EVALUATION OF SOUTH LEEDS FAMILY GROUP CONFERENCE SERVICE

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with the assistance of Sue Elmer, Leeds Trinity University
SUMMARY

This evaluation reports findings relating to the evaluation of the Family Group Conference Service, based in South Leeds, and initially funded by the Innovation Fund.

Methods included direct observation of 12 Conferences, interviews and/or surveys of family networks, including children and young people, a survey of professionals and documentary study.

Respondents are overwhelmingly positive about the FGC process. Some reservations are expressed which tend to relate to Conferences that were unable to produce plans.

Outcomes are complex to measure, for reasons explained in the report, but the findings include evidence of some positive outcomes.

The evaluation concludes:

(a) The FGCs require expert preparation and facilitation if they are to work well, a process which the Co-ordinator has carried out to an excellent standard.
(b) The system seems to be operating effectively overall.
(c) Each conference, except two, has been able to draw up a plan with clear, achievable and agreed aims. 61 out of 84 action points plans were actually delivered.
(d) Participation levels at the FGCs have been high. Usually all parties have been able to make active contributions during the meeting.
(e) Older children have been able to contribute, including one incident where a 10 year old led the feedback following the private time.
(f) It is noteworthy that in almost all cases very articulate and helpful aunts and uncles (siblings of mothers and fathers) have emerged as key carers, able to provide concrete assistance to struggling parents. Grandparents have also played a key role.
(g) Review meetings have been utilised to review the plans and check implementation and progress.
(h) The social workers are pivotal to the FGCs in sharing their assessments to the families. Most social workers have presented this to a high standard, presenting a balanced view of the strengths and challenges facing the family. Guidance and training is required for social workers, and related professionals, as FGCs are developed and become more extensive.
(i) It is important to note that FGCs exist at an interface with other processes – most notably care proceedings, child protection processes and private law processes. This issue is worthy of further consideration.

This has been a small scale study but it has involved an in-depth study of the operation of the FGC pilot. There is powerful evidence of the success of the FGC process. All parties provide positive feedback on the FGC process, with some reservations expressed as reported in the full report. Thus it can be argued that even where no plan is produced the process remains positive and empowering, giving a voice to all parties. This is the important process issue recognised by the Public Law Outline. The outcome evidence is also positive, but would require a more rigorous and extensive study.
EVALUATION OF SOUTH LEEDS FAMILY GROUP CONFERENCE SERVICE

Introduction

This report presents an evaluation of the Family Group Conference (FGC) Service based in South Leeds and established in late 2008. The evaluation was undertaken by Professor Nick Frost, of Leeds Metropolitan University. Additional fieldwork was undertaken by Sue Elmer.

The commissioned objectives of the evaluation were as follows:

a) to monitor the frequency of FGCs, attendance at FGCs and the outcomes of FGCs

a) to assess the experience of parents/carers and young people involved in the FGC process

b) to produce an independent report on the functioning of the project within one year

It is important to note that the evaluation was limited by the resources available and this should not be a perceived as a full scale, fully funded research project. It should also be noted that the instruments used in the study were designed prior to the evaluation commencing.

The methodology adopted for the study was as follows:

- a documentary study of the policies and related documentation
- key respondent interviews with senior staff involved in planning and operating the project
- survey of professional staff engaged in specific FGCs
- study of plans produced at meetings, subject to consent being granted by relevant parties
- observation of the decision-making element of FGCs where possible
- face-to-face interviews with primary carers and young people where possible
- survey of relatives and friends attending conferences

Each Family Group Conference, 12 in total, and 3 reviews, have been directly observed by the evaluators. The basic data in relation to each FGC is presented below:
Background to the service

Family Group Conferences have a history of at least twenty years – the origins of which can be found in work in New Zealand with the Maori population (Luton and Nixon, 1999). There is evidence on a FGC system existing in at least 16 countries (Nixon et al, 2005) and in the UK in over 50% of local authorities in 2003 (Brown, 2003). Extensive research has taken place, although there is shortage of research using control groups (Crampton, 2007). Crampton summarise the research report evidence that demonstrates:

<table>
<thead>
<tr>
<th>FGC</th>
<th>Date 2009</th>
<th>Family feedback</th>
<th>Professional feedback forms completed</th>
<th>Plan – received</th>
<th>Review - attended</th>
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<tr>
<td>1</td>
<td>7 February</td>
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<td>25 February</td>
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<td>5</td>
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<td>8</td>
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<td>10</td>
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<td>12</td>
<td>12 August</td>
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Total: C = 9 P = 16 R = 29

16 12 2
'children in the [FGC] project suffered less abuse and that their parents were providing better care compared with children from the comparison cases’ (2007, p.2004)

In another study FGC children:

‘overtime experienced less intrusive involvement with CPS [Child Protection Services]’ (2007, p.204)

Other studies have emphasised process and argued that FGCs:

‘improved collaboration between family members and service providers’ (2007, p. 205)

The profile of FGCs has been higher in recent months following them being mentioned as an expectation in the Public Law Outline:

- A record of discussions with the family (which could include a family plan arising out of an FGC) is filed by the local authority when proceedings are issued as part of the pre-proceedings checklist and that
- Active case management includes encouraging the parties to use an alterative dispute resolution procedure where appropriate during the proceedings, which is likely to include the use of FGCs (para 3.15).

As will emerge in the key stakeholders interviews the origins of the South Leeds Family Group Conference are to be found in the call for ‘Innovation’ projects initiated by the Director of Children’s Services (DCS) in early 2008. Simon Johnson, Service Delivery Manager in South Leeds, had a long history as a champion of FGCs and saw this as an opportunity to promote their development. He saw a clear role for the voluntary sector here and approached South Leeds Health for All (SLHFA). Simon and the Chief Executive of SLHFA together drew up what was to be a successful bid for the service and subsequently drew to get together a multi-agency steering group (see Appendix One for membership). Interviews were held an experienced social worker and child protection specialist, Bernie Jackson, was appointed as Co-ordinator. Later a part-time family support worker was appointed to work directly with the children and young people. It was later decided that this appointment was too inflexible and that a system of sessional advocacy would work better.

The Co-ordinator drew up detailed policies and procedures, drawing on national research and experience. These were later approved by the Steering Group. A successful ‘launch event’ was held on 10th December 2008 with 93 people attending - 36 from social care, 10 from health, 11 from education, 6 from voluntary sector, 12 from early years, 2 from CAFCAS, 8 from intensive family support, 5 other settings.

The policy and procedures are detailed and comprehensive and seemed to have worked well in practice. The referral criteria are outlined as follows in the policy document:

- The existence of a network of “family” members. (This may include relatives, significant family, friends or community members). The network may not be immediately apparent and this should not prevent a referral being made
- The need for a plan to be made to address specific concerns identified.
• The commitment of the family to find a solution to the concerns identified.

During the evaluation period referrals were made from the following sources:

12 from C&YPSC assessment teams
9 from C&YPSC care management teams
3 from the Intensive Family Support Team
1 from an outreach worker (Early Years)

12 of these resulted in actual conferences and ten produced plans. It should be noted that considerable work was undertaken with these referrals where a Conference did not result, but this work has not been explored by this evaluation.

**Interviews with key stakeholders**

Three face-to-face, semi-structured interviews took place with key stakeholders in the FGC process. All were members of the Steering Group established to over see the process.

The FGC pilot was funded through an ‘Innovation’ stream that had been initiated by the Director of Children’s Services. One of the stakeholders reflects on this process as follows:

‘It was hasty to meet the requirements of the Innovations bids. I knew agencies and contacts in South Leeds were keen, so there was nothing controversial at all. We got less funding than we bid for – about 2/3rds of the original amount’

The pilot was organised to be independent of the City Council, and was managed through a local voluntary organisation. This independent element was seen as important by all the respondents:

‘I would argue for it to be independent from social care. It is important that B is independent as a co-ordinator. But it is also important to have the relationship with social care’

‘I would say that it has to be independent. We need to know what it makes it most effective’

‘There are added benefits about pooling ideas, about thinking outside the box, it is creative and refreshing. We can also draw on each others resources’

‘The voluntary sector is more flexible – not as restricted by bureaucracy as the City Council. It enabled us to base [the Co-ordinator] in the community and use a child-centred resource – although I suppose that would have been possible anyway’

One of the respondents added:

‘It had to be independent to get the money – and it had to be a partnership. It is difficult to work out of the independence is about the behaviour of the co-ordinator or about the systems issues?’

Another stated:

‘I think that the families understand and appreciate the independence’
Independence from the City Council is therefore seen as important for both the organisation and delivery of the service.

Respondents were asked about the role and work of the Co-ordinator – responses were overwhelmingly positive and included:

‘She has been excellent. We got an exceptional, highly skilled and excellent co-ordinator’

‘We definitely got the right person – a less experienced person and the whole thing would have been more of a challenge’

There was also considerable recognition that there had been unrealistic expectations of the Co-ordinator:

‘She has been pushed as there is just one person doing everything. There should be others taking on some of the roles – the admin and the development for example. There is just too much for one person to do’

‘More capacity is required to spread the message’

‘There should be a lead on FGCs for the whole city’

‘The role is too much for one person. It really needed a longer lead up and development period. The pilot was developed too quickly’

It is clear that the work of the Co-ordinator is highly evaluated by members of the Steering Group. They also feel that the demands are excessive as the pilot is currently formulated.

The respondents were asked about the role of the Steering Group and how it had operated. Responses again were positive:

‘The Steering Group has been effective in drawing agencies together’

‘I have found the Steering Group very good and very helpful’

‘They were also useful in suggesting ways forward. They were very helpful about the policies and procedures’

Others added in relation to the Steering Group that:

‘The commitment and the attendance have been good. We could perhaps have got a wider variety of agencies on board’

‘It has met regularly and there has been good attendance. We haven’t really had any disagreements or conflict’

There was some concern expressed about:

‘attendance from Social Care managers has been a bit of a problem. There is an issue about how you keep the issue alive within social care’

The Steering Group, with a range of organisations represented, seems to have worked well.
Asked about the actual achievements of the FGCs responses one commented on the launch and the project overall:

‘The launch was very good – very effective. We have clear policies and clear guidelines. The FGCs themselves have been very good – there has been an awful lot of very good work. Some of the stories I have heard of what had happened at the FGCs have been really good. The whole initiative is very exciting’

Others reflected on the work and the plans that had been produced:

‘We devised some good plans and [the families] responded to being trusted to come up with realistic plans’

‘All the Family Plans have been agreed – we haven’t had to add professional riders. We have been able to tap into a wider range of resources’

It terms of outcomes one respondent argued that:

‘We have had individual successes on some cases. We have some families that have come off the CP register – family members have really come up with the goods’

Other emphasised the importance of process:

‘We don’t normally go wide enough across the family. Seeing it in action – I think we apply a label to the entire family – then the actual experience is a contrast’

‘The FGCs have gone very well. The families were often anxious before the meetings but were usually pleased to see how it all came together’

‘The highlights were, for example, when a ten year old girl felt empowered to take over the meeting and present her plan. I can also think of a quite destructive family (were not part of the evaluation) who become more positive’

Brining together the issue of process and outcomes one added:

‘Yes, these are process issues- the process seems to work very well. Outcomes are harder to measure, we can’t always say that it has actually prevented a reception into care. But I have seen families really working together and if sustained then it should pay off’

The group members are enthusiastic about both the process and outcomes of the FGCs.

When asked whether, with the benefit of hindsight, they would have done anything differently, all respondents demonstrated that they were very much aware of pressures to launch the pilot urgently:

‘It was shaped at speed – there was so much to do at those early stages. We didn’t get all the funding we applied for so that led to some initial problems. There was also the issue with the family support assistant there was enough work and she wasn’t flexible enough. We were able to take swift action and resolve it all’

The speed of implementation had also had implications for training and awareness raising:
I am not sure that we trained people (social workers) properly. Social workers have a particular perspective of the role of Social care and it is hard work for them.

'[the co-ordinator] has to do everything to do with FGCs – the admin, the planning, the chairing and the reviews. There is also the issue of child care during the conferences. Admin support would be useful as well’

Other responses about doing things differently with hindsight included:

‘The only things I would do differently are not in our power – more funding and for a longer period! No there is nothing that we really could have done differently’

‘Much longer run in was really needed. Perhaps six months or even a year to do it all much more slowly and carefully. I think training the social workers about referrals is really important. The role of the social worker is crucial – it sets the tone for all the meeting’

‘More referrals from health would be good’

‘The family support worker and then the advocate role has been complex... perhaps it would be better to have volunteers advocates in retrospect’

Asked about the possibility of the project being ‘rolled out’ across the City responses included:

‘There was a shortfall in funding but we have got some money to keep in going until Easter’

‘Locally it is funded until Easter, 2010 now. People want it citywide but no one is really running with it. It would take six co-ordinators and admin and a central manager – about £350k per annum I think’

There was also a mention of the importance of support and supervision for the Co-ordinator, emphasising:

‘the importance of professional supervision. The role was quite isolating and requires professional support in order to reflect on the many challenges inherent in the job’

**The parental perspective**

The parents who attended the FGCs were interviewed briefly immediately following completion of each conference and were guided through a brief questionnaire. 16 parents were interviewed in total. Their responses and perspectives are outlined in relation to each stage of the FGC process below.

a) Preparation Stage

The FGC involves careful and detailed preparation through the Co-ordinator working closely with family and friends. This section reports the question that was asked followed by a table of the responses.
Q1. Did the Social Worker give you sufficient information about the Family Group Conference?

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The perception of the parents was that in most cases they had received sufficient information from the social worker.

Q2. Did the Co-ordinator give you / send you a leaflet explaining about Family Group Conferences?

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Q3. Did you receive a letter from the Family Group Conference Co-ordinator confirming the date, time and the venue prior to the conference?

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Again in the majority of situations the parents stated that they had received sufficient information from the Co-ordinator and felt well-informed prior to the conference. This included a visit from the Co-ordinator prior to the FGC taking place:

Q4. Did the Family Group Conference Co-ordinator visit you prior to the conference to explain what would happen?

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One mother commented that:

‘I was very nervous before the meeting, but the preparation helped’

The preparation stage seems to have gone well with the majority of parents reporting that they had been clearly prepared for the Conference. Inevitably given the challenging situations facing many of the parents some may not re-call contact or may have been difficult to contact.

b) Information Sharing Stage

The first stage of the FGC itself is where the Co-ordinator outlines the ground rules and the process of the FGC and then the social worker provides their perspective on the family situation.

Q5. Did you find the Social Worker’s contribution at the meeting useful?

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<th>Satisfied</th>
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The majority of parents were satisfied or very satisfied with the social workers input. Typical comments included from parents:

‘It was good’
‘I knew what she was going to say’
‘What she said was right’

Others had a mixed view and expressed some misgivings about the role of the social worker.

‘Some of it was right, some of it was wrong’
‘Some of it was not true’
‘They didn’t know all the history’
‘They don’t know all the risks but we do’

These responses are unsurprising as the role of the social worker was to report concerns, and sometimes to present the concerns of other agencies. No parent was in total disagreement with social worker, although a minority question the accuracy of the social work response. Parents were then asked:

Q6. Did the Family Group Conference Co-ordinator help you focus on the issues that were important to the child/ren?

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Most parents appreciated the role of the Conference was to focus on the child or children. Some reported that the preparation for the Conference had helped them focus on the child:

‘We tried to put (the child’s) welfare first’

‘We were told that it was all about (the child) and that we should leave our baggage at the door’

In a similar vein one mother stated about her former partner:

‘We didn’t get on until today – planning for the meeting has helped us’

One mother had adopted the language of the professional:

‘It is all about the best interests of the child’

This stage of the Conference seems to have gone well from the perspective of the parent. They are able to listen to and appreciate the role of the social worker even where there are differences of perspective. This process was always ably assisted by the Co-ordinator.

c) Private Family Time

The next stage of the FGC involves the family and friends participating in ‘private’ time, with no professionals being present. The parents were asked:

Q7. Did you find the private family time helpful?

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<th>Helpful</th>
<th>Not very helpful</th>
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and they were also asked:
Q8. Were you given sufficient time to discuss issues and devise a family plan/agreement?

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The majority of parents clearly found this time, arguably the core element of a FGC, helpful with a suitable amount of time being allowed. Comments from the parents included:

‘Yes, I found it really good – we had a good chat and really sorted things’

‘There was enough time – everyone talked and it really helped’

The majority of parents were satisfied with the private time – feeling that it had given them space to share issues within their network:

‘I was able to talk about stuff with my family – and they really helped me’

‘Me and my ex just talked about the kids and what was best for them – for the first time for ages’

‘It was just right – not too long and not too short’

On completion of the private time the Co-ordinator can return to the conference to assist with drawing up a plan. This happened in most cases:

Q9. Did the Family Group Conference Co-ordinator help you to reach a family plan/agreement?

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<th>Yes</th>
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<th>Some help given</th>
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In one case there no real plan produced, due to circumstances beyond the immediate control of the Conference. One father thus reflected:

‘It didn’t produce a plan’

d) Planning / Agreement Stage

Once the private stage is completed all professionals return to the Conference for the planning/agreement stage. The aim of this stage is to explore the plan and professional perspectives on the family plan.

Q.10 Did the Co-ordinator go through the family plan/agreement with your family?

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It is clear that almost all the parents reported that they had gone through the plan with the assistance of the co-ordinator. The only exception was the FGC where, as the parent reported:

‘No agreement was made’

The parents were then asked:
Q.11 If you requested any services/resources from Social Care, did the Social Worker agree to provide it?

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Six parents referred to the provision of resources, four where the parents felt they had agreed to this, and two reported provision of resources being agreed ‘in part’.

All the parents felt that their ‘religious, cultural, linguistic and ethnic background’ had been taken into account:

Q.12 Did the Co-ordinator take into account your family’s religious, cultural, linguistic and ethnic background?

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Parents at 11 of the 12 FGCs were from White British backgrounds. The exception to this was where the child was thought to be from a mixed ethnic background and where the attendees at the FGC were largely from a South Asian family. This Conference had particular features which are discussed later in this report.

14 of the 16 parents seen by the evaluation team report having reached an agreement.

Q.13 Were your family able to reach an agreement at the Family Group Conference?

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The following comments were made:

‘It has gone OK. It should help things get better’

‘I think that people will stick to the plan’

Parents were asked if they were happy overall with the process and the outcomes:

Q.14 Were you happy with the Family Group Conference process and outcomes?

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One parent summarised her satisfaction as follows:

‘I am satisfied with everything that has happened’

Another added:
‘It’s about getting things into the open’

It can be seen that 14 of the 16 parents were very satisfied or satisfied with the overall process or outcomes. The two who were dissatisfied were involved in the Conference that was unable to reach an agreement.

The parents were asked about recommending the FGC process to others:

Q.15 Would you recommend Family Group Conferences to other families?

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13 of the parents reported that they would recommend the process. As one parent said:

‘I would recommend it to anyone’

another replied:

‘It was alright’

Three parents added a rider to their overall recommendation:

‘It depends on circumstances ... yes if it is a help to the family’

Another added:

‘I wish I had known about this before. If I had known about it, it would have helped sort things out. I would have used it.’

One father commented that:

‘The room was too warm!’

**The relatives/friends perspective**

Similar questions were asked to the other attendees at the FGC – usually relatives, with some friends and neighbours also present. These were provided using a survey completed on the spot and sometimes returned by post.

a) Preparation Stage

The following questions were asked to the relatives and are reported without additional comment at this stage.

Q1. Did the Co-ordinator give you / send you a leaflet explaining about Family Group Conferences?

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<th>Yes</th>
<th>No</th>
<th>Unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td>24</td>
<td>3</td>
<td>0</td>
</tr>
</tbody>
</table>
Q2. Did you receive a letter from the Family Group Conference Co-ordinator confirming the date, time and the venue prior to the conference?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td>24</td>
<td>3</td>
<td>1</td>
</tr>
</tbody>
</table>

Q3. Did the Family Group Conference Co-ordinator visit you prior to the conference to explain what would happen?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No (not for want of trying!)</th>
</tr>
</thead>
<tbody>
<tr>
<td>26</td>
<td>3</td>
</tr>
</tbody>
</table>

Please state any additional comments that you may have about the preparation stage:

b) Information Sharing Stage

Q4. Did you find the Social Worker’s contribution at the meeting useful?

<table>
<thead>
<tr>
<th>Very satisfied</th>
<th>Satisfied</th>
<th>Not satisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>13 (only just)</td>
<td>1</td>
</tr>
</tbody>
</table>

Q5. Did the Family Group Conference Co-ordinator help you focus on the issues that were important to the child/ren?

<table>
<thead>
<tr>
<th>Very satisfied</th>
<th>Satisfied</th>
<th>Not satisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

Please state any additional comments that you may have about the information sharing stage:

‘Got to know (mothers) family and the team’

c) Private Family Time

Q6. Did you find the Private Family Time helpful?

<table>
<thead>
<tr>
<th>Very helpful</th>
<th>Helpful</th>
<th>Not very helpful</th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td>6</td>
<td>3</td>
</tr>
</tbody>
</table>

Q7. Were you given sufficient time to discuss issues and devise a family plan/agreement?

<table>
<thead>
<tr>
<th>Sufficient time</th>
<th>Insufficient time</th>
</tr>
</thead>
<tbody>
<tr>
<td>28</td>
<td>1</td>
</tr>
</tbody>
</table>

Q8. Did the Family Group Conference Co-ordinator help you to reach a family plan/agreement?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Some help given</th>
</tr>
</thead>
<tbody>
<tr>
<td>21</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

Please state any additional comments that you may have about the private family time:

‘This was helpful to all of us. We reached a plan and agreement ourselves’
d) Planning / Agreement Stage

Q9. Did the Co-ordinator go through the family plan/agreement with your family?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Count</td>
<td>28</td>
<td>1</td>
</tr>
</tbody>
</table>

Q10. If you requested any services/resources from Social Care, did the Social Worker agree to provide it?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>In part</th>
</tr>
</thead>
<tbody>
<tr>
<td>Count</td>
<td>19</td>
<td>4</td>
<td>6</td>
</tr>
</tbody>
</table>

Q11. Did the Co-ordinator take into account your family’s religious, cultural, linguistic and ethnic background?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>In part</th>
</tr>
</thead>
<tbody>
<tr>
<td>Count</td>
<td>20</td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>

Q12. Were your family able to reach an agreement at the Family Group Conference?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>On some issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Count</td>
<td>25</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

Q13. Were you happy with Family Group Conference process and outcomes?

<table>
<thead>
<tr>
<th>Very satisfied</th>
<th>Satisfied</th>
<th>Not satisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>Count</td>
<td>20</td>
<td>9</td>
</tr>
</tbody>
</table>

Q14. Would you recommend Family Group Conferences to other families?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>It depends</th>
</tr>
</thead>
<tbody>
<tr>
<td>Count</td>
<td>21</td>
<td>1</td>
<td>7</td>
</tr>
</tbody>
</table>

Respondents were asked for any additional comments that you may have about the Plan / Agreement Stage or general comments about the Family Group Conference processes:

‘Lovely people I really hope that this programme works’

‘It all depended on circumstances. Sometimes yes, sometimes, no. It helps to get things into the open’

‘She’s confident and not confident’

‘It is all very informal and easy going’

Two respondents had attended a FGC where it was not possible to produce a Plan due to various logistical problems. There comments were as follows:

‘All reports and assessment need to be available at the time of the FGC’
‘We really feel that the this FGC might have been beneficial if right at the start of the breakdown all parties could have sat down and discussed the problem with input form the professionals who with their knowledge could have pointed out the dire consequences if the issues proceed to court. This could have perhaps saved a lot of heartache and a great saving of taxpayer’s money.’

We can see that overall the relatives and friends were satisfied with the process – there responses are similar to those we have seen from the parents. Where there are negative comments these relate to two conferences which faced particular challenges in producing plans.

**The children’s perspectives**

Six children were interviewed following FGCs that they had been involved in. Children were present at most conferences but many were too young to be asked meaningfully about their responses to the experience. The children who were interviewed were assisted by the evaluators to complete a ‘smiley face’ response sheet, which again had been designed prior to the evaluation commencing. They were also asked for their comments on the experience.

The children’s questions and the responses were as follows:

Did the Coordinator / Family Support Worker help prepare you for the meeting?

<table>
<thead>
<tr>
<th>Happy</th>
<th>Unsure</th>
<th>Sad</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>

One of the children commented:

‘Yes, I knew want it was about, [the Co-ordinator] really helped me know what was going to happen’

Did you feel that you were listened to?

<table>
<thead>
<tr>
<th>Happy</th>
<th>Unsure</th>
<th>Sad</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

As can be seen most of the children felt listened to. One child commented:

‘The grown-ups listened to me’

‘Most of them listened’

Another added:

‘It was weird, they listened sometimes but not all the time’

Did you feel comfortable at the meeting?

<table>
<thead>
<tr>
<th>Happy</th>
<th>Unsure</th>
<th>Sad</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>

The situation was sometimes uncomfortable for the children and young people with the focus being on them and their issues. Despite this most of the children reported feeling comfortable:
‘Yeah, it was alright’

‘I liked the food and the toys!’

Another commented:

‘It was good all of them talking, but it was weird too!’

If not would you have liked more support?

<table>
<thead>
<tr>
<th>Happy</th>
<th>Unsure</th>
<th>Sad</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

One child commented:

‘No, it were alright’

Were you able to tell the rest of the family how you felt or what you wanted?

<table>
<thead>
<tr>
<th>Happy</th>
<th>Unsure</th>
<th>Sad</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>0</td>
<td>2</td>
</tr>
</tbody>
</table>

Most of the children felt that were able to express opinions:

‘I said what I thought, when I was asked’

Another, who had given a more negative response to the ‘smiley face’ stated that:

‘They don’t really listen, or do what you want’

If you had someone to support you at the meeting, were you happy with their support?

<table>
<thead>
<tr>
<th>Happy</th>
<th>Unsure</th>
<th>Sad</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

Some children had been supported by a worker employed in this role by the FGC pilot, later they were supported advocates employed on a sessional basis. The children were generally satisfied with is support:

‘She was nice’

‘She helped me when I got a bit upset’

Would you recommend a FGC to Other children?

<table>
<thead>
<tr>
<th>Happy</th>
<th>Unsure</th>
<th>Sad</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

All the children were positive about the overall approach and all said they would recommend the process to friends in comparable situations:

‘It would depend ... but yeah’

‘I would to my mates, yeah, if they needed it’
‘It would have been good ages ago for me’

It can be seen that the children are positive overall with their experience of the Conference. The evaluation team were present at all the conferences and observed the children at the conference. The participation of children, as one would expect, was variable. Older children tended to be active participants, contributing to the meetings and giving their views. Siblings groups tended to stay together, whilst other chose a ‘favourite’ relative to sit with. One ten year old girl took over the control of the planning/agreement stage, effectively chairing this part of the meeting. Children did tend to be less attentive towards the end of the meeting – some of the lasted over two hours and thus the children found it hard to concentrate.

The Professional perspectives

A self-completion questionnaire was issued to all professionals who had attended FGCs. 20 were completed in total. Respondents were from the following professional roles:

- Social Worker x 9
- Senior Resource Worker
- Family Court Advisor
- Family support worker
- Family support advisor
- Family outreach worker
- Nursery Officer
- Health visitor
- Deputy Children’s Centre Manager
- Family Aide team leader
- Learning mentor
- Advocate

They were employed by the following organisations:

- CYPSC x 11
- CAFCASS
- Early Years Service x 3
- NHS
- Intensive Family Support
- Education Leeds
- Health for All

The survey was divided into two sections – one concerned with the FGC service overall and the second focussed on the specific FGC that they had attended.

Professionals were asked ‘How would you rate the quality of the service provided by the Family Group Conference Service’? Responses were as follows:

<table>
<thead>
<tr>
<th>Excellent</th>
<th>Good</th>
<th>Acceptable</th>
<th>Poor</th>
<th>Very Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>8</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Clearly all the professionals were positive about the FGC service in general. Comments from the professionals about organisation and planning included:

‘A lot of effort and inventive work carried out in preparation’
‘I thought it was very well organised with an appropriate venue, information gathered and work done with family workers and children beforehand’

‘The response to the referral was very quick, I was kept fully informed of progress at all points and felt all actions were considered’

‘Speedy response, good liaison’

‘Well organised’

Some professionals reflected on the family involvement:

‘In my opinion FGC is a fantastic/effective way to provide support to families and ensure the well-being of the children involved’

‘I think it is excellent that all family members are reached and that their opinions sought individually and that they are brought together to share information with the professionals services. They feel engaged and understand the plans that are being actioned and feel that they have an opportunity to contribute’

‘Good venue, excellent chairing of meeting that ensured that everyone has a chance to speak’

In general the professionals commented that:

‘Overall I would rate the quality highly’

‘Flexible, needs led and focused service’

Professionals were then asked: ‘How effective is the Family Group Conference Service at helping families reach their own decisions?’

Responses were as follows:

<table>
<thead>
<tr>
<th>Excellent</th>
<th>Good</th>
<th>Acceptable</th>
<th>Poor</th>
<th>Very Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>10</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Positive comments from professionals on effectiveness were as follows:

‘It was the only time all family members, extended family, including ex-partners had got together to find out about help and resolve difficulties that they could help with. Given plenty of time to talk on their own’

‘This conference was very successful, giving the family chance to come up with solutions. All working together to reach targets’

‘The family had discussed together the problems and solutions so that by the time of the conference they were will able to reach their decision’

‘The family is invited and were able to suggest a plan’

‘The family time and the family formulating a plan for the child’

‘I feel the family was empowered to recognise the risk to the child and need for support/change in situation’
‘I believe that FGCs can be very effective as they offer enough support and structure guidance for families to more confidently reach decisions. However, I’m sure this will vary depending on how families engage and how well they agree/understand plans put in place by social care services’

‘The family involvement and commitment’

‘Good family interaction’

‘Families are encouraged and supported to make decisions and are empowered to do so’

Where the actual Conference was less successful this was reflected in the comments of the professionals:

‘However I do have dilemmas over the parents ability to put together a plan and I felt they might have needed more help to do this’

‘In principle I think the idea works well to empower and enable; however unfortunately in this case the family didn’t engage well and so the outcome was limited’

‘Mum and dad not in attendance therefore not effective in this instance’

Professionals were asked to complete the following sentence, ‘The best aspect of the Family Group Conference Service is..........................’

Involvement, participation and listening in an informal atmosphere was an important theme:

‘Involving everyone, as the problems may seem too much of a commitment for family members on their own, but with different people doing a bit to help, the total of the support is significant’

‘Getting all the family to talk to each other and listen’

‘Informal and non-threatening’

‘Getting people together’

‘Gathering the family together to discuss all areas and agree a plan of action between them’

‘Families feel valued, building positive relations with professionals and helping families why intervention may be needed, coming together to express how they can help each other in an organised setting’

The shift of power and responsibility towards families, using a whole family approach, was another major theme:

‘That it is empowering families to support each other without social care being involved’

‘The shift of power away from the professionals and the increasing awareness of the family of the situation and the consequences’
‘The ownership it allows that families to have resolving problems/formulating plans to address issues/concerns’

‘People being brought together on order to focus on bring their own solution; as opposed to having it imposed on them’

‘To help the family realise that social services are not trying to pry in to their lives but only help them reach a reasonable outcome for the children’

‘The family take responsibility for addressing their own issues’

‘Allows family opportunity to address their own issues – enables professionals to ‘back off’’

‘Looking at the family as a whole when it comes to the care of the child not just the parents capability’

Other comments included:

‘I don’t know but the ground work done by [the co-ordinator] is essential to informing the families about the Conference’

‘A realistic support network has potential to be created and that the responsibility for the child’s well-being is taken on by the family’

‘Families making their own plan and information gathering completed before to ensure all historical issues are kept outside the FGC’

Professionals were asked to complete the following sentence, ‘The aspect of the Family Group Conference Service which could most be improved is.......’ Some respondents felt that there was nothing that needed improving:

‘All went well’

‘I didn’t think anything needs improvement’

‘It seems to work well’

‘I do not think any improvements are necessary’

A series of specific recommendations were made as follows:

‘Maybe more assistance for the running of the conference; for example an assistant to help keep the children either focused or entertained’

‘A social worker who knows the family being in attendance, as team managers only have an overview. Reading the report seemed to come across negatively’

‘To make double sure those who agree to attend, know exactly where the venue is even if it means getting family members with a vehicle to offer a life’

‘Length of time and how the family found it quite upsetting/difficult’

‘More advocates and co-ordinators to reduce the time for the FGC to be completed’
Another comment was that any approach actually:

‘Depends on the family’

The next sequence of questions to professionals asked them to express their opinions on the actual Conference that they had attended.

Professional were asked: ‘How effectively was this conference in helping the family reach an informed, independent decision?’

Responses were as follows:

<table>
<thead>
<tr>
<th>Excellent</th>
<th>Good</th>
<th>Acceptable</th>
<th>Poor</th>
<th>Very Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>5</td>
<td>4</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

As can be seen most professionals were positive about the actual Conference they had been involved in.

Additional comments were as follows, with a positive perspective on the outcomes of the planning process emerging strongly:

‘I believe it was as pre-discussions seemed to be done in a way, that got the family to think about issues and be realistic rather than apply pressure. Families members at the conference are intelligent and literate so I believe the decisions were their and were informed’

‘The family reached a plan covering all the concerns put forward’

‘The family reached the decision quite easily due to the work carried out beforehand’

‘Very impressed that the family worked together to come up with a plan’

‘Talked well together gave time to discuss and make decisions’

Professionals who attend the Conferences previously identified as problematic expressed their concerns about their specific experience:

‘As mentioned due in part to the poor attendance and the fixed views of the hardcore that attended this led to a level of intransigence’

‘Due to main carers non-agreement and consent to the plan the child was removed due to identified child protection concerns’

‘The family found it distressing – some good ideas were formed but not all in agreement’

Professionals were then asked, ‘How effective was the process at engaging people who might not otherwise have been engaged?’ Responses were as follows:

<table>
<thead>
<tr>
<th>Excellent</th>
<th>Good</th>
<th>Acceptable</th>
<th>Poor</th>
<th>Very Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>10</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Again overall views are positive, with no professional utilising the ‘poor’ or ‘very poor’ responses.

Additional comments were as follows:
'It has increased families awareness of events as well as helping the professional involved be more aware of a larger circle of the family'

'There were a number of family members there who haven’t attend previous meetings who have been more involved and stuck to the plan'

'Two sides of the family were able to effectively work together to address the issue in hand'

'All family members gave their opinion and agreed to helping some way'

'It leaves them to make decisions although I thought that the family today were deeply engaged'

'Mum engaged in the initial meeting with [the co-ordinator] even though she didn’t attend the conference'

'Individual visit/meetings with the co-ordinator and family members – evidently are valuable and encourage engagement and member’s confidence'

'Effective ‘house rules’ agreed – group facilitator and all the participants encouraged quiet members to engage. I think it helps individuals to feel valued and empowered. Although it may also make those with less self confidence feel under the spotlight – however an advocate in this case was useful and helpful'

'I met members of the family no seen before'

'Parents did not attend the meeting but their views were put forward'

'Families benefited from being together and having discussion’

In one case the family was identified as being able to engage prior to the Conference:

‘The family already engaged very well’

Professionals were then asked, ‘How would you rate the plan produced by the meeting?’ Responses from the professionals were as follows:

<table>
<thead>
<tr>
<th></th>
<th>Excellent</th>
<th>Good</th>
<th>Acceptable</th>
<th>Poor</th>
<th>Very Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>5</td>
<td>9</td>
<td>4</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Again we can see that the professionals were positive to varying degrees about the plans produced:

Their comments included:

‘I thought it was very thorough and well thought through and as far as I am aware (the plan) is being put into place’

‘Very good, if the family goes ahead with what was set’

‘The plan meets all the needs of the child and his mother’
‘I say acceptable as maybe I was expecting a more detailed plan. The plan was a good plan and was clear to those making it. They had a simple plan which made sense to them’

Again some reservations were expressed:

‘Due to the previously mentioned poor attendance and engagement, as well as the fixed ideas and inflexible attitudes with little opportunity to debate these, the plan was not very innovative’

‘The service user would need much help to implement the plan’

‘I did feel that the family were putting a lot on the parents when it was more about what support the family could offer’

Professionals were then asked, what would you suggest that would have most improved the Family Group Conference in this case? Five explicitly stated that there was no improvement required, typically responding:

‘Nothing – I felt it was a success’

Other comments were as follows:

‘Beyond the control of the workers, just better engagement of the family to help promote dialogue’

‘Attendance of social worker, or a less negative report, as some of these things were accusations that had not been checked out. I realise ‘problems’ need to be raised, just felt tone a little too negative/unfair’

‘Just clarity about who would be there – which family members and process’

‘Telling families ground rules at these meetings’

‘Having mum present she would have seen that the families do not wish to replace her ... just support the children’

‘More sharing of information about the family concerns and circumstances’

‘The outcome was successful but it would have been beneficial to have the parents present’

Professionals were then asked, if there was anything else that you would like to add about the Family Group Conference Service or about families in general. These responses are overwhelmingly positive and supported the development and sustainability of the service. Responses were as follows:

‘Despite the unsuccessful outcome in general with my particular case I still feel that the idea of FGC is sound and useful’

‘I like the empowerment and enabling nature of it and the reversal of significance of professionals. I also noted that the child himself really enjoyed being there, being the centre of events and he pointed out his name on the board’
'I like the fact that it’s done at the time to maximise family attendance – what it’s about rather than worker attendance’

‘Also I find it useful that they are independently evaluated as newly in place’

‘Think it’s good informal way to go about the family taking responsibility for the decisions about it younger members’

‘Although it is a fair and very reasonable idea to have children in attendance I feel it would be better if the children weren’t allowed to roam free in play mode as I found it hard to hear all the discussion’

‘I feel that it is a very good idea and after attending my first conference, I can see how it works well and gets families talking together’

‘I would be happy to refer other families that I work with to this service as I have found that it worked well’

‘Family participation was really productive – very empowering process’

‘It was the first family conference that I had attended and I was very impressed with the way that the family was empowered and came up with an excellent plan with no help from professionals’

‘I feel strongly that FGC is a valuable support service which encourages and empowers families to improve their situation, have regard to the children and make positive changes. I feel the service should be rolled out across Leeds’

‘I feel strongly that the FGC is a valuable tool to support families to understand why social care maybe involved with their family and take a protective role to enable themselves to improve any difficulty they may have’

‘It is a good idea to take this step with families to meet all involved and formally agree support’

‘Very good idea’

‘Excellent service to use to assist families in compiling their own plan. The Co-ordinator made good relationships with families to ensure, good positive outcomes’

**Plans and Outcomes**

Arguably the acid test of the FGC is the plans and their effectiveness in terms of outcomes (see also example case study in Appendix two). Plans were analysed and the plans were judged as being ‘fully met’, ‘partly met’ or ‘not met’, by the evaluator. This judgment was made on completion of the evaluation – this was some nine months after some conferences and two months after others. Ideally a one year follow up of each plan should take place. The table below outlines the number of separate plans designed in each FGC and how they were classified by the evaluator.
<table>
<thead>
<tr>
<th>FGC</th>
<th>Fully met</th>
<th>Partly met</th>
<th>Not met</th>
<th>outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>13</td>
<td>4</td>
<td>1</td>
<td>Removed from CP plan. S17 services continue</td>
</tr>
<tr>
<td>2.</td>
<td>9</td>
<td>1</td>
<td>1</td>
<td>Closed to social care</td>
</tr>
<tr>
<td>3.</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>Kinship care</td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td></td>
<td></td>
<td>no plan produced</td>
</tr>
<tr>
<td>5.</td>
<td>10</td>
<td>1</td>
<td>0</td>
<td>Closed to social care</td>
</tr>
<tr>
<td>6.</td>
<td>7</td>
<td>0</td>
<td>0</td>
<td>Diverted from CP to S17 support</td>
</tr>
<tr>
<td>7.</td>
<td></td>
<td></td>
<td></td>
<td>no plan produced</td>
</tr>
<tr>
<td>8.</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>S.17 continues</td>
</tr>
<tr>
<td>9.</td>
<td>n/a</td>
<td></td>
<td></td>
<td>No plan – ICO current</td>
</tr>
<tr>
<td>10.</td>
<td>4</td>
<td>4</td>
<td>7</td>
<td>ICO- foster care</td>
</tr>
<tr>
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<td>0</td>
<td>0</td>
<td>S.17 continues</td>
</tr>
<tr>
<td>12.</td>
<td>4</td>
<td>4</td>
<td>0</td>
<td>S.17 continues</td>
</tr>
<tr>
<td>TOTAL</td>
<td>61</td>
<td>14</td>
<td>9</td>
<td></td>
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It can be seen here that the majority of plans were actually ‘met’ and smaller numbers ‘partly met’ or ‘unmet’. The number of unmet plans is small and therefore it is not possible to comment in a meaningful way on any emerging patterns. It should be noted that 7 of the 9 ‘unmet’ come from one family, where the worker feels the family is un-cooperative.

Outcomes are complex in a small study such as this. It should be held in mind that outcomes cannot be associated necessarily with the FGC process. Ideally one would require a study that was longitudinal and had a control group. With these reservations held in mind we can see that from ten cases that produced plans in four cases the intervention was lower in terms of the DCSF ‘windscreen’, in two cases intervention was more intrusive, and in three cases the level of intervention remained much the same. Whilst these outcome issues are important in terms of this study it should be noted that the ‘process’ evidence more compelling.

**Discussion**

All the FGCs were directly observed by the evaluation team. In reflecting on lessons emerging from the themes the lessons of these observations have been included in the discussion.

The following themes emerge from the evaluation:

(j) The FGCs require expert preparation and facilitation if they are to work well, a process which the Co-ordinator has carried out to an excellent standard. She has undertaken meticulous preparation visiting all potential participants. This has been an important element of the success of the pilot.
This judgment is validated by all samples of respondents and the direct observation of the evaluation team. The meetings themselves have been well facilitated with all parties being given a chance to participate. The Coordinator has been able to carry out detailed negotiations with potential participants in advance of the FGCs. This has been central to enabling an atmosphere of trust and openness between family members and professionals.

(k) The system seems to be operating effectively overall. The conferences, with the exception of one, have been attended by the most of the relevant parties. Maximising attendance seems to be an essential element of a successful Conference.

(l) Each conference, except two, has been able to draw up a plan with clear, achievable and agreed aims. 61 out of 84 plans were actually delivered. One of the exceptions was where a FGC was three days before care proceedings and this made the situation complex and another where child protection concerns were dominant. The other was where attendance was poor due to logistical problems. However, it should be re-called that considerable background work takes place even where a plan is not produced. This process gives a voice to parties and may well have a positive, empowering impact, even where an actual plan is not produced, or indeed when a conference does not even take place.

(m) Participation levels at the FGCs have been high. Usually all parties have been able to make active contributions during the meeting. This seems to be dependent on:

- effective preparation
- an enabling and supportive atmosphere at the Conferences
- a facilitative chairing style

All these three factors have been present at the Conferences.

(n) Older children have been able to contribute, including one incident where a 10 year old led the feedback following the private time. The concern that children might be embarrassed of over-powered by the situation, does not seem to be evidenced by the children's responses or by the direct observations. On the few occasions where children were upset support was forthcoming from relatives or staff.

(o) It is noteworthy that in almost all cases very articulate and helpful aunts and uncles (siblings of mothers and fathers) have emerged as key carers, able to provide concrete assistance to struggling parents. Grandparents have also played a key role. Even where the parent(s) are struggling with substance abuse and/or mental health issues, in many of the Conferences strong and capable relatives emerged.

(p) All FGCs, except one, have involved White British families. The one exception involved a White British mother and a putative South Asian father. At this meeting a large extended family emerged as potential carers for a baby. The social worker wanted one named, identified carer which the family were resistant to: they saw caring as a collective enterprise. They also rejected ‘private’ time at the F.G.C. feeling there was no need for this, as they were willing to share all in a public arena. The learning from this case should not be over-generalised as this was the only Conference where an ethnic minority family participated.
(q) Review meetings have been utilised to review the plans and check implementation and progress. These too have worked well, with feedback being similar to that for the initial conferences. The small sample of children interviewed about this, found them marginally more difficult. Perhaps the novelty of the initial meeting had worn off by then.

(r) The social workers are pivotal to the FGCs in sharing their assessments to the families. Most social workers have presented this to a high standard, presenting a balanced view of the strengths and challenges facing the family. A minority read out a pre-prepared report and in these situations tended to emphasis the negatives in the situation. This then tended to create a difficult atmosphere, certainly at the initial stage of the conference. An additional issue arose when a social worker felt unable to attend a Conference arranged fro a Saturday. A manager attended in their place, but was inevitably not as familiar with the detail of the case as the social worker would have been. This obviously raises complex issues around conditions of employment and deployment of human resources. In terms of the family focus of the FGC process it is desirable that the service is able to meet the needs of the family as flexibly and as responsively as possible. Guidance and training is required for social workers, and related professionals, as FGCs are developed and become more extensive.

(s) It is important to note that FGCs exist at an interface with other processes – most notably care proceedings, child protection processes and private law processes. This issue is worthy of further consideration – certainly the two FGCs that were problematic, in terms of no plan being produced, had an interface with other interventions. It is recommended that this issue be considered by a small, inter-agency working party.

This has been a small scale study but it has involved an in-depth study of the operation of the FGC pilot. There is powerful evidence of the success of the FGC process. All parties provide positive feedback on the FGC process, with some reservations expressed as reported above. Thus it can be argued that even where no plan is produced the process remains positive and empowering, giving a voice to all parties. This is the important process issue recognised by the Public Law Outline. The outcome evidence is also positive, but would require a more rigorous and extensive study.
Bibliography

Crampton, D. Family group decision-making: a promising practice in need of more programme theory and research Child and Family Social work, 12 pp 202-09
APPENDIX ONE

Steering group membership

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APPENDIX TWO

Case Study produced by Co-ordinator

1. K and R

Reason for referral from Social Care

K, aged 10 and R, aged 8 were made subject to a child protection plan under the category of emotional harm whilst living with their mother. They moved to live with their father who has a mild learning disability. There were concerns about dad’s ability to manage the children’s behaviour and set routines and boundaries and keep them safe from harm. Concerns were also expressed about the condition of the family home. R displays aggressive and challenging behaviour and K is sometimes emotionally upset. Dad and the children have a close and loving relationship. FGC was requested to see if family could offer support to dad as Social Care were concerned that the situation was worsening for the children and they might need to be placed elsewhere.

Questions for the Family Group Conference

How can the family support J with:

a) the daily care of the children
b) ensuring the children’s safety
c) the implementation of routines and boundaries
d) improving K’s emotional well being
e) management of J’s finances and housing situation

Outcome

FGC was held and attended by 5 family members, plus the children – dad, granddad, aunt and two uncles. The family came up with a plan to support dad in caring for K and R and also to help to improve the children’s emotional health. For example, aunt agreed to have K overnight once a month to give her time in a female environment, uncle agreed to take both children out once a month to give dad a break, uncle agreed to help the children with homework once a week, granddad agreed to help dad to budget and sort out his financial issues, aunt agreed to help dad get into a routine with cleaning. All family members agreed to support dad with the children’s behaviour after agreeing on the advice they would give.

K and R enjoyed the fact that the FGC was about them and that their family had come along to help.

A review took place 6 weeks later at which point Social Care asked the family to come up with a plan to provide care for the children as it was felt that dad was not meeting their needs. However, it was clear that the children were benefiting from the increased contact with their family and that improvements had been made in the situation. The family disagreed with Social Care’s view that they needed to care for the children. It was agreed that the plan would continue with additions made to reflect new issues.
A further review took place and the situation had continued to improve to the point where the social worker intended to recommend that they were no longer subject to child protection plans at the next review.