



Fostering Network NI – Membership Response

Independent Review of Children’s Social Care Services
‘Consultation on the Recommendations’

Summary Paper

1st December 2023

“Every day is a challenge – I didn’t realise how much I was an advocate. I didn’t realise that every day you get up and put your armour on to fight their corner.” (FC17)

About the Fostering Network

- ❖ The Fostering Network is the UK’s leading fostering charity. In Northern Ireland we have been leading the fostering agenda for more than 20 years to influence policy and practice.
- ❖ Our influencing priorities include the need for an improved regulatory framework; raising the status of foster carers as a core element in the delivery of children’s services; improving educational outcomes; and raising awareness about being a foster carer.
- ❖ Our membership includes almost 2800 fostering households, with more than 4000 foster carers and kinship foster carers across all five Health and Social Care Trusts.
- ❖ The four not-for-profit fostering agencies who operate in NI are also valued members of our Network (Barnardo’s, Action for Children, Foster Care Associates and Kindercare).
- ❖ Our views are directly informed by research and consultation with our membership.

About this Paper

The Fostering Network NI developed this response to the Department of Health’s consultation on recommendations arising from the Independent Review of Children’s Social Care Services. It was undertaken on behalf of its members and staff team, who participated in focus groups and interviews.

With an emphasis on why each recommendation is important, alongside some suggestions for key reform, this paper provides their feedback on the three specific foster care recommendations. It also includes their views on some other areas in the Review, in particular what else needs to happen to address the increasing number of children requiring support.

Introduction

The Fostering Network’s briefing paper to inform the Independent Review of Children’s Social Care Services highlighted a wide range of challenges, including an increase in the number of children coming into the care system in NI, which has not been matched by investment in foster care. With fewer people coming forward, the recruitment and retention of foster carers is now a significant issue, underpinned by an over-reliance on kinship care, which is not a suitable option for every child.

A crisis in social work has also been evident by high vacancy rates and turnover of staff, leading to a lack of support for vulnerable children and families. Other issues include an increase in the number of asylum-seeking children (UASC) requiring skilled and experienced foster carers. The ongoing cost of living crisis may also lead to more children entering the care system, given that changes in the economic conditions of family life alone, without any other factors, impact on rates of abuse and neglect.

The Fostering Network also highlighted long-standing concerns about the slow pace in terms of legislative and policy change, which is hampered by the absence of a functioning NI Assembly. Consultation on the introduction of new fostering regulations for example, has not been published, and the development of standards needs Executive approval.

The Fostering Network and our members therefore welcome this timely opportunity provided by the Independent Review of Children’s Social Care Services (2023) to achieve transformational change in the restructure and reform of children’s social care services.

Methodology

Overall, the consultation project engaged with around **100** participants. The consultation gave people an opportunity to discuss and share their views about some of the issues and recommendations covered in the Review, and their ideas for implementation and reform.

In **Phase 1**, we consulted with **45** participants, from across all Health and Social Care Trusts. This included a mix of in-person and online focus groups, and interviews with foster / kinship carers; Independent Fostering Providers (IFPs); and members of the Fostering Network staff team.



Foster / kinship carers (30 people)

- 3 x Focus Groups
- 5 x One-to-One Interviews

Independent Fostering Providers (5 people)

- 1 x Focus Group
- 1 x Interview

Fostering Network Team (10 people)

- 1 x Focus Group

In **Phase 2**, we held an online engagement session with Professor Ray Jones, attended by over **50** people, including foster carers, social workers, IFPs, and other professionals.

Summary of Key Findings

SECTION ONE – Structures and Representation

• A new regional structure

Consultees considered to what extent they agreed / disagreed with the Review's recommendation to create a new single **regional Children and Families Arms-Length Body (ALB)** to replace the current model of service delivery across five separate Health and Social Care Trusts; and to give consistency and focus to the necessary developments in foster care (and adoption) services across Northern Ireland.

Key points

- ❖ Consultees identified a consistent approach to service provision as being the main benefit of an effective regional model. They believe that more effective planning at a regional level and working to the same standards would lead to better communication, greater efficiency, easier access to services, and improved outcomes. Under this model, a central point of contact with overall authority and leadership was also seen as being a key benefit, as it is currently unclear who is accountable for making things happen.
- ❖ The majority of consultees therefore welcomed the regional model in principle, and believed it could be the right mechanism to give consistency and focus to the necessary developments in foster care services across Northern Ireland. However, this would be very dependent on strong leadership; a clear implementation framework in which to co-ordinate the necessary transformation; a commitment to changing culture and practice; the involvement of all relevant sectors, children, young people and families; and appropriate levels of resource.

- ❖ There was general consensus amongst consultees that the effective implementation of the Review's recommendations is reliant on the success of a new regional model. Unfortunately, many were sceptical that government departments / agencies had the expertise and vision to deliver the model as envisaged by Professor Ray Jones.

- **Representation / Consultation**

In terms of the wider implementation framework, the whole premise of the Review was that it would require a different mindset and a reset to achieve meaningful change, especially in terms of how the voluntary and community sector, and children and families, are included.

There were high levels of engagement with children, young people and families throughout the course of the Review, including with foster carers, so the recommendations were very much informed by people with lived experience. Consultees were keen that this inclusive model continues into the implementation phase. However, there was some concern expressed that the Department of Health has taken a 'business as usual' approach through an already established programme board / workstreams, without any selection process or clear mechanisms for partnership working and consultation with foster carers or IFPs.

Moving forward, consultees were very clear that ongoing collaboration and engagement with foster carers, and key agencies such as The Fostering Network and IFPs, was essential to create a shared vision for children's social care services, and to ensure that those representing looked after children have a meaningful role in influencing policy and practice. Foster carers believe that, if they are to be more valued as the Review has indicated, then their expertise and insight should be a key part of informed decision-making.

Recommendations

1. The creation of a partnership framework which provides opportunities for all sectors, and children, young people, foster carers and others with lived experience, to collaborate and have their voice heard in the shaping of the ALB, and the implementation of the Review's recommendations.
2. A partnership framework could include a representative forum / panel of foster carers, thereby ensuring a broad depth of contributions from a range of different people with a variety of skills and experiences. As one example, The Fostering Network independently chairs the IFP Forum - this model could be expanded to include statutory agencies and foster carers.

SECTION TWO - Previous reviews of foster care policies and services

Consultees discussed to what extent they agreed / disagreed with the Review's recommendation that '**Previous reviews of foster care policies and services should be updated and acted upon now, and not allowed to drift.**' (Recommendation 25)

Key points

- ❖ Consultees welcomed the inclusion of this recommendation. They strongly believe that progressing recommendations arising from previous reviews of foster care policies and services is an overdue and essential component of achieving transformational change in the delivery of children's social care services.

- ❖ The lack of clear implementation plans and accountability in the system to ensure previous reviews were acted upon within an agreed timeframe was consistently highlighted as a contributory factor to the 'drift' and delay. Other factors included five Trusts all working in silos, and key personnel moving on before work was completed.
- ❖ The caveat from the Department of Health that this recommendation, and others, would be implemented subject to funding availability, was widely regarded by consultees as a barrier already being presented to its completion.
- ❖ Consultees were particularly concerned about the continued absence of fostering regulations and standards, and believe their introduction is the key turning point to ensuring a more consistent approach in provision, as envisaged by the new regional model. They regard the restoration of the political institutions as an urgent priority to implement this much needed reform, and are increasingly frustrated at the prolonged absence of an Executive which is stalling its progress.
- ❖ Consultees were frustrated with the lack of engagement processes with independent fostering agencies as experts by experience, and key providers across all five Health and Social Care Trusts.

Recommendations

3. A next steps action plan should be published in which to complete the refresh of previous reviews of foster care policies and services within a maximum six-month timeframe, and begin the implementation process. New guidance should also be developed regarding timeframes for implementation of recommendations arising from any future policy and service reviews.
4. The introduction of the fostering regulations, currently awaiting scrutiny and Executive approval, and the subsequent development of standards, should be progressed and resourced as a priority action. This is essential to maximise the potential for real reform through consistency in policy, services and support.
5. Given the timelapse since previous reviews, and in order to align with a new model which values foster carers as valued members of the workforce, foster carers should be included as part of work to update reviews, and there should be mechanisms put in place to facilitate this (e.g., See Recommendations 1 and 2).
6. The role of the Independent Fostering Providers (IFPs) should be recognised through an established partnership process, similar to the fostering provider forums which operate across all other parts of the UK. This would include regular meetings between the Managers/Heads of Service of both independent and statutory fostering agencies. The Fostering Network in NI currently independently chairs an IFP Forum, which could easily be expanded to incorporate statutory agencies on a regular basis.

SECTION THREE - Valuing foster carers

Consultees discussed to what extent they agreed / disagreed with the recommendation that **foster carers should be recognised and positioned as valued members of the children's social care workforce** (Recommendation 26). They also considered its categorisation as one of eight Guiding Principles, which aim to provide a general steer on how implementation of the Review's recommendations should proceed.

Key points

- ❖ Consultees cautiously welcomed the call to action in the Review report that foster carers 'should be seen as colleagues and not simply as service users'; and the associated recommendation that they should be recognised and positioned as valued members of the children's social care workforce. There was some lack of clarity and different interpretations about what being part of the 'workforce' means in this context, and how the recommendation would be translated in practice.
- ❖ Many were pleased about the level of visibility given to this recommendation as one of the eight Guiding Principles to guide future reform in the provision of more effective family and children's services. They hoped its inclusion as a Guiding Principle would ensure actual implementation of the Recommendation, as opposed to it remaining aspirational in nature, which many consultees expressed concern about.
- ❖ Being undervalued in their roles as 'you're just a foster carer' was one of the most frequent issues raised by foster / kinship carers during the initial Review consultation, and as part of this consultation project on the recommendations.
- ❖ There was strong consensus across the foster / kinship carer consultees that meaningful reform of children's social care services would never be achieved if implementation of this recommendation did not lead to a sea-change in culture, mindset and practice across service provision for looked after children and families.
- ❖ Consultees highlighted challenges, and made suggestions for reform, in three key areas relating to (i) not being heard (excluded from professional meetings and key decision-making), (ii) a lack of understanding and awareness amongst social workers about the complexities of the foster / kinship carer role, and (iii) a lack of information and support.
- ❖ Consultees acknowledged the crisis in the children's social care workforce as outlined in the Review, and identified pressure on social workers from unsustainable caseloads as being a contributory factor in foster / kinship carers' experience of poor practice.
- ❖ Many consultees thought more focus was needed on finding ways of working which valued and included birth parents as part of the team around the child, whenever their children are in foster care.

Table 1 - 'Being positioned and recognised as valued members of the team around the child'

Priority Issue/Recommendation	What needs to happen? Foster carer suggestions
<p>Recommendation 7</p> <p><u>Foster carers must be included in core meetings and key decision-making</u></p>	<p>Foster carers should be:</p> <ul style="list-style-type: none"> ✓ Routinely included alongside other professionals in all core meetings involving important decision-making about the child. ✓ Given suitable notice to attend LAC Reviews and core meetings, which should be rescheduled if they are unavailable. ✓ Provided with a Health and Social Care Trust email address, and included in all 'team' correspondence. ✓ Included as part of a social worker's appraisal process. ✓ Consulted on development of Trust/agency policies & protocols.
<p>Recommendation 8</p> <p><u>Social workers, and other professionals involved in the lives of looked after children, should have greater awareness and understanding about the complexities of the foster / kinship carer role</u></p>	<p>Improved awareness and training</p> <ul style="list-style-type: none"> ✓ Embedded sessions on foster care in the social work curriculum. ✓ Continuing Professional Development module for social workers. - Role and value of foster / kinship care; working in partnership. - ACEs, trauma-informed practice, and attachment disorders. - Involving birth parents/benefits of relationships with foster carers. ✓ Awareness-raising sessions with judges, including opportunities for foster carers to learn about decision-making in the courts. <p>Introduce a diverse skills-mix in teams around the child</p> <ul style="list-style-type: none"> ✓ To include social workers, foster/kinship carers, parents, teachers and health professionals, and also, depending on a child's particular needs, to have potential access to youth workers, counsellors, mentors; and specialists in trauma, attachment, play therapy, art therapy, and narrative work.
<p>Recommendation 9</p> <p><u>Foster / kinship carers should receive appropriate levels of ongoing support, and all the information they need to fulfil their role.</u></p>	<p>New information protocols and guidance</p> <ul style="list-style-type: none"> ✓ Creation of an accessible 'Handbook' for foster carers and social workers - for information, and as a tool for use at each meeting. ✓ Creation of an information 'Roadmap' of what 'kicks in' at 'certain ages and stages' and links to suitable resources. ✓ Every new foster / kinship carer should be provided with contact information for The Fostering Network. <p>Support / services</p> <ul style="list-style-type: none"> ✓ Regular, pre-scheduled and clearly planned-out meetings with a consistent social worker, who has the relevant knowledge, skills and experience to support a child's particular needs. ✓ Trained foster carers to be intermediary links between the foster carer and link worker, or the foster carer and social worker. ✓ Network of experienced foster carers supporting new people. ✓ A life story co-ordinator in each Trust. ✓ Introduction of a register of approved Foster Carers, under the auspices of the Northern Ireland Social Care Council (NISCC). ✓ More specialist training programmes for foster carers, jointly led with foster carers, including on trauma and attachment issues. ✓ Therapeutic plans within each child's care plan, to support their mental health, and identify any unresolved trauma. ✓ Therapeutic interventions, accessible to fostering families. ✓ Pathway planning (from age 15) for older young people. <p>Improved financial support</p> <ul style="list-style-type: none"> ✓ Foster carers should be appropriately remunerated to meet the needs of children, with equity of fees and allowances in NI.

SECTION FOUR – Supporting Children and Families

Consultation on the Review's recommendation with regards the Mockingbird model (Recommendation 27), led to wider discussions about other programmes; early intervention; family support more generally (Recommendation 22); and advocacy for parents engaged with social care services (Recommendation 36). Consultees discussed this in the context of increasing numbers of children needing support, as highlighted in the Review, and the associated impacts of poverty (Recommendation 49).

Key points

- ❖ The majority of consultees who were already aware of the Mockingbird model, considered it to be an excellent model of practice.
- ❖ In group discussions about its potential, the majority of foster / kinship carers thought there was currently a gap for embedded support of this kind, and that the Mockingbird Family Programme would be very beneficial for them in their role.
- ❖ A few consultees were concerned about the level of resources needed to ensure there was equitable access to the model, and to sustain it. Some suggested that existing foster carer support networks which operate informally / organically at a local level could perhaps be developed and invested in, as an adaptation of the model.
- ❖ While the majority of consultees would welcome the Mockingbird Family Programme in NI, there was much consensus that it should not be standalone, but available as part of a broader suite of interventions to support foster carers, and families with children on the edge of care.
- ❖ Consultees expressed concern about the rising, unsustainable numbers of looked after children; the increased demand placed on foster care; the over-reliance on kinship care, and the impact of poverty on struggling families with complex needs. Some, including those who liked the Mockingbird model, believed not enough thought had been given in the Review to creating an overall framework of support for foster carers, and children on the edge of care.
- ❖ Consultees welcomed the Review's recommendations and emphasis on early intervention and prevention, and the need to focus more on family support. However, there was strong consensus that more substantive action was needed in the form of a specific recommendation for increased programmes of family support for children on the edge of care.
- ❖ Many consultees suggested that the 'Step Up Step Down' programme, highlighted in the Review as a model of good practice and currently operating in one Trust area, should be more widely available to support parents. A separate focus group with participants in the programme indicated the positive impact it has in supporting parents and children to stay together.

Recommendations

10. As part of progressing the Review's Recommendation 22, to reset and refocus children's social care to give a greater focus and attention to family support, a review should be undertaken of how well family support services in Northern Ireland are currently meeting the needs of families with children on the edge of care. It should identify where the gaps are, what impact current provision is having on child and family outcomes, and which interventions are most effective.
11. Support for families / children on the edge of care should focus on keeping families together where possible, and include practical support which focuses on their strengths as well as their needs. It should also consider the co-occurrence of multiple adversities such as domestic abuse, parental mental ill-health and substance misuse, and broader risk factors such as poverty and social isolation.
12. A wider range of programmes than one model (Review Recommendation 27) should be introduced on a region-wide basis as part of a framework of evidence-informed interventions to support (i) foster / kinship carers in their role, and (ii) families with children on the edge of care. The Review should incorporate a further recommendation in relation to this. For example, it should consider the expansion of the 'Step Up Step Down' programme, which is highlighted in the Review as a model of good practice with very positive outcomes in terms of keeping children on the edge of care safely at home with their family.
13. Families with children on the edge of care should be identified as a priority group within the wider implementation of the Review's Recommendations, and in associated key policy areas relating to early years, childcare, family support, and child poverty.
14. The further development and deployment of multi-agency professional and multi-agency frontline teams and services to assist children and families (Review Recommendation 16), and plans to further develop a skills mix within children and families frontline services (Review Recommendation 17), should include a specific focus on early intervention and prevention, and best practice in supporting families with children on the edge of care.
15. There should be a more diverse skills-mix in frontline teams and services around the child, to include social workers, foster/kinship carers, parents, teachers and health professionals, and also, depending on a child's particular needs, access to youth workers, counsellors, mentors; and specialists in trauma, attachment, play therapy, art therapy, and narrative work.

"We're loving them, helping them grow and develop, and to find their own personalities."

"At the end of the day, we want to champion these children, we want to be treated as professionals. We do really love these children and want to see them heal from their past. That's why we go into fostering."
