

# Specialist foster care placement project

**Evaluation report** 

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# **Executive summary**

Credo Care, a fostering agency, led a second round project as part of the Department for Education's Children's Social Care Innovation Programme. It aimed to achieve stepdown from residential care into specialist foster care for disabled children in England aged up to 15 years old. The project began in August 2017 and involved Credo Care working collaboratively with 2 local authorities, Hertfordshire County Council and Staffordshire County Council. Coram was appointed by the Department for Education as the evaluator for this project.

Due to the slow progress of the project, the decision was taken to end funding for the project in September 2018. Few children had been identified for step-down and progress in recruiting and approving specialist foster carers was slow. As such, step-down from residential to foster care of disabled children was not fully tested, and we cannot conclude on its effectiveness as a model. Instead, this report draws out the lessons from the project, based on interviews with staff from the local authorities and a chronology of local authority engagement.

# **Summary of findings**

#### Assumptions underlying the model

The initial estimate of the number of children eligible for step-down was a theoretical maximum, based on a count of all disabled children in residential care. It had not been refined by a review of the individual ages or circumstances of each child.

Local authority staff suggested that the majority of disabled children in residential care had been there for a number of years, can be difficult to manage, and have a range of complex needs other than their disability. Such children could be cared for by sufficiently experienced foster carers. However, it was suggested that newly-approved foster carers may not be the best match for children with such complex needs. Instead 1 of the local authorities believed that more suitable cohorts for newly-approved foster carers would be children who are diverted from residential, and 'newly entered into residential'. The view was, in hindsight, that a model of step-down based on newly-approved foster carers was unlikely to work.

#### Challenges with implementation

Credo Care's primary message to local authorities was promoting the concept of specialist foster care as a viable alternative to residential care. This would have been important if working in local authorities that did not already take a 'foster first' approach. However, local authority staff felt that they were already committed to foster care and therefore presentations 'selling' the model to staff were unhelpful.

The local authorities and Credo Care also differed on the reasons why children could not be stepped-down. Local authorities felt that when they raised reasons why a child was unsuitable, this was interpreted by Credo Care as a lack of buy-in to the key concept. The development of a set of agreed inclusion and exclusion criteria would perhaps have helped to bridge this gap.

The slow rate of recruiting foster carers was a critical barrier to the project's success. By January 2019, 8 foster carers had been approved compared to the aim of 54. The local authorities advised that there were children who could have been stepped-down if carers had been successfully recruited for them. It was suggested that the Credo Care model of recruitment may have benefited from some local adaptation to a less online-literate population.

In 1 of the local authorities the lead staff manager for the project did not have line management responsibility for the teams charged with implementing the project. This indirect relationship did not help to prioritise the project among staff or resolve issues quickly.

In addition there were some delays in recruiting to Credo Care's project posts, but this was not seen as a major problem in achieving the project's goals.

#### Promoters and barriers to the success of the project

The key promoters of and barriers to the project's success are summarised below.

#### Key promoters:

- Local authorities' desire to save costs
- Buy-in to the project concept in local authorities
- Good reputation of Credo Care in both local authorities
- Successful delivery of training of local authority staff by Credo Care

#### Key barriers:

- Volume and pace of recruitment of specialist foster carers
- Parent resistance to fostering
- Few children assessed as suitable for step-down by local authority social workers
- Quality of communication with local authority teams
- Indirect link between Credo Care and local authority teams

#### Lessons learned

- 1) **Use evidence to estimate the number of inputs**: application processes for programmes such as the Children's Social Care Innovation Programme should include a requirement to use evidence when estimating the number of children and young people who might benefit from a project.
- 2) Develop shared criteria for identifying children: Credo Care believed that the bulk of children in residential care could be successful stepped-down. However the local authority teams were of the view that this was only viable for a small minority. The development of a set of shared criteria could help resolve such differences in perspective.
- 3) Be realistic about what level of project activity is achievable: the volume of foster care recruitment planned for the timescale of the project was ambitious. Examples of similar volumes being achieved in the timescale would have created greater confidence in the project.
- 4) Adapt the approach to local conditions: social worker engagement and the approach to recruitment of foster carers were insufficiently tailored to local circumstances. Proposals that involve applying a model (that has been successful elsewhere) should identify how they will test whether key elements need to be adapted to local conditions.
- 5) **Manage risks as they materialise**: some of the main challenges to the project were identified previously as risks in the application. Although Credo Care was diligent in monitoring progress and identifying problems as they arose, the mitigation strategies were either not implemented or not effective in overcoming these.

#### Introduction

# **Background**

Credo Care is an independent fostering provider that works with local authorities across England, specialising in the care of children with disabilities, learning difficulties and complex medical needs. Credo Care led a project as part of the second round of the Department for Education's Children's Social Care Innovation Programme to achieve step-down from residential care into specialist foster care for disabled children aged up to 15 years old.

This was grounded on the assumptions that:

- the needs of many such children can be met in specialist foster placements
- most disabled children do better in a family environment than a residential placement
- foster placements are less costly for commissioners than residential placements.

The project began in August 2017 and involved Credo Care working collaboratively with Hertfordshire County Council and Staffordshire County Council. At the time they applied the partner authorities had identified 79 children and young people who might benefit from the project. At the start of the project it was envisaged that the project would identify 30 to 35 beneficiary children by the end of September 2018.

By August 2018, 4 foster carers were in training and the estimate of eligible children had fallen steadily to fewer than 10. In view of the slow progress, the decision was taken in September 2018 to end funding for the project. This was done on the condition that the project was evaluated to see what lessons could be learned and to ensure that learning fed into the Department for Education's work on Special Educational Needs and Disabilities (SEND), for example around the implementation of the SEND reforms in the Children and Families Act.

# **Evaluation questions**

The aim of the evaluation was to understand why progress stalled, and if it was primarily due to design or implementation issues, and if these issues were generic or unique to particular local authorities. The key barriers to the project's delivery were also explored.

The evaluation sought to understand:

- Where did the initial estimates of eligible children come from, and why were they revised?
- What diverted the project from its planned trajectory, why did this happen, and what were the key setbacks?

- Was strategic engagement at the right level and department in terms of authority and responsibility?
- Who or what structures were the key gatekeepers? How were these engaged?
  Could their importance have been identified earlier?
- Were any engagement processes not as successful as would have been hoped?
- What was the role of professional judgement in determining which children to consider as suitable for the project?
- Do the professionals involved believe that there is a cohort of children for whom step-down would be the right choice?

#### **Methods**

The following methods and activities were undertaken as part of this evaluation.

#### a) Local authority engagement

A chronology of contact and decisions for each of the 2 sites was created. This identified the structures navigated and the key actors and their roles. We focused on what happened (rather than what could have happened), and what lessons can be taken from this project

The data was collected from Credo Care meeting minutes and other documents of relevance to the project, such as presentations to the local authorities.

#### b) Local authority staff perspective

We interviewed lead local authority staff to understand the basis of the decision not to put children forward and explored whether the reasons were context-specific or related to the specific care needs of the children. We also focused on whether diversion from residential care was seen as a realistic option for similar children.

**Table 1 Number of interviews** 

Organisation	Number of interviews	Notes
Credo Care	1	Group interview
Staffordshire County Council	4	
Hertfordshire County Council	2	One of these interviews was conducted at the start of the project

Source: Coram

# Readiness for change at the local authorities

# Early interest in the project

At the application stage Credo Care approached the local authorities to ask if they would be interested in partnering with them in the specialist foster care project. Both local authorities had pre-existing relationships with Credo Care which encouraged them to join the project.

Hertfordshire were keen to be involved in the project as they felt it fitted with their 'family first' model to care planning. Family settings were the preferred choice for the majority of children. However, in some cases parents of children with disabilities preferred residential care rather than foster placements for their children. Hertfordshire also wanted to place more children locally, as some Hertfordshire children were placed a distance away from their families in residential special schools. They had previously needed to place some of their children outside of the area due to a lack of educational placements available locally. The desire to reduce placement costs (ensuring value for money) and a positive existing partnership with Credo Care were other factors explaining their decision to apply.

Similarly, Staffordshire also got involved in the project because they believed that family settings provide better outcomes for children and are more cost-effective than residential care. Staffordshire said that they had struggled previously with generating foster placements and matching disabled children. They did not have foster carers for disabled children and their fostering team did not have the expertise to recruit specialist disability foster carers, whereas Credo Care did. The local authority was interested in step-down from residential care for all looked-after children, not just for disabled children

At project inception the local authority believed that the children in residential care were in the right placement. However, it was said that the project offered an opportunity for a small number of local authority staff to think differently about placements for this group of children.

# **Commitment to the project**

At both local authorities, commitment to the project was not limited to the senior staff. There was already a belief in the value of foster care from staff at the operational level, including team managers and social workers. In Staffordshire this project fitted with their existing approach, which was to consider fostering before residential when planning care.

"100% the project is a great fit". (Local authority staff member.)

Some resistance from social workers and team members at both local authorities was noted, but this was mostly over which children were suitable for step-down, rather than

disagreement with the model itself. Credo Care felt that not all local authority staff supported the project; however this was limited to individuals rather than the local authority as a whole.

Despite both local authorities being enthusiastic at the initial stages in the project, once the project got underway and profiles of the child cohort were requested, progress began to slow.

# Concerns about the project

From the beginning some local authority staff had concerns with aspects of the stepdown project.

At 1 of the local authorities there was some unease from social workers about putting a child forward for the project before the results and outcomes had been proven. Anticipation of a negative response from parents was also mentioned. The local authorities recognised that they needed to work closely with parents to try to reassure them about the possibility of step-down for their child.

# Structures navigated in each local authority

#### Hertfordshire

In Hertfordshire, responsibility for the project lay with the Senior Commissioning Manager. This manager oversaw the application process and the initial estimates of Hertfordshire's child cohort.

The initial manager left the local authority in May 2018, and overall responsibility for the project transferred to their replacement. While the change in manager was unforeseeable, this perhaps contributed to the lack of momentum during the handover period.

They were the main point of contact for Credo Care and local authority staff involved in the project. When there were disagreements between the social workers and Credo Care about which children were suitable for step-down, the manager adopted a mediating role.

The manager post was located in the Children Looked After and Safeguarding team. The team managers and social workers were in the children with disabilities team, which meant that the manager did not have direct line management responsibility for the team. This meant that work relied on goodwill. The slow speed of decision making and response times were also said to be challenging in a large local authority.

Table 2 Key staff at Hertfordshire County Council

Role
Senior Commissioning Manager, Children Looked After and Safeguarding team
Team manager (Children with disabilities) and other team managers
Social workers
Head of Adoption and Fostering
Head of Service (0-25 children with disabilities team)
Operations Director, Specialist Services
Service Manager, Looked After Children Team

Source: Hertfordshire County Council

# **Staffordshire**

The project at Staffordshire was led primarily by the County Manager in the Children's Disability Service, and the Business Relations Manager was also involved.

The County Manager in the project got involved after the application stage, which was supported by the Children's Services team (the Disability Service was not part of this service at that time). The County Manager was the main link between the project managers and the social work team.

The Business Relations Manager was involved at the application stage and continued to be involved throughout the project. The Business Relations Manager was not as closely connected to the social work teams as the County Manager.

#### **Table 3 Key staff at Staffordshire County Council**

Role
Director of Children
County Manager, Children's Disability Service
Business Relations Manager
Team managers
Social workers

Source: Staffordshire County Council

Credo Care had most contact with the Business Relations Manager and County Manager; these were the key staff that attended meetings and were responsible for communicating the project to the team managers and social workers.

# Timeline of contact between Credo Care and the local authorities

There were a number of face-to-face contacts between Credo Care and the local authorities, steering group meetings, and training sessions (table 4).

The dates provided are indicative; they are either the date of the meeting or date of the minutes in which the event was reported. This is not a definitive list of contact between Credo Care. It is very likely that other meetings took place and were not recorded, in addition to phone calls and email contact.

Meetings between Credo Care and the local authorities took place fairly frequently at the start of the project (table 4). Presentations by Credo Care to the local authority social workers took place in February 2018; these were the key presentations aimed at securing support and explaining the project to them. Social workers also took part in a workshop arranged for September 2018, but shortly afterwards the project funding ceased. We are unaware of further meetings between Credo Care and local authority social workers as a group, although individual meetings between Credo Care and local authority social workers have been noted elsewhere.

Credo Care did attend some of the local authority team meetings; however the feedback was that this did not yield many benefits.

Table 4 Timeline of key contacts between Credo Care and the local authorities

Date	Local authority	Event	
08/02/2018	Staffordshire	Meeting with a social worker	
14/02/2018	Hertfordshire	Meeting with the Special Educational Needs team	
16/02/2018	Hertfordshire	Credo Care presentation to the Child Looked After	
		Team's Social Workers and Team Manager in	
		Hertfordshire	
27/02/2018	Staffordshire	Credo Care presentation to a Social Work Team	
27/02/2018	Staffordshire	Staffordshire team meeting	
06/03/2018	Staffordshire	Meeting with Independent Reviewing Officer	
12/03/2018	Hertfordshire	Hertfordshire team meeting	
13/03/2018	Hertfordshire	Council for Disabled Children Young	
		Commissioners Group	
15/03/2018	Staffordshire	Council for Disabled Children Young	
		Commissioners Group	
19/03/2018	Staffordshire	Meeting with project leads	
20/03/2018	Staffordshire	Staffordshire team meeting	
21/03/2018	Hertfordshire	Meeting with team manager	

19/04/2018	Hertfordshire	Workshop by the Council for Disabled Children: "Understanding Parents Perspective" for council social workers	
20/04/2018	Staffordshire	Council for Disabled Children Workshop "Understanding Parents Perspective" for council social workers	
24/04/2018	Hertfordshire	Continuing Professional Development Accredited Autism Training	
25/04/2018	Hertfordshire	Safeguarding conference for the 0-25 Together Service	
02/05/2018	Staffordshire	Continuing Professional Development Accredited Autism Training	
22/05/2018	Staffordshire	Funding Independent Placements Overview Panel (IPOP) panel	
06/06/2018	Hertfordshire	Council for Disabled Children Young People Engagement Training - for staff	
07/06/2018	Staffordshire	Council for Disabled Children Young People Engagement Training - for staff	
21/06/2018	Both local authorities	Council for Disabled Children Parents Perspective Workshop	
23/06/2018	Staffordshire	Council for Disabled Children Young People Engagement Training - for young people	
25/06/2018	Hertfordshire	Council for Disabled Children Young People Engagement Training - for young people	
10/07/2018	Hertfordshire	Continuing Professional Development accredited Autism Training (re-run)	
10/07/2018	Hertfordshire	Meeting with Senior Commissioning Manager and Team Manager	
17/07/2018	Hertfordshire	Team meeting	
18/07/2018	Hertfordshire	Meeting with Head of Adoption and Fostering	
18/07/2018	Staffordshire	Continuing Professional Development accredited Autism Training (re-run)	
29/08/2018	Hertfordshire	Team meeting	
10/09/2018	Both local authorities	Social workers workshop	
01/11/2018	Hertfordshire	Council for Disabled Children Young People Engagement session	
02/11/2018	Staffordshire	Council for Disabled Children Young People Engagement session	

Source: Staffordshire and Hertfordshire County Councils

Feedback from local authority staff was that a lot of the early meetings were spent by Credo Care on promoting the project to staff and parents. The local authority suggested that their staff did not need to be sold an idea that they already supported; they needed

to talk about the practicalities. It was felt with hindsight that this time could have been spent better by focusing on the recruitment of foster carers, as this was something both local authorities struggled with and Credo Care had expertise in.

Credo Care did not meet the Head of Adoption and Fostering in Hertfordshire until the summer of 2018. Credo Care said it would have been beneficial to have met the Director of Children (Staffordshire) and the Head of Service (Hertfordshire) earlier in the project, as this could have helped secure senior management buy-in. It was felt that there was not always a clear directive from senior management, which gave social workers the opportunity to push back.

#### Child cohort numbers

In their applications, Hertfordshire and Staffordshire identified a total of 79 children who might benefit from this project. These initial estimates then fell to 54 at the start of the project (33 in Hertfordshire, 21 in Staffordshire).

The initial numbers were the total number of children with disabilities in residential care at both local authorities, though the applications did not clarify this. The data was said to have come from senior managers or data managers at the local authorities. At the application stage, no consultations with team managers or the children's social workers had taken place to confirm eligibility. This could perhaps be attributed to the short time frame to submit the project application.

The target was to place 40% of the identified cohort in specialist foster care. Insufficient numbers of children being referred to the project was identified as a risk in the proposal. The mitigation for this was the option of other approaching other local authorities.

After the initial estimates, Credo Care and Hertfordshire were in contact about the numbers and profiles of children from 12 March 2018 but did not confirm numbers and profiles until 9 May 2018. Credo Care and Staffordshire were in touch from 18 April 2018 and confirmed numbers and profiles on 22 May 2018. The proposal had originally planned to define the cohort of children in November 2016 (after speaking with social workers and parents) and confirm the children prioritised for placement by April 2017.

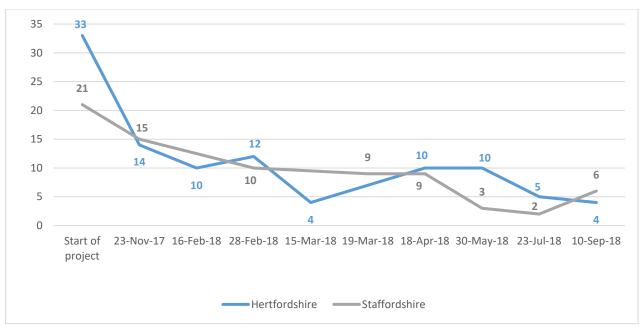


Figure 1 Number of children eligible for step-down over time (August 2017 to September 2018)

Source: Credo Care meeting minutes and project proposals

The number of children for both local authorities dropped sharply after the start of the project (figure 1). In Hertfordshire the number halved. The number of children continued

to decrease in Staffordshire until September 2018 when it slightly increased, and in Hertfordshire the number of children had peaks and dips. The final number of children by September 2018, when the project ended, was much lower than the original estimates, at 10, compared to 54.

#### Reasons for the decrease in child cohort numbers

In both local authorities the numbers of children being considered for step-down dropped once the social workers were consulted. This was expected by Credo Care because the initial numbers were the total numbers of children in residential care. Some of the early reductions were because some children were aged 15 or over and it was felt that this group should be excluded as by the time step-down had been achieved they would soon be leaving care.

Reasons such as the child being settled in their residential placement were common and social workers were reported to have felt it would be disruptive to move the child. For many of these children it had taken a while to arrange a residential placement, and social workers felt the instability of step-down would not be in the child's best interests. Social workers also felt the wider circumstances of the family was important; it was not as simple as the child being eligible for the project, other factors such as the family context needed to be considered.

Credo Care believe that in some cases, social workers took the decision to not to pursue step-down without consulting the child's parents (which is what Credo Care wanted to pursue). Credo Care felt that some social workers had not fully engaged with the project and were not willing to consider step-down for children, explaining why parents were not consulted and the number of cohort children dropped quite quickly at the start of the project (for both local authorities). Although local authorities conceded that step-down might have not been the first choice of all social workers, staff were described as engaged with the project but simply concluded that not all children were suitable once their circumstances were fully considered.

For example, local authority staff noted that when children were placed in residential care following an appeal to an educational tribunal, it would have been difficult to overturn these. In these cases it would have been unlikely that the parents would have cooperated.

There was also resistance from parents or carers who were asked to consider step-down for their child. This was not expected by all staff at the local authorities. It was said that parents or carers were reluctant to move their child, particularly if they had spent a long time trying to get residential care for their child. Many parents or carers perceived their child to be happy and stable in residential care. It was also suggested that some parents

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<sup>&</sup>lt;sup>1</sup> The First Tier Tribunal (Special Educational Needs and Disability) can hear appeals about Statements of Special Educational Needs, Education Health and Care Plans and Disability Discrimination.

or carers were suspicious of fostering and could not understand why someone would choose this. It was noted, and had been anticipated, that some families did not like the suggestion that someone else could look after their child, when they had sought help because they felt they could not. Local authority staff said it was a sensitive topic and needed to be approached carefully with families. Once a family had indicated they were not willing to consider step-down, social workers were reluctant to push on this.

It was not clear if local authorities communicated the reasons for resistance by parents to Credo Care. Some joint visits by Credo Care and the social worker to parents went ahead, but not many. Credo Care said that they were willing to visit all the families and discuss the project with them to secure buy-in, but in practice this did not happen, either because the family refused when social workers discussed the project with them, or the social workers were not keen and felt the child was unsuitable for step-down.

Credo Care identified problems with how the project was communicated to parents as a key challenge. A letter from Credo Care explaining the project and providing their contact details was passed on from social workers in 1 local authority to parents but this had limited success. This letter was given to all parents of children who were eligible for stepdown, but Credo Care received no responses. Social workers had anticipated that the letter may be badly received by parents, and reported that it had caused some anxiety for parents and complaints.

#### Profiles of the cohort children

Problems with the data provided were reported. The child profile details that Credo Care received on the cohort children were quite basic; the information was taken from the local authority's database and only included details such as age, gender and placement location. It was reportedly difficult to gather this data at the start of the project. Local authorities said that further guidance from Credo Care on what information was required for the profiles would have been helpful, as they were not sure what information needed to be included. If Credo Care had been able to recruit sufficient numbers of foster carers, local authority staff said it would have been helpful to know if they had experience of particular disabilities, as it could have helped in matching them with children.

# Parent engagement

#### **Co-production**

The implementation plan for the project included an element of parent engagement. This was in line with the application, which committed to "offer packages of care, informed by our understanding of local need" and to "co-produce the service design with young people and parents". The parent engagement work also offered the prospect of informing local recruitment and training strategies and creating a community of interest that could sustain the initiative when the project ended.

The Council for Disabled Children (CDC) were included in the project application to support Credo Care with the parental engagement part of this project. The CDC described the planned parental co-production as including:

- Parental co-production
- Development and delivery of 2 focus groups with parents
- Development of a conversation guide to support the engagement and involvement of parents in the care planning process
- Development of 2-day training programme for staff
- Delivery of training programme x 2
- Delivery of a train the trainer session to key staff
- Development of groups of parents to act as 'Experts by Experience' champions.

Co-production was an aspiration that was endorsed by the local authorities. Hertfordshire's agency lead discussed the project with a Parent Carer Involvement Board early on when they submitted the application. These parents were described as being very supportive, could see the benefits and had talked to other parents (but these may not have been the target group).

In both local authorities the parents involved were not those with disabled children in residential care. Instead Credo Care tried to tap into existing reference groups or more general groups of parents of disabled children.

By February 2018 the CDC had completed the work with the parents' reference group on how to approach and reassure other parents for the project. The CDC produced materials for a training module and a simple letter explaining the project when making initial contact with parents. The group consultations also identified questions that parents wanted addressed, and the intention was that the CDC would respond to these on a website and incorporate them into subsequent conversations with parents.

# Access to the parents of children in residential care

Credo Care's ambition was to talk to every parent of a disabled child in residential care aged 15 and under across the 2 local authorities. They believed that, once the benefits had been explained, parents could be persuaded to support the initiative and consider step-down for their child.

Credo Care reported that they were unable approach parents directly in the way that they had hoped. From their perspective, an ideal approach would have been if senior managers had told social workers that Credo Care would attend a joint visit with every parent. Instead the closest they got to this approach was in Staffordshire, where they drafted a letter from the local authority that was sent out to parents. This letter explained the project and gave the address of their website with more information, inviting them to get in touch if interested. There was no response from parents to this.

The perspective of local authority staff was somewhat different. Credo Care wanted to talk to all parents of all children, but it was felt not to be appropriate when relationships were already charged. For 1 child their mother had died 3 years earlier and their father was known to be opposed. Despite their reservations the local authority did approach the father, who declined to meet with Credo Care.

The legal status of the child was important, especially if the local authority did not have a care order. The point was made that if a child was on a section 20 the local authority has no right to insist that a parent talks to someone and has less influence over care arrangements.

In the local authority where all parents received a letter, this caused anxiety and complaints from parents. Staff received criticism from some parents the next time they met.

While Credo Care felt that if they could get in to meet with a family they could change their mind, the local authorities said that they had not seen any examples of this happening.

One local authority said that they were aware that Credo Care felt that local authority staff were putting obstacles in place, but denied that this was the case. The main reason why Credo Care did not have the opportunity to meet parents was said to be because parents and carers refused:

"Parents were either on board or not on board and we didn't have grounds to pursue it if they did not want to speak to Credo". Local authority staff member

The local authority stressed that it focused on the interests of the child rather than just accepting the views of the parent. The example was given of a child where this seemed appropriate despite parental opposition:

"If Credo had found a carer we would have gone to court for a care order to enable us to move the child into foster care from residential care". Local authority staff member

#### Foster carer recruitment

Foster carer recruitment was essential to the success of the project; step-down of children from residential care to long-term fostering was dependent on the specialist foster carers being in place to support them.

#### **Numbers**

The initial aim was to recruit sufficient foster carers to meet the anticipated numbers – around 54 households. By the end of January 2019 (after 17 months of the project) a total of 13 applications had been received with 8 approved as foster carers by this time.

Table 5 Foster carer recruitment numbers, January 2019

Local authority	Aim	Enquiries	Applications	Approved or about to be approved
Hertfordshire	33	118	4	4 (-1)
Staffordshire	21	153	9	4
Total	54	271	13	8

Source: Staffordshire and Hertfordshire County Councils

In Hertfordshire 1 of the 4 approved carers withdrew as they did not agree with the suggestion that they begin with respite placements, before taking on long-term placements. In Staffordshire the number of approved or about to be approved foster carers included 2 couples who were expected to be approved at the very end of January 2019.

Some local authority staff saw the lack of foster carers as the key hold-up.

"The project felt like 6 months of promotion whereas what we really need are more foster carers not more promotion to parents."

Credo Care's view was that the initial response in terms of number of enquires was stronger than usual. However the conversion rate to becoming foster carers is lower, so overall the response was described as pretty typical for Credo Care. Approvals were mostly initially for respite care, which is quite common in Credo Care's experience.

The scale of recruitment was lower than anticipated and all parties were disappointed with this. Credo Care was identified by the local authorities as an agency with a good track record of recruiting specialist foster carers for disabled children. The local authorities had experienced challenge recruiting themselves, to the point where local authority staff suggested that there were a lot of obstacles to recruitment locally and that if Credo Care was unable, then perhaps no-one could.

#### Recruitment approach

Staff in one local authority said that they were surprised by the low level of recruitment and felt that only one major town was targeted. They also noted that recruitment was also very technology based, for example, through online (YouTube) videos aimed at potential foster carers. It was suggested that some of their rural population would have responded better to more old-fashioned methods such as turning up to events in parks. Instead it was suggested that the Credo Care model of recruitment may have benefited from some local adaptation.

Credo Care said that the local authorities were not interested in joint recruitment, other than asking Credo Care to forward details of people they did not proceed with. Credo Care did not do this as they felt that people often come back later when they are ready, such as when a spare room becomes available.

A local authority staff member said that Credo Care seemed to have rejected a lot of people. They suspected that Credo Care's understanding of what a local authority can and cannot do may not be correct. The local authority pointed out that if they believed that someone would be a good foster carer, they would be willing take major steps, including building a room downstairs on their house. However those conversations could not take place. Credo Care said they could not share what they were doing unless they had permission from the enquirer.

Perhaps one of the factors that fuelled this perspective was the fact that Credo's approach to foster care recruitment is one of their core service propositions. It is a commercially sensitive issue that Credo Care needs to protect from imitation. While an understandable source of sensitivity, this seems to be an area that should be capable of resolution to the satisfaction of both parties and to the benefit of children.

Some of the comments about recruitment suggested a possible weakness in the original strategy. It was suggested that in hindsight the project was for too short a time period to allow for recruitment timescales.

Another point made was that while newly-approved foster carers are appropriate for diversion from residential care, they may not be a good match to children who have been in residential care for some time. In that situation it was suggested that the service probably needed carers with some experience to manage the needs of children in step-down. It was suggested that the model was one that would have worked with the residential population of the past but that things had since changed and "we are taking children into care with real social needs not just disability and you need somebody more experienced. There isn't so much of a market for newly qualified disability foster carers these days."

A negative impact of the project in 1 local authority was that, with Credo Care providing the focus on recruiting disability carers, the in-house fostering team became more generic and lost their expertise. However the project was always known to be fixed term,

so the in-house fostering team would have had to renew its expertise in disability in any case. A local authority manager suggested that it might have been better to have invested in the in-house foster team, rather than pursue the project.

# Other aspects of the project

# Timing of the step-down

Local authority managers suggested that that there was a fairly small window in which step-down from residential to fostering was appropriate for children. As noted previously, parents and social workers were reluctant to move a child when they felt the child was settled in their residential placement and this was working well for them. It was said by local authority staff that it would take time to change the mind-set that residential care is only a temporary placement, not a long-term option.

In addition, in cases where the child had gone through the education tribunal process, local authorities appeared to be reluctant to consider step-down. It was reported that the Council for Disabled Children (CDC) felt that while this approach might work for parents, it was not necessarily in the best interests of the child.

Staff in both local authorities said that they absolutely believed in the project and that there is a cohort of children for whom step-down from residential care to specialist foster care is appropriate. Indeed in 1 local authority there was a small group of recent arrivals in residential care (after the project ended) that the local authority would like to step-down to foster care; they only entered residential care because there were no suitable foster carers.

Overall local authorities believed that the appropriateness of step-down depended on the timing in the child's search for stability and on their family context. Local authorities said that for some children who had experienced a turbulent series of placement changes, stepdown would be 'too soon'. For others, long established in residential care and with entrenched behaviours, it was 'too late'.

# Credo Care's approach

Credo Care's aim was to support the local authorities in providing long-term fostering opportunities for their cohort of disabled children as an alternative to residential care. They felt that fostering should also be the first option, with residential care only used in limited circumstances.

"We really wanted to effect some cultural change and get local authorities to adopt a policy of looking at fostering as the first, and sometimes the only, option." Credo Care staff

Local authority staff reported that at times it felt as though Credo Care was "preaching to the converted" about the benefits of long-term fostering for this cohort of children over residential care. However this support was not always obvious to Credo Care, who reported that they had mixed responses from local authority staff.

#### Recruitment of staff

Credo Care advertised for the position of a Clinical Psychologist but received no applications for the post. Credo Care were not sure why they were unable to recruit for this position. They also had difficulty recruiting for a social worker. While a possible source of delay this was not a major issue for the project.

# **Training provided**

The training delivered was deemed successful by both Credo Care and local authority staff. The autism training delivered by Credo Care was said to be excellent by local authority staff, although they were not all sure how it fitted with the project. Training was provided by Credo Care as it was expected that some of the children eligible for stepdown would be diagnosed with autism.

# **Key promoters and barriers**

This project was subject to a range of forces. We have presented these as a force field (figure 2). Each promoter and barrier is assigned a score of 1-4 based on our judgements of its impact on the project, from 1 least impactful, to 4 most impactful.

**Promoters** Barriers 2 2 3 Volume and pace of recruitment of foster LA desire to reduce costs Few children assessed as suitable by LA Buy-in of LAs social workers Score 3.5 Score 3 Stepdown from residential care to Good reputation of long-term foster Parent resistance to fostering Credo Care care Score 2.5 Score 2 Score guide: Quality of Training communication with 4 = high impact LA teams 1 = low impact Score 2 Indirect link to Score 1.5 Total: 9 Total: 13

Figure 2 Key promoters and barriers to step-down from residential care to long-term foster care

Source: Coram analysis

# **Key promoters**

Local authorities' desire to save costs. Foster placements (including long-term fostering) are known to be less expensive for local authorities than residential care. The Narey review of children's social care in England suggested that for mainstream residential care costs were on average £3,000 a week, compared with the £800 cost of a fostering placement.<sup>2</sup> While costs for disabled children will differ, the relative magnitude is likely to be similar.

However 1 local authority manager suggested that while they were looking for a cost reduction, they suspected that, with such complex needs, the cost of foster

<sup>&</sup>lt;sup>2</sup> Narey, M. (2017) Residential Care in England: Report of Sir Martin Narey's independent review of children's residential care. Available at:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/534560/Residential-Care-in-England-Sir-Martin-Narey-July-2016.pdf [Accessed 17th October 2019]

care and associated support may end up being almost the same as residential care.

- Buy-in of local authorities. At the start of the project, in general there was a buy-in and commitment from the local authority staff involved in delivery. This included senior managers, team managers and most social workers. Local authority staff reported that they were on board with the concept of step-down from residential to long-term fostering and could recognise the potential benefits for the local authority and child.
- Good reputation of Credo Care. Both local authorities felt Credo Care had a good reputation in the sector and cited having previously worked with them as a reason for applying for the project.
- Successful delivery of training. The training delivered by the CDC was deemed successful by both Credo Care and local authority staff. The autism training delivered by Credo Care was also said to be excellent by local authority staff.

# **Key barriers**

- Volume and pace of recruitment of foster carers. Recruitment was slow and seen by local authorities as insufficiently tailored to the locality. Understandable commercial sensitivities were allowed to impede effective collaboration that could have resolved these tensions. The lack of supply meant that some opportunities were missed to stepdown children from residential to foster placements.
- Parent resistance to fostering. This was anticipated to a certain extent by local authorities, but the approach taken by social workers and Credo Care did not appear to have worked. The parents who were asked were also not keen to speak with Credo Care and usually refused at that point. The letter for parents written by Credo Care was also ineffective in generating interest. However, we did not interview parents directly and cannot conclude if the step-down model was unacceptable to them.
- Few children were assessed as suitable for step-down by local authority social workers. Reasons for this included timing of the step-down in a child's placement, the child's background and family context, opposition from parents, resistance from social workers, and the child being settled in their residential placement. Social workers were reluctant to allow Credo Care to visit parents and allegedly blocked this in some instances.
- Quality of communication with local authority teams. Communication between Credo Care and the local authority social work teams was reported by both to have been strained at times, with local authorities feeling that the focus on selling the concept was misguided and unnecessary.
- Indirect link to local authority teams. In Hertfordshire the project lead was not directly responsible for the social workers implementing the step-down. In

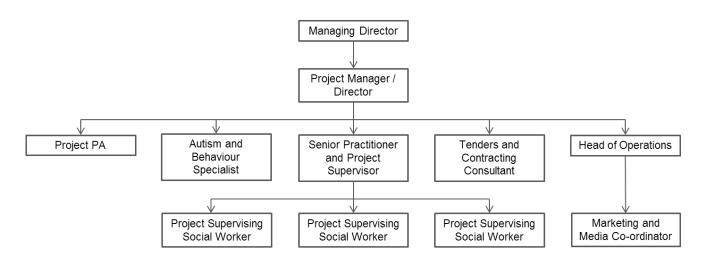
Staffordshire the project was run by the County Manager of the Children's Disability Service and the Business Relations Manager. The County Manager had responsibility for the social work teams.

#### Lessons learned

- Use evidence to estimate the number of inputs: application processes for programmes such as the Children's Social Care Innovation Programme should include guidance on how to estimate the number of children and young people who might benefit from a project.
- 2) Develop shared criteria for identifying children Credo Care believed that the bulk of children in residential care could be successful stepped-down. However the local authority teams were of the view that this was only viable for a small minority. The development of a set of shared criteria was essential for resolving such differences in perspective.
- 3) Be realistic about what level of project activity is achievable: the volume of foster care recruitment planned for the timescale of the project was ambitious. Examples of similar volumes being achieved in the timescale would have created greater confidence in the project.
- 4) Adapt the approach to local conditions: social worker engagement and the approach to recruitment of foster carers were insufficiently tailored to local circumstances. Proposals that involve applying a model (that has been successful elsewhere) should identify how they will test whether key elements need to be adapted to local conditions.
- 5) **Manage risks as they materialise**: some of the main challenges to the project were identified previously as risks in the application. Although Credo Care was diligent in monitoring progress and identifying problems as they arose, the mitigation strategies were either not implemented or not effective in overcoming these.

# **Appendices**

#### Appendix 1 Credo Care organisation structure for project





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