). The latter allowed us to derive an overall measure of the mean number of *'placement changes per year in care'* – this the average number of placement changes per year across the child's time in care. We also report *'placement changes within current year'* (in Tables 3 & 6, the financial year 2017-18 (coded as 0,1,2,3+).
- Completed SDQ score (coded as yes/no – in terms of whether the SDQ score had been recorded in dataset). The SDQ score is required to be completed for children age 4-16 who are looked after continuously for 12 months.
- SDQ score ≥14 (coded as yes/no – a score of 14 or higher on the SDQ indicates the child may have emotional or behavioural difficulties at a raised level (borderline/clinical)). The percentages of children with an SDQ score ≥14 are based on the sample of children with a completed SDQ score.
- Convictions within the year (coded as yes/no – derived from child outcomes data set – a child has been convicted or subject to youth caution including conditional youth cautions within the year); information on convictions is only recorded for children aged 10+ who had been continuously looked after for 12 months or more.

Censoring
- Guidance from the ONS on the censoring of data were followed. This meant that data were censored in the following ways:
    - At least round numbers to the nearest 5
    - Percentages to be created on rounded values (numerator and denominator)
    - Censor values under 10
    - Censor percentages under 0.5
    - Censor values above 10 or 0.5% if numbers can be reverse engineered

- The numbers in the descriptive statistics tables that contain child characteristics or stratified by local authority have been rounded to the nearest 5, and all values 10 and under have been suppressed (including the percentages). This was to avoid the possibility of identifying children through small numbers and follows the guidance from the ONS. The decision to round numbers to the nearest 5 meant that fewer numbers would need to be suppressed, and ultimately, this had little impact on the accuracy of the results. Censoring and rounding was conducted after descriptive statistics were created, this means that censoring and rounding did not affect the regression analysis.
- Where data needed to be censored for any of the reasons given above, censored data have been replaced by '<10'. Because of the possibility of reverse engineering figures, not all data that has been censored involved small numbers, an example, being the numbers of children in long term foster care with private placement providers, as reported in table 6. These numbers were censored because including them would have meant that low numbers/percentages in other groups would have been possible to calculate.

Examining local authority variations

- *Variations in use of long-term foster care*
  We assessed how the use of the long-term foster care codes varied across the 147 local authorities included in 2017/2018 (five local authorities had to be censored to protect confidentiality due to low numbers of cases). We ranked all local authorities in terms of their shares of foster children in long-term foster care (from lowest to highest – see Figure 1) and generated tertiles. Each tertile contained a third of local authorities (approximately 50 local authorities each). The bottom tertile (*low*) consisted of local authorities whose coded long-term foster care placements represented 3.7%- 32.9% of their overall foster care population. The middle tertile (*medium*) consisted of local authorities whose coded long-term foster care placements represented 33% to 45.9% of their overall foster care population. Finally, the top tertile (*high*) consisted of local authorities whose coded long-term foster care placements represented 46% to 89.4% of their overall foster care population. The characteristics of children in long-term foster care, by local authority tertile group, are shown in Table 4. The tertiles were also used in the regression analysis (Table 7). Data on the rates of long-term foster care were also used to identify local authorities for the qualitative study, and practitioners in 30 local authorities were interviewed from each of the three tertiles.

- *Variations by deprivation of local authority*
  Income deprivation in each local authority was captured by the average local authority level deprivation as collected in the "income domain" of the ONS 2019 Index of Multiple Deprivation (IMD). The income domain captures the proportion of the population within an area that receives income support. IMD information is obtained at a small area level which fits into each Local Authority. There are no cases where a small area can be in two Local Authorities. Using mid-year population estimates on the small area level, the average income deprivation

level of each Local Authority was estimated. Quintiles of income deprivation were generated where there were around 30 Local Authority within each quintile. The quintiles were used in the regression analysis (see below).

- *Use of alternative permanency pathways*
  We inspected the use of permanency in long-term foster care, and how this varied nationally over time, across the study financial years 2014/15 to 2017/18. We contrasted the trend in the use of permanency in long-term foster care across time with the use of two routes out of care for children, (1) returning home, and (2) adoption and Special Guardianship Order (these options were combined to avoid loss of data due to censoring small numbers and because they are both permanency routes where the child exits the care system). The results are plotted in Figure 2.

  We identified permanency pathways from the variable 'reasons why the episode ceased' using the following codes: E11, E12 (adoption codes), E4A, E4B, E13 (reunification codes), E45, E46, E47, E48, (Special guardianship codes). We obtained this sample of children for the financial year 2017/18; this sample is not a snapshot of one time period, but all children that left care for permanency in that year.

  We also assessed the characteristics of children who left care through adoption or Special Guardianship Order, and return to parents in order to compare the profiles of children in these permanency options to the children in long-term foster care. Characteristics we considered included gender, age, ethnicity, legal status, reason in care, placement provider. While row numbers were rounded to 5 to protect confidentiality, total values were computed by summing unrounded values, with the results rounded to the nearest 5. Percentages were created on rounded values. These descriptive statistics are displayed in Table 5.

  In Table 5, in order to ensure comparability to children who exited the care system to either adoption/SGO or reunification, we included the characteristics of children in long-term foster care from the last episode before they were coded as being in long-term foster care. This provides data that is comparable to that held on the children who exit the system – where their characteristics are those of their last episode before leaving care.

- *Local authority variations in rates of children exiting to other forms of permanency (tertiles)*
  In order to explore whether local authority variations in the use of long-term foster care might be related to higher or lower use of other forms of permanency (adoption/special guardianship order; return to parents), for the sample selection of children leaving foster care for permanency, yearly snapshots of the data were taken from the period of 1st April 2017 until 31st March 2018 for all occurrences of placements ceasing for one of four reasons: (1) adoption, (2) Special Guardianship Order, (3) return home, and (4)left care to live with parent(s), relative(s), or other person(s) without parental responsibility. For the regression analysis, all local authorities were ranked by the proportion of children that left foster care for permanency (i.e. the total numbers leaving care for the following 4 routes: adoption,

SGO, return to parents and return home). Tertiles of low, medium and high use of other forms of permanency were then obtained, where 50 local authorities fell within each category and these tertiles were used in the regression analysis.

Understanding which children were in long-term foster care – the regression analysis

Finally, we used regression techniques to assess which factors predict a child becoming a long-term fostered child. In our logistic regressions, we included 2 set of regressors. The first set comprised individual child characteristics such as gender, age at the start of the year, ethnicity, and child SDQ score as well as characteristics of the child's placement such as legal status, reason in care, placement agency, and placement stability. The second set attempted to control for differences across local authorities. We controlled for differences in terms of local authority income deprivation (using the quintiles as described above), (tertile of) shares of children ending foster care for other forms of permanency, and the (tertiles of) long-term to short-term children in foster care.

We estimated both univariable and multivariable regression analysis. Univariable analyses allowed us to quantify the relationship between the dependant variable (whether a child becomes a long-term fostered child (1) or not (0)) and a single risk factor. It attempted to measure the magnitude and the statistical significance of each risk factor on the probability of a child becoming a long-term fostered child. For example: is this probability different according to gender?

Univariable analyses do not allow for confounding risk factors to be taken into account. For instance, if girls in long-term foster care are older than boys, a univariable analysis cannot show if the probability of becoming a long-term fostered child differs significantly because of gender or because of age. To understand the independent effect of confounding variables, it is necessary to adjust for the effects of covariates by performing multivariable analyses which allow confounding risk factors to be taken into account jointly. Results from logistic regressions are presented as percentage point differences (marginal effects) in Table 7. Our analysis is based on data for the latest financial year available (2017/18) but used historical data to generate some of the covariates we used.

Censoring of the data
In the outputs, there are no values such as percentiles, min or max values as these will be values derived from singular individuals. All counts of children under 10 were censored. All values which are generated with denominators under 10 were also censored. "<10" is the descriptive given for all instances where there are under 10 children. All percentages under 0.5 have been censored and replaced with "<10".

The regression results – additional checks undertaken
We undertook a series of checks to ascertain whether our results would hold up to a series of changes in our econometric approach. These checks included the following: We removed LA level variables from our analysis. We tested a specifications with:

- child level covariates and LA deprivation only;
- child level covariates and LA use of alternative permanency tertiles;
- child level covariates and LA use of long-term foster care tertiles.

We tested a multilevel model with LA-level random effects.

None of the approaches above altered the main estimates obtained for the child level covariates and therefore our main findings. Note also that a simple two-level ordered logit regression with LA-level random intercepts would produce results that are approximately similar to estimates from a logit estimator with LA fixed-effect. Results are available upon request. Given that the specification in use provided the best goodness-of-fit statistics we retained it in the report but commented on specification strategies in the limitations sub-section.

Results of the regression analysis including univariable analyses.

Long-term Foster Care (U1&U4) vs Non Long-term Foster Care (U3&U6)				
	Univariable		Multivariable	
	Marginal effect	T-stat	Marginal effect	T-stat
Gender				
Female gender (Base category)				
Male gender	0.00602	(1.44)	0.00822*	(2.27)
Age at the start of the year				
Ages 0-2 years (Base Category)				
Ages 3-5 years	0.154***	(16.39)	0.0359***	(3.4)
Ages 6-10 years	0.320***	(44.61)	0.116***	(8.46)
Ages 11-15 years	0.359***	(52.74)	0.162***	(11.82)
Ages 16-17 years	0.354***	(38.2)	0.190***	(12.75)
Ethnicity				
White British (Base Category)				
White other	-0.0757***	(-7.58)	-0.0241**	(-2.77)
Mixed ethnicity	-0.0719***	(-10.00)	-0.0126*	(-2.02)
Asian	-0.130***	(-12.03)	-0.0421***	(-4.34)
Black	-0.119***	(-13.56)	-0.0479***	(-6.27)
Other	-0.198***	(-13.79)	-0.0814***	(-5.98)
Refused/no data	-0.333***	(-11.13)	-0.0754**	(-3.01)
Legal Status				
Care order (Base Category)				
Voluntary	-0.215***	(-35.02)	-0.109***	(-16.62)
Placement order	-0.350***	(-29.97)	-0.165***	(-15.71)
Other	-0.455***	(-3.75)	-0.196*	(-2.07)

Reason in care (CIN)				
Abuse and neglect (Base Category)				
Disabled Child	0.110***	(6.35)	0.0717***	(4.69)
Parental disability	-0.00507	(-0.44)	0.0186	(1.84)
Family Acute Stress	0.0167*	(2.09)	0.00507	(0.76)
Family Dysfunction	-0.00735	(-1.22)	-0.00839	(-1.62)
Child Behaviour	-0.0396	(-1.73)	-0.0346	(-1.79)
Low Income Family	-0.0288	(-0.48)	-0.0209	(-0.44)
Absent Parents	-0.110***	(-11.17)	0.0114	(1.09)
Placement provider				
Local Authority (Base Category)				
Private	0.00278	(0.6)	-0.0306***	(-7.60)
Voluntary	0.0406***	(3.84)	0.000953	(0.11)
Other	0	(.)	0	(.)
Total placement changes within current year				
0 (Base Category)				
1	-0.179***	(-31.19)	-0.105***	(-20.15)
2	-0.213***	(-19.45)	-0.146***	(-14.44)
3+	-0.282***	(-15.62)	-0.239***	(-14.77)
SDQ				
SDQ score <14 (Base Category)	0	(.)	0	(.)
SDQ score ≥14	-0.0202***	(-3.64)	-0.0206***	(-4.19)
No SDQ score due to age	-0.379***	(-73.32)	-0.219***	(-17.47)
No SDQ score other	-0.319***	(-57.65)	-0.252***	(-46.49)

Local Authority Level Variables				
Income Deprivation Quintiles				
Lowest deprivation quintile	0	(.)	0	(.)
2	0.0253***	(3.76)	-0.0118*	(-1.96)
3	0.0563***	(8.1)	0.00455	(0.76)
4	0.00364	(0.53)	-0.0279***	(-4.59)
Highest deprivation quintile	0.0125	(1.91)	-0.0195***	(-3.35)
Tertile of LA variation in use of other permanency pathways				
Lowest use of other permanency tertile (Base Category)	0	(.)	0	(.)
Middle tertile	-0.0476***	(-9.77)	-0.00944*	(-2.17)
Highest tertile	-0.0418***	(-7.70)	0.000832	(0.17)
LA variations in use of long-term foster care codes				
Lowest use of long-term foster care tertile (Base Category)	0	(.)	0	(.)
Middle tertile	0.224***	(46.8)	0.211***	(46.04)
Highest tertile	0.396***	(87.59)	0.385***	(89.38)
Number of children	**54785**		**54785**	

Notes: Significance levels: * p<0.05; ** p<0.01; *** p<0.001."