

Making decisions about long-term foster family care as a permanence plan in England: An investigation of the implementation of the first government regulations and guidance for long-term foster care

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Abstract

Long-term foster family care has been included as a permanence option in policy in England since the 1980s, however it was not until 2015 that it was defined in government regulations and guidance, with a required practice framework for local authorities, including reporting placement numbers annually to the government. This was intended to give long-term foster care a more formal status as a permanence option, ensure high standards of practice and promote positive outcomes for children.

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This project aimed: (1) to identify the profiles and pathways of children in long-term foster care and (2) to investigate the impact of the regulations and guidance on procedure and practice in local authorities. The second aim provides the focus for the findings presented in this article. The research design included analysis of administrative data, a national survey of local authorities and interviews with 43 managers in 30 local authorities.

The survey results and interview data suggested that the regulations and guidance have had a positive impact by raising the profile of long-term foster care and supporting improved procedures. But there were varying patterns of implementation and significant differences in rates of long-term foster care, which did not relate to differences in local authority populations. This article concludes, therefore, that there is a need for the provision of government support to provide greater consistency in the implementation of the regulations and guidance.

Plain language summary

Long-term foster family care in England is a placement for a child in care who needs a foster family committed to looking after them as a member of their family through to adulthood. This is described as a 'permanence plan', and long-term foster care has been included in policy and practice alongside other permanence options, such as adoption, since the 1980s. However, it was not until 2015 that long-term foster care was defined in the government regulations and guidance, with a required practice framework for local authorities, including reporting placement numbers annually to the government. This was intended to give long-term foster care a more formal status as a permanence option, ensure high standards of social work practice and promote positive outcomes for children.

This research project aimed to identify the profiles and pathways of children in long-term foster care and, as outlined in this article, to investigate the impact of the regulations and guidance on procedure and practice in local authorities. The research used an analysis of government data on children in care, a national survey of local authorities and interviews with 43 managers in 30 local authorities.

The survey findings and interview data suggested that the regulations and guidance had made a positive impact by raising the profile of long-term foster care and supporting improved procedures. But there were very varied attitudes and approaches to long-term foster care practice and significant differences in rates of long-term foster care, which did not relate to differences in local authority populations. These findings suggest that there is a need for greater consistency in how the long-term foster care regulations and guidance are implemented, which requires the support of the government.

Keywords

Long-term foster care, permanence, care-planning, implementation of regulations and guidance

Background

Long-term foster family care for children has been included as a permanence option in policy and care planning documents in England since the 1980s, when permanence first became a goal of the care system (Schofield, 2009). However, it was not until 2015 that long-term foster care was defined in government regulations and guidance, with a required

practice framework for local authorities (Department for Education [DfE], 2015a, b). This was an important step and was intended to give long-term foster care a more formal status as a permanence option alongside legal order options such as adoption and special guardianship, as well as reunification, kinship care and residential care. The aim was also to ensure more consistent standards of good practice across local authorities and to promote greater stability and more positive outcomes for children for whom long-term foster care was the formally agreed permanence plan (DfE, 2018: 19). A 'formally agreed' plan would include, for example, approval of a child's match with a foster family by fostering or permanence panels and senior agency decision-makers and would be recorded on the child's file. Given these aims, it was important to undertake a research investigation of the implementation of the regulations and guidance.

At the heart of achieving successful long-term foster care placements for children there are two main challenges. There is first the need to ensure the highest possible standards of social work practice in: assessment; decision-making; preparation of children and foster carers; matching children with carers who can meet their needs through to adulthood; and providing multi-agency support (Schofield et al., 2008; Schofield et al., 2011). These elements were built into the 2015 regulations and guidance for long-term foster care but with a high degree of flexibility for local authorities, compared with adoption, as to the systems and procedures that would support appropriate decision-making.

The second and linked challenge for achieving successful long-term foster care is to create a family life that is nurturing and therapeutic whilst being sensitive to the child's need to experience what is understood to be a 'normal' childhood, as they grow up in a society that has traditionally stigmatised children in care. The experience of a normal family life, rather than being identified as 'different', is important to children in care (Boddy, 2013) but is rarely explicit in policy, practice and research (Moran et al., 2019; Reimer, 2016). However, it is one of the factors that often underpins preferences in England for routes to permanence outside of the care system, such as adoption (Schofield et al., 2008, 2011).

The government's 2015 regulations and guidance on long-term foster care sought to address this second challenge and to promote the child's experience of a nurturing family home, not only by providing support but also by reducing the sense of intrusion by state bureaucracy into the life of the child. One provision was to allow a potential reduction in the statutory minimum frequency of social work visits to every six months for a child in an agreed long-term foster care placement, where the child had been for at least a year. The second was to allow local authorities to reduce the number of looked after children review meetings to one a year, with the other six-monthly review conducted without a meeting. The expectation was that both of these reductions would only occur if they were in the child's best interests and in consultation with the child.

The focus here was on enabling the child to feel fully part of the foster family and included, giving long-term foster carers greater delegated authority to make parenting decisions. However, the regulations and guidance also stated the need to promote positive contact with the birth family for children in long-term foster care, wherever this was possible. So, the permanence plan for the child's integration into the long-term foster family has to be seen in the context of the likelihood of continued relationships with at least some birth family members.

A further requirement accompanying the regulations and guidance was that, for the first time, local authorities were expected to record agreed long-term foster placements and submit this data as part of the annual children looked after data return (known as

SSDA903) to the DfE. It was hoped that this would both ensure appropriate decision-making processes were in place and enable local authorities and government bodies to track placements and monitor outcomes for this specific care plan and group of children. Analysis of that data was part of the study reported here (see Larsson et al., 2021) and will be published in more detail in a separate article (Larsson et al., in progress).

Although there were some new elements in the regulations and guidance, such as changes in the required frequency of social work visits and the need to record formally agreed placements to submit to the government, they were designed not to represent a radical change in policy or practice but primarily to raise the profile of long-term foster care and achieve a greater consistency of good practice. Long-term foster care was already listed as a permanence option in policy documents, and there were local authorities who already had good practice as defined by the guidance, for example, in terms of rigorous matching and formal decision-making (Schofield et al., 2000, 2008). However, there had been concerns about both stability in foster care and outcomes in areas such as education and offending for children in care, highlighted by the research review for the Care Inquiry (Boddy, 2013), which was published while the regulations and guidance were still being developed. It was, therefore, seen as a significant step for good practice in long-term foster care to be set out in legislation as regulation and guidance. This brought it closer to the standards and guidance set out for legal permanence options, such as adoption (DfE, 2013), and was a framework against which local authorities could be inspected.

This article focuses on the implementation of the regulations and guidance in local authority long-term foster care procedures and practice with children and families, but lessons can also be learned more widely about the challenges of implementing new government regulations and guidance in child welfare (Dickinson, 2011).

Policy context

As previously stated, long-term foster care has been a permanence option in England since the 1980s (Rowe, 1984; Schofield, 2009; Thoburn, 1991), but a key aspect of the first long-term foster care regulations and guidance (DfE, 2015a, b) was the redefinition of permanence. This new definition focuses on the quality of family relationships and child outcomes and, by excluding the reference to 'legal' parents from the previous definition (DfE, 2010), more readily includes long-term foster care:

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. (DfE, 2015b: 22–23, s2.3)

The formal definition of long-term foster care is a placement planned to last up until age 18, the legal age at which a child leaves care (DfE, 2015a), however the definition of permanence anticipates the foster family providing family membership 'beyond' childhood.

As in the USA and Canada, a major focus of England's permanence policy for children in care who are unable to live safely with members of their birth family had been on promoting adoption (Adoption and Children Act 2002). However, the UK has differed from North America in also considering long-term foster care to be a formally recognised and valued permanence option, including long-term foster care with approved kinship carers. This position of valuing both adoption and long-term foster care also sets England apart from

most of the rest of Europe, where adoption from care is a rarely used placement option (Poso et al., 2021) and where, although children may have foster care placements that last throughout childhood, there is not a plan for ‘permanence’ *per se* (Chistolini and Salvadori, 2017).

A significant development in permanence policy in England has been the introduction of special guardianship orders following the Adoption and Children Act 2002. This option gives special guardians parental responsibility for the child up to the age of 18, shared with the birth parents, and takes the child out of the care system. Designed to be taken up by either family and friends or unrelated foster carers, these orders attract varying levels of financial and other support from local authorities and have primarily been taken up by relatives (Simmonds et al., 2019).

During the period of 2015 to 2019 there was a steady increase in the number of special guardianship orders at a time when the number of adoption orders and recorded long-term foster care placements had declined (Larsson et al., 2021). This raised questions about the relationship between these trends and how recommendations and decisions about permanence are made for individual children and sibling groups by local authorities.

Research context for permanence in long-term foster care

Although there was major government funding for research on adoption following the Adoption and Children Act 2002 (Thomas, 2013), there were also a number of research studies on placement for permanence (Sinclair et al., 2007) and long-term foster care in the period up to the regulations and guidance released in 2015.

Among the studies that focused specifically on long-term foster care were a prospective longitudinal study of a cohort of 52 children in planned long-term foster care (Beek and Schofield, 2004; Schofield et al., 2000; Schofield and Beek, 2009); a retrospective study of 40 adults aged 18–30 who had grown up in foster care (Schofield, 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, 2012). These studies used a range of quantitative and qualitative methods to identify key elements in successful placements that were therapeutic in providing secure-base relationships and a sense of belonging in childhood (Beek and Schofield, 2004; Schofield and Beek, 2009; Schofield et al., 2012), with foster families often continuing to provide support into adult life (Schofield, 2003). International research supports the significance of foster care relationships and a sense of belonging for stability and positive developmental outcomes (Fernandez and Barth, 2010). These issues were reflected in the 2015 guidance.

A sense of belonging as part of the long-term foster family was also a key element in the success of a placement to emerge from a study led by Biehal (Biehal et al., 2010; Biehal, 2014). This study compared adoption and long-term foster care, and the findings also underpinned the regulations and guidance produced in 2015. It demonstrated that where long-term foster care placements were stable, emotional and behavioural developmental outcomes were similar to those provided by adoption (Biehal et al., 2010). Although long-term foster care placements were generally less stable than adoption, the researchers noted that reliable comparisons between placement stability for the adopted and fostered children were difficult because those who were adopted were younger when they joined their new families.

This dilemma for research regarding comparisons between long-term foster care and adoption has persisted, with Selwyn concluding: ‘There is little evidence on which to judge the comparative outcomes of planned long-term foster and adoptive placements’ (Selwyn, 2023: 2). As Selwyn points out, this is not only to do with different age profiles but also the absence of data on *planned* long-term foster care, an issue that the new requirement from 2015 to record planned long-term foster placements was designed to remedy. Thoburn (2023) has also described the challenges of comparing the longer-term losses and gains that children and young adults experience in long-term foster care and adoption, in particular in terms of identity and ties to the birth family.

A further element that research has suggested policy-makers need to take into account in long-term foster care is therefore the role of the birth family and the significance of contact with them (Schofield and Ward, 2011). Contact has been a factor in the research and evolving practice in relation to adoption, but it also has specific implications for long-term foster care (Neil et al., 2003; Neil and Beek, 2020). A study of practice in England, focusing on interviews with birth parents and linked to parallel studies in Sweden and Norway (Schofield et al., 2010), found that parents valued help from social workers to cope with their sense of loss and to maintain the role of a supportive parent for the child in the longer term. But research has also highlighted both the immediate and longer-term traumatic impact on birth mothers (Broadhurst and Mason, 2020) and birth fathers (Philip et al., 2024) of losing children to care through the court system, affecting how they are able to manage their continuing role as parents through contact. Good practice with birth parents and other family members, including promoting relationships with siblings (Monk and Macvarish, 2018), was an important aspect of the 2015 regulations and guidance, and current practice needs to take this research on the trauma of parental loss into account.

Research studies in the UK have also emphasised the importance of systems of care planning for achieving permanence in long-term foster care (Schofield et al., 2008). Research has consistently shown that planning processes developed very differently in different local authorities, with variations in the level and rigour of decision-making and, in particular, how effectively family- and child-sensitive participation was managed (Schofield et al., 2000, 2008, 2011). The nature of care planning practice and decision-making was a major focus of the 2015 guidance.

Finally, as part of this project and published separately in the article by Larsson and colleagues (in progress), the research team carried out descriptive and regression analyses of the DfE children looked after data (SSDA903) from 2014/15 to 2017/18 to determine the profiles and pathways of children in long-term foster care nationally and the likelihood of being coded in long-term foster care compared to short-term foster care. The findings from this analysis provided important information about the significant minority of children in foster care who were in long-term foster care (39% in 2018) and their profiles. They were typically White British children in middle childhood or early adolescence and from a background of maltreatment. Children in long-term foster care were less likely to be from ethnic minorities compared to children who returned to their birth families (Larsson et al., 2021).

But this analysis raised some very specific questions about the implementation of the regulations and guidance and/or the accuracy in the use of new codes for recording a child’s placement as long-term foster care (Larsson et al., 2021; in progress). In particular, there was a wide range between the local authority rates of long-term foster care as a proportion of all foster care, with a rate of less than 10% in some local authorities and more than 80%

in others. It was also found that the main factor that would determine whether a child was in long-term foster care was not their individual characteristics nor differences in populations between local authorities, but whether the care authority had a high, medium or low rate of recorded long-term foster care. These findings provided an important context for the in-depth exploration of how long-term foster care is implemented in practice, which forms the focus of this paper.

Methods

The initial research questions for the data analysis reported here were: ‘Have local authorities established procedures and practices that conform to the 2015 long-term foster care regulations and guidance?’ and ‘Which aspects of the regulations and guidance are working well or need to be reviewed?’ Following the analysis of the administrative data, a more specific question emerged: ‘What factors could help to explain the wide variation in local authority rates of long-term foster care?’

The key elements of the regulations and guidance, findings from the administrative data and previous studies of care planning (Schofield et al., 2008, 2011) informed the online national survey of all 147 local authorities in England. Three different questionnaires on the implementation of the regulations and guidance were piloted and sent to looked after children, fostering and independent reviewing officer (IRO) managers via the Director of Children’s Services in each authority. Survey instruments used both closed and open questions regarding procedures and practices around care planning for long-term foster care, requiring quantitative and qualitative analysis using SPSS and NVivo software.

All local authority surveys had similar opening questions regarding policy and procedures so that even if a response was received from only one of the service managers, it was possible to get an indication of how long-term foster care was managed in that local authority. The survey questions ranged from broader questions about the perceived impact of the regulations and guidance on their practice to more specific questions arising from the regulations and guidance regarding, for example, the use of panels to make formal decisions on care plans for long-term foster care and matching. Specific questions were then asked that targeted each managerial specialism, for example, reductions in the frequency of social work visits and reductions in the frequency of looked after children review meetings.

The survey achieved a very good response rate for at least one questionnaire from 109 or 74% of the 147 local authorities, covering all regions and authority types (shire counties, London boroughs, unitary authorities and metropolitan boroughs), with 28 local authorities providing multiple responses. Survey returns comprised:

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

A subsample of 30 local authorities was then identified from the administrative data and survey analysis, by selecting local authorities who represented different profiles and procedural systems, including examples from the high ($n=13$), medium ($n=7$) and low ($n=8$) tertiles that emerged from the analysis of DfE SSSA903 data (Larsson et al., 2021; in progress).

Research interviews ($N=43$) were then conducted by telephone with managers responsible for fostering (12), looked after children (10), IROs (10) and data systems (11) from these 30 authorities. Data managers were included to help address the variations in long-term foster care rates between local authorities that had emerged from the administrative data.

Semi-structured interview schedules covered the key elements of the regulations and guidance. They were designed to obtain more detailed insights into attitudes, decision-making, planning and recording practice, but focused in particular on clarifying points that emerged from the analysis of the survey data.

The interview data were analysed thematically using NVivo software and linked to the survey data by the research team. Qualitative data from the survey and interviews were analysed separately and thematically using the multi-step method of thematic analysis as described by Braun and Clarke (2021). A first step involving familiarisation with the data included making a summary of each interview to help gain an overview. Following this, broad preliminary data coding took place using NVivo, applying deductive codes taken from the research questions. Within each broad theme, inductive codes were generated manually from the data. As the coding progressed, the initial codes were grouped into categories or sub-divided forming new codes (Saldana, 2016). Qualitative data were initially analysed by one researcher, with a second researcher overseeing the process and confirming coding decisions with any disagreements or lack of clarity addressed by discussion between the researchers.

These discussions supported a reflective research process (Braun and Clarke, 2021; Mortari, 2015). This was important in a research team analysing complex data and trying to make sense of practitioners' attitudes and values as well as agency procedures and practices, when so much is at stake for so many children in state care. It was also helpful to share and reflect on differences in our own approaches and assumptions about the meaning of the data, as a research team that had varied social work-related practice experiences and varied specialist knowledge of areas including long-term foster care, adoption, contact, social work decision-making, trauma, and child and adolescent development. This variety and the process of reflection and mutual challenge was felt to enrich the insights that were gained from the analysis and to be of assistance in going on to reach some conclusions about implications for practice.

The quotations from the interviews used to illustrate the themes in the findings section below are anonymised. But to demonstrate the range, they are identified by local authority code numbers, by area of management (CLA = Children looked after, F = Fostering, IRO = Independent reviewing officer) and by whether the manager's local authority was in the high, medium or low tertile for rates of long-term foster care.

A stakeholder research advisory group, which included representatives from local authorities, voluntary sector leaders, academics and the DfE, advised on the conduct of the research and the implications of the findings. There was also consultation with care-experienced young people from the Children and Family Court Advisory and Support Service (Cafcass) Family Justice Young People's Board who shared their varied experiences and views, especially on the role of social workers and review meetings in long-term foster care. Ethical approval was provided by the University Research Ethics Committee.

Findings

Three major themes were identified from the analysis of the survey and interview data which helped to make sense of the different experiences of implementation of the long-term foster care regulations and guidance (DfE, 2015a, b).

Theme 1: Positive impact on culture and procedures, but ongoing concerns

There was widespread reporting of the positive impact of the introduction of the regulations and guidance. The most common impact was said to be a positive change in attitudes towards long-term foster care, with one respondent commenting: 'I think the biggest change... is a cultural change actually in terms of the recognition that long-term fostering is now recognised as a legal permanence option' (LA37, CLA, High). This account of a 'cultural change' in the status of long-term foster care was often linked to the idea that although a long-term foster care plan remained an administrative change of placement status within the local authority, it was seen as having greater official, 'legal' recognition as a permanence option because of the new government regulations.

The second important impact described was the development in many local authorities of more formal, robust procedures for planning and agreeing long-term foster care placements. Assessment and matching the needs of the child with the capacity and long-term commitment of the foster carers are specified in the regulations and expanded on in the guidance, with associated practice including consultation with the child, foster carers, birth parents and the IRO. One manager linked the raised profile and the significance of new procedures: '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).

Although there was a range of often positive attitudes towards long-term foster care, there were some shared concerns that could be found even in the most positive local authorities. One common concern was whether it was possible to recommend long-term foster care because of the ongoing role of the state in a child's life, often associated with concerns about stigma: 'We don't want children to be subject to a statutory intervention until 18' (LA79, CLA, High). A second concern was said to be the apparent contradiction between agreeing plans for permanence in a long-term foster family but nevertheless feeling obliged to keep the option of a return to the birth family open. In some cases, this issue was said to be raised by IROs at reviews, with the posing of the question: 'Why is this child not able to live with their birth family?' Social workers felt this undermined the agreed plan to promote a child's sense of permanence in their matched foster family: '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' (LA51, F, High). This 'mixed message' could also be confusing and unsettling for the birth family and the professional network. It was accepted that sometimes plans needed to change over time, but where the plan was permanence in the long-term foster family it was said to be important for messages to be consistent and supportive of the child's sense of belonging and the carers' sense of their parenting role.

A third area of shared concern was the perceived risk of instability in foster care. This was reflected in discussions about the language used in some authorities, for example: ‘I struggle with “forever families” sometimes, because is it going to be forever?’ (LA57, F, Medium). The risk of instability was felt to be associated both with the children’s difficulties and with a shortage of long-term foster carers that could affect achieving a good match. These practice dilemmas were faced by all local authorities, and most participants talked of finding ways to reflect on them and working to manage them positively. This process relied on a shared culture and commitment to long-term foster care as a permanence option combined with good practice at case level, with, for example, high quality evidence from assessments for what each child needed and what each foster carer could provide, with recommendations that were fully discussed with senior staff. It also included a recognition that certain permanence decisions, for example placing siblings together or separately, would always be challenging. There were said to be no guarantees or easy answers, so it was important to be able to rely on high levels of professional skill and judgement in assessment and working with children and families.

But for some managers and authorities it seemed that these challenging issues were ruling out long-term foster care as a defined permanent placement. This will be discussed further below, but that approach almost certainly added to a sense of uncertainty and drift for the many children defined as in short-term foster care for whom legal options such as adoption and special guardianship orders were not available.

Theme 2: The place of long-term foster care in a perceived hierarchy of options

Although overall the regulations and guidance were reported to have helped raise the profile of long-term foster care, decision-making on which permanence option would be right for each child or sibling group was still, and inevitably, challenging for all local authorities.

One of the dilemmas facing practitioners was a concern that there appeared to be a hierarchy of permanence options. Legislation and guidance mean that there is a need to assess other options before a long-term foster care choice is made. Birth family options, such as reunification, informal kinship care and special guardianship by family and friends, have to be considered first. Adoption would then often be considered next for young children in care proceedings, as this legal route to permanence had to be considered in the court context.

There were concerns among managers about whether this sequence of decision-making would inevitably make long-term foster care seem like a ‘lesser’ value permanence option:

I think in my view that long term fostering is seen as a sort of lesser option . . . 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)

As this quotation from an IRO manager suggests, age, a key factor in placement choice identified in the administrative data, interacts with issues around the hierarchy of permanence options and practice expectations about whether, for example, adoption can actually be compatible with maintaining birth family connections.

One particularly difficult area in which the choice of permanence option interacted with the age of the child was in decisions about the placement of siblings, especially when sibling

groups included a young child who could be adopted if placed separately. This has long been a dilemma for social workers and the courts when making decisions about permanence (Beckett, 2021; Monk and Macvarish, 2018; Schofield et al., 2008, 2011), but the consensus from the social work managers interviewed in this study was that the courts appeared to be giving greater priority to the maintenance of sibling relationships, ideally through being placed together or, if not, through contact. This challenge in making sibling placement decisions not only related to circumstances where adoption for a younger child might be an option, it was also said to affect decision-making around the separate placement of siblings for long-term foster care or special guardianship and the plan for contact.

The addition of special guardianship to the range of permanence options had generated both new opportunities and new challenges for practitioners. Special guardianship extended legal options for family members and also provided an option for kinship carers who might otherwise become or remain long-term foster carers. Local authorities reported that although they would support kinship long-term foster care placements, there was a common expectation that kinship carers would move to a special guardianship arrangement, often but not always with a local authority commitment made to similar levels of financial and other support. On the other hand, placement with family members was deemed the most beneficial target to aim for, even if the family member preferred a long-term foster care arrangement:

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. (LA53, CLA, Medium)

A long-term foster care plan for children with non-kinship carers could also come in some authorities with the explicit aim of carers moving to a special guardianship arrangement. This would also be a difficult issue for social workers, on the one hand believing that special guardianship outside of the care system would have advantages for some children, while also understanding that it would not be appropriate for all foster families and that foster carers would need to trust that the support for the placement, including financial, would be maintained into the future regardless of the choice they made.

Permanent placement decision-making therefore often included valuing the long-term foster care option, but this interacted with a range of other factors relating to the long-term identity and other needs of each child over time and the availability of different forms of permanent family placement.

Theme 3: Challenges of balancing administrative procedures with child-sensitive meanings and practice

One starting point for understanding the practice and the procedural implementation of long-term foster care as permanence was to explore the language that social workers used and shared with children and carers. The concept of permanence was likely to be communicated to children in language that would be meaningful to them:

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... That's what permanence is – it is being part of the family. (LA37, CLA, High)

The expectations communicated to foster carers offering long-term foster care reflected this same concept of permanence as family membership, and often highlighted the post-18 commitment:

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. (LA51, F, High)

It was less clear how long-term foster care was presented to birth parents and other family members. A positive role for the birth family was seen as an important aspect of achieving successful placements and settled children but, as in previous research (Schofield and Ward, 2011), managers recognised that social workers often found it difficult to give parents the time and support they might need.

The principles and implications for child placement options have to be translated into a framework of shared procedures for planning, matching and support to ensure the same quality of practice is extended across agencies, which is the aim of the new guidance. Previous studies of long-term foster care had found great variety in the practice surrounding long-term foster care (Schofield et al., 2008, 2011), and this study found variations in practice but also some continuity of issues. Some of the practice dilemmas from previous research regarding decision-making and matching (Schofield et al., 2008, 2011) were found to be causing similar difficulties at the time of this study. These were primarily regarding how systems and procedures were managed for and experienced by older children and adolescents, who are the most likely to be in long-term foster care as the administrative data had shown.

One key issue for child-sensitive practice was being aware of how older children felt about making a public long-term commitment to becoming a member of the foster family, given the context of their complex histories and birth family relationships. The formality of the procedural process could add rigour and perhaps promote participation by young people, through attending fostering panels for example, but these procedures may not so easily adapt in a child-sensitive way to the nuanced feelings of individual young people. This issue was highlighted in the interviews in discussions about how the final confirmation of a placement as long-term foster care was marked and celebrated, as often happens after the making of an adoption order. In this account, the final matching decision was said to be marked 'invariably' by a celebration:

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. (LA78, CLA and F, Low)

For many young people, celebrating the confirmation that their foster carers will offer them a place in their family through to adulthood is appropriate and highly valued. But for others, this confirmation might be experienced as further excluding their birth family from their lives, even when contact is continuing. So, listening to the child and appreciating their individual feelings and circumstances is important, as described by another manager: 'We had some discussion about celebrations and sometimes it's very suitable. But sometimes that

[matching decision] also marks the last loss of birth parents, so we're kind of trying to keep that on an individual basis really' (LA51, F, High).

Although similar dilemmas were identified in previous research (Schofield et al., 2008), the additional challenge for local authorities since the new regulations and guidance were introduced was how to show that the confirmation and recording of a long-term foster care placement was rigorous and timely while also allowing the work with the child, the foster family and the birth family to be conducted sensitively and at the child's pace. As the new recorded data on long-term foster placements formed part of the local authority return to the DfE, there were some concerns that it could become a performance measure.

The approach to recording placements was raised specifically in the survey and interviews because of the concerns about the wide range of rates of recorded foster care placements across local authorities. There were clearly very different systems for recording, both procedurally at a case level and in terms of the software systems used, which varied in their capacity to provide information to data and service managers. Issues such as whether it was the long-term foster care *plan* or the *confirmed match and placement* that triggered the recording of the long-term foster care code were described as making a difference in reported numbers, but also risked a lack of clarity about the status of each child and whether their permanence plan had been achieved. Some data managers reported working very closely with operations managers to ensure that there was greater consistency in procedures for tracking and defining long-term foster care placements accurately, but this was at the very least time consuming, and there was some lack of confidence in the accuracy of the data in a number of local authorities.

Finally, it was important to consider the impact on practice of new elements in the regulations and guidance designed to 'normalise' a child's experience of family life by reducing, where appropriate, the frequency of social work visits and review meetings. Although some local authorities welcomed flexibility around the frequency of social work visits for children in long-term foster care in principle, most talked of carefully considered reductions from every six weeks to every three months, which had actually been available since 2010 (DfE, 2010). Few found the idea of six-monthly visits, as allowed from 2015, acceptable (and even then only for a very small number of children) as this was said to make relationship-building and maintaining appropriate monitoring and support for the child's welfare more difficult. There were similar concerns about the impact that holding annual looked after children review meetings would have on exercising their corporate parenting responsibility for children's welfare, with the other six-monthly review conducted to the same requirements but without a formal meeting.

It was suggested that a more appropriate response to the wish to normalise a child's experience of family life in long-term foster care was to be more creative and child-sensitive in planning visits and review meetings, working closely with each child and foster family to make keeping in touch and reviewing the child's progress both effective and acceptable. But the practitioner concerns and the lack of clarity about these provisions in the regulations and guidance suggested that they should be kept under review.

Varied patterns of implementation and impact

The analysis of the three key themes above not only provided an understanding of different attitudes, decision-making practices and responses to the long-term foster care regulations

and guidance, but also made it possible to identify five broad patterns of implementation and impact.

For some local authorities, the new regulations and guidance were said to have *confirmed and reinforced existing good practice*, which could be rigorous but also flexible and child sensitive. It was not unexpected to find local authorities with previous practice that already fulfilled the core requirements of the regulations and guidance. In earlier studies (Schofield et al., 2000, 2008 and 2011) there were some local authorities who were actively and positively planning for long-term foster care as permanence. But even for these local authorities there were said to have been definite benefits in having government regulations and guidance that legitimised this option and supported their practice.

For other local authorities with less well-established long-term foster care practice, the regulations and guidance had prompted significant changes with, for example, the introduction of the approval of matches by permanence or fostering panels. This sense of *greater scrutiny was said to lead to more positive approaches to practice*, for example around matching, that could also be communicated to the child: ‘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’ (LA51, F, High). There were also examples of additional resources in the service that arose from the raised profile:

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 we probably would have done five, ten years ago... (LA25, CLA, Medium)

There were, however, some local authorities who had introduced procedures to give *extra recognition to long-term foster care, but the new procedures seemed rather rigid*. This might include, for example, expecting young people to attend a fostering panel or participate in a celebration dinner when this may not be something they felt ready for. While flexibility was needed in practice to accommodate each child’s wishes and feelings, this could seem harder to achieve when procedural standardisation and rigour were the main goals.

In other local authorities there had been *delays in implementing the regulations and guidance*. Even four years after they were introduced, required practice was only just developing and was said to be ‘still a bit up in the air’: ‘Practice is having to catch up... and we still sort of have some legacy ideas about long-term children who are in foster care and “long-term” just means they stay where they are’ (LA7, IRO, Low). This could mean that the government’s aims, for example to avoid drift, were not yet being achieved. It is important to note that the long-term foster care regulations and guidance were not issued in a single volume but were threaded through general documents on care-planning. This may have contributed to some local authorities being slow to put the elements together in order to implement them as a coherent package.

Finally, there appeared to be some local authorities who were *reluctant to accept long-term foster care as a permanence option in principle*:

Our local authority 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... Our permanency plans are adoption or special guardianship. (LA34, F, Low)

This approach to long-term foster care was defended as representing a positive commitment to legal permanence, but it is not consistent with government policy. The approach was linked to a reluctance to engage with the more formal decision-making and recording now required and tended to be associated with some of the lowest rates of long-term foster care. This means that there would be children in foster families who were ‘just staying where they are’, but without a permanence plan to give clarity to the child, the foster family and birth family or to provide the necessary support. Indeed, it was concerns about drift in foster care that had led both to the promotion of legal orders outside of care, such as adoption and special guardianship (Selwyn, 2023), and to the 2015 long-term foster care regulations and guidance.

Approaches to implementation and rates of recorded long-term foster care

The analysis of the survey and interview data across these themes also made it possible to explore potential links between approaches to implementation and the differing rates of long-term foster care across local authorities that had been identified in the administrative data, from less than 10% to more than 80% of children in foster care (Larsson et al., 2021).

There appeared to be no clear differences between the authorities with high, medium and low rates in relation to any one specific procedural factor, such as using a fostering panel to approve matches. However, differences between high and low rates appeared to result from a combination of factors. So, for example, in authorities with the lowest rates of long-term foster care (below 20%), there was often an explicit rejection of long-term foster care as a permanence option, combined with negativity about or a lack of confidence in long-term foster placements and in the value of formal matching. One local authority referred to ‘not needing a piece of paper’. This attitude could itself lead to drift and delay, as managers described how it became more difficult to raise the question of formal matching with children and carers after the placement had been allowed to drift or treated informally as long-term for some time. In authorities with low rates there also appeared to be a less rigorous approach to recording long-term foster care placements, probably as a consequence of the lack of confidence in this option and in their systems. Drift and delay are well-known to affect children’s wellbeing outcomes generally and the child’s sense of permanence in particular (Boddy, 2013). There is also evidence, in contrast, that in planned and supported long-term foster care placements children can feel that sense of belonging and permanence as part of the family (Biehal, 2014; Schofield et al., 2012; Thoburn, 1991).

More positively, in some authorities with low rates 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 in progress, and managers reported that attitudes were changing.

Looking closely, by contrast, at sample authorities with the highest rates of recorded long-term foster care (above 70%), there appeared to be more confidence in long-term foster care as permanence and in their procedures for achieving it. On the other hand, a concern was expressed that a very high rate of long-term placements could be due to an almost automatic recording of placements as long-term foster care after 12 months, without necessarily having undertaken the appropriate assessment of long-term needs, matching and support planning.

Discussion and implications for practice

Prior to the introduction of the regulations and guidance in England in 2015, long-term foster care presented particular challenges for national policy-makers and local authority leaders seeking to understand and improve the quality of practice and outcomes. There was no legal or practice framework and no way of knowing how many and which children were deemed to be in long-term foster care.

As this study has indicated, there have been some benefits from the introduction of the regulations and guidance in terms of raising the profile of long-term foster care and providing a framework for care-planning, decision-making and recording. However, there is still much for teams and practitioners to manage at case level in terms of complying with procedural guidance while being sensitive to the current and future needs of each child and foster family. At times, thorough but speedy decision-making may be appropriate to secure a child's sense of permanence, but at other times flexibility and working at a child's pace are needed before the child is able to commit emotionally and procedurally to a permanence plan in the foster family. Work with the birth parents at key points also needs to be sensitive to the stage they are at in working through their loss in order to maximise their capacity to be a positive presence in the child's life in the future.

As described above, variations in rates between local authorities could not be clearly linked to any one specific factor. There did, however, seem to be attitudes and practices that, combined with the systems for recording, were driving different rates of long-term foster care. It can be concluded that local authorities with the same rates of recorded long-term foster care *at any level* may have quite different qualities of practice, including differing levels of compliance with the detail of the regulations and guidance and commitment to child- and family-sensitive practice.

The overall picture suggests that for decision-making and practice to become more consistent, there need to be reviews of long-term foster care processes, including recording, by the senior managers of local authorities. One practical and helpful initial step would be for the long-term foster care regulations and guidance to be issued as one volume rather than threaded through other care-planning documents, so that local authority leaders, practitioners, foster carers, birth families and the courts can have a coherent and complete picture to work with and improve practice. National policy-makers also need to pay the same level of attention to long-term foster care as they do to adoption and special guardianship, given the numbers of children involved and the challenges of delivering good practice and outcomes.

A major strength of the study reported here was its collection of national survey data combined with more in-depth interview data, which were then analysed in the light of the first available administrative data on long-term foster care (Larsson et al., 2021) and previous long-term foster care research (Biehal et al, 2010; Schofield et al., 2008, 2011). This combination not only highlighted key aspects of the differing implementation of the regulations and guidance by local authorities, but also facilitated exploring long-term foster care decision-making in the context of other permanence options, such as adoption and special guardianship, which are also evolving (Selwyn, 2023; Simmonds et al., 2019).

The main limitation of this study was the fact that these were still relatively early days in terms of the implementation of new regulations and guidance for a long-term placement option. Measuring changes in outcomes, such as stability and wellbeing, will require further research after children have been in long-term foster care placements for a period of time.

However, future research could build on the analysis of both administrative data and procedure and practice undertaken by this study, as in previous follow-up studies (Biehal et al., 2010; Schofield et al., 2011).

Although this study was an investigation of the implementation of a specific piece of legislation and guidance in relation to long-term foster care, it also raised important questions about how the government can promote good practice through regulations and guidance – in this case when a placement is an administrative decision rather than a legal order. This study also has wider implications for the implementation of new frameworks for child welfare practice if aims for consistency are to be achieved (Dickinson, 2011; Peckham et al., 2022) and underscores the need for an active programme of dissemination and support.

The local authority managers who participated in the surveys and interviews for this study demonstrated a clear commitment to making the best decisions they could for each child and sibling group, which meant wrestling with the dilemmas of each possible permanence plan to ensure it focused on the evidence of the needs of each child. There is no doubt that achieving successful long-term foster care placements, as with all permanence options, presents local authorities both with a range of distinct opportunities and a range of perplexing challenges, at both the systemic and the child and family levels. These should be addressed more consistently within and across local authorities in order to meet the needs of the many children for whom long-term foster care will be the permanence care plan through to adulthood.

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References

- Adoption and Children Act (2002) London: Stationery Office.
- Beckett S (2021) *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.
- Biehal N (2014) A sense of belonging: Meanings of family and home in long-term foster care. *British Journal of Social Work* 44(4): 955–971.
- 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 (2013) *Understanding Permanence for Looked After Children: A review of research for the Care Inquiry*. London: The Care Inquiry.
- Braun V and Clarke V (2021) *Thematic Analysis: A practical guide*. Thousand Oaks, CA: Sage Publications.
- Broadhurst K and Mason C (2020) Child removal as the gateway to further adversity: Birth mother accounts of the immediate and enduring collateral consequences of child removal. *Qualitative Social Work* 19(1): 15–37.

- Chistolini M and Salvadori G (2017) *Permanent Placement in Foster Care: How to provide support in ambiguous frameworks*. Conference paper. Ninth International Foster Care Research Conference, Paris.
- Department for Education (DfE) (2010) *Children Act 1989 Guidance and Regulations Volume 2: Care planning, placement and case review*.
- DfE (2013) *Statutory Guidance on Adoption: For local authorities, voluntary adoption agencies and adoption support agencies*.
- DfE (2015a) *The Care Planning and Fostering (Miscellaneous Amendments) (England) Regulations*.
- DfE (2015b) *Children Act 1989 Guidance and Regulations Volume 2: Care planning, placement and case review*.
- DfE (2018) *Fostering Better Outcomes*.
- Dickinson H (2011) Implementing policy: 'We've given you the policy, now implement it'. In: Glasby J (ed.) *Evidence, Policy and Practice: Critical perspectives in health and social care: Why evidence doesn't influence policy, why it should and how it might*. Bristol: Policy Press.
- Fernandez E and Barth RP (eds) (2010) *How Does Foster Care Work?: International evidence on outcomes*. London: Jessica Kingsley Publishers.
- Larsson B, Schofield G, Neil E, Young J, Morciano M and Lau Y-S (2021) *Planning and Supporting Permanence in Long-Term Foster Care: An investigation in England of the first regulations and guidance for long-term foster care*. Norwich: University of East Anglia.
- Larsson B, Neil E, Schofield G, Young J, Morciano M and Lau Y-S (in progress) What are the profiles and pathways of children in long-term foster care in England? An analysis using newly available administrative data (journal article).
- Monk D and Macvarish J (2018) *Siblings, Contact and the Law: An overlooked relationship?* London: Birkbeck.
- Moran L, McGregor C and Devaney C (2019) Exploring the multi-dimensionality of permanence and stability: Emotions, experiences and temporality in young people's discourses about long-term foster care in Ireland. *Qualitative Social Work* 19(5–6): 1111–1129.
- Mortari L (2015) Reflectivity in research practice: An overview of different perspectives. *International Journal of Qualitative Methods* 15(5): 1–9.
- Neil E, Beek M and Schofield G (2003) Thinking about and managing contact in permanent placements: The differences and similarities between adoptive parents and foster carers. *Clinical Child Psychology and Psychiatry* 8(3): 401–418.
- Neil E and Beek M (2020) Respecting children's relationships and identities in adoption. In: Miller G, Helder E and Marr E (eds) *The Routledge Handbook of Adoption*. London: Routledge, pp. 76–89.
- Peckham S, Hudson B, Hunter D and Redgate S (2022) Policy success: What is the role of implementation support programmes? *Social Policy and Administration* 56: 378–393.
- Philip G, Youansamouth L, Broadhurst K, Clifton J, Hu Y, Bedston S and Brandon M (2024) 'When they were taken it is like grieving': Understanding and responding to the emotional impact of repeat care proceedings on fathers. *Child and Family Social Work* 29(1): 185–194.
- Poso T, Skivenes M and Thoburn J (2021) *Adoption from Care: International perspectives on children's rights, family preservation and state intervention*. Bristol: Policy Press.
- Reimer D (2016) Constructions and balances of normality in the biographies of former foster children. *Social Work and Society* 14(2): 1–20.
- Rowe J (1984) *Long-Term Foster Care*. London: BAAF.
- Saldana J (2016) *The Coding Manual for Qualitative Researchers*, Third edn. Thousand Oaks, CA: SAGE Publications.
- Schofield G (2003) *Part of the Family: Pathways through foster care*. London: BAAF.
- Schofield G (2009) Permanence in foster care. In: Schofield G and Simmonds J (eds) *The Child Placement Handbook: Research, policy and practice*. London: BAAF, pp. 139–158.
- 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, Sargent K and Thoburn J (2000) *Growing up in Foster Care*. London: BAAF.
- 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(1): 244–253.
- 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, Moldestad B, Hojer 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. *The 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.
- Selwyn J (2023) Outcomes for children adopted from care in the UK. In: Lowe N and Fenton-Glynn C (eds) *Research Handbook on Adoption Law* (e-book). Cheltenham: Edward Elgar Publishing, pp. 228–247.
- Simmonds J, Harwin J, Brown R and Broadhurst K (2019) *Special Guardianship: A review of the evidence. Summary report*. London: Nuffield Family Justice Observatory.
- 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.
- Thoburn J (1991) Survey findings and conclusions. In: Fratter J, Rowe J, Sapsford D and Thoburn J (eds) *Permanent Family Placement: A decade of experience*. London: BAAF.
- Thoburn J (2023) Understanding adoption breakdown: A socio-legal perspective. In: Lowe N and Fenton-Glynn C (eds) *Research Handbook on Adoption Law* (e-book). Cheltenham: Edward Elgar Publishing, pp. 269–284.
- Thomas C (2013) *Adoption for Looked After Children: Messages from research. An overview of the Adoption Research Initiative*. London: BAAF.

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