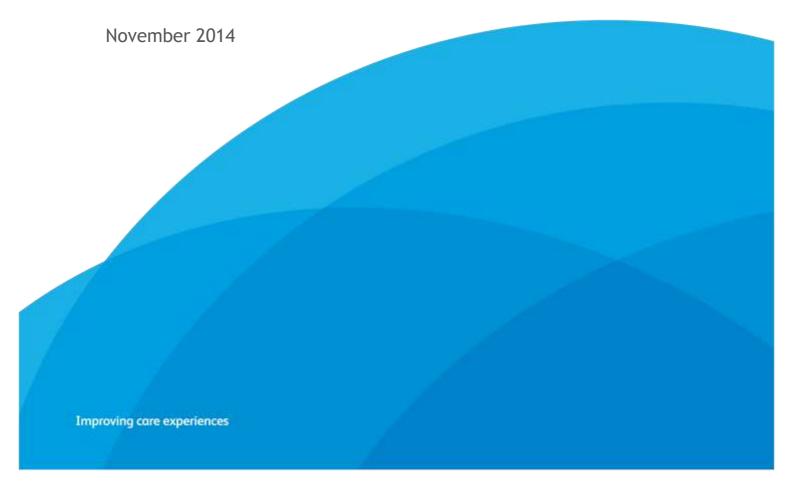




Interim review of activity, outputs, and progress of the Permanence and Care Excellence programme

Summary version

CELCIS



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1 Background

This summary document reviews the progress of the Permanence and Care Excellence (PACE) programme at CELCIS. The review was undertaken using a range of methods which are detailed in the full report, including a questionnaire and interviews with key informants. This summary document is intended to provide a broad overview of the most significant lessons from the review.

The PACE programme represents part of the Scottish Government and CELCIS's response to evidence which suggests that looked after children and young people in Scotland experience lengthy periods of uncertainty and insecurity which impact negatively on their life experiences and outcomes. These drivers are detailed in the full report.

PACE uses the Scottish Government definition of permanence as:

... providing children with a stable, secure, nurturing home and relationship, where possible within a family setting, that continues into adulthood. We recognise that there are a range of different routes to permanence and the most appropriate route to permanence will depend on the needs and the circumstances of the child.

Under the Scottish Government definition, routes to permanence include:

- Returning or remaining at home with or after support, where family functioning has stabilised and the parent(s) can provide a safe, sustainable home which supports the wellbeing of the child this may require ongoing support for the family;
- A Permanence Order, where long-term Corporate Parenting is needed. This can be in kinship care, foster care or residential care;
- A Section 11 Order, which will be a Kinship Care Order from 2015;
- Adoption, where the child has the potential to become a full member of another family.

These routes to permanence are informed by the view that long-term supervision within the Children's Hearings system is not in the best interests of most children.

The Permanence and Care Team (PaCT) uses a working definition of permanence, which conceptualises 'permanence' as providing children with stable, secure, nurturing relationships that continue into adulthood:

Permanence practice includes planning how best to stabilise families before care is needed. Permanence planning aims to support children's reunification with their families following an episode of care. When this is not possible its aim becomes to ensure that children have a secure, stable and loving family (Schofield, Beek, & Ward, 2012). In the UK, adoption and long-term foster care have historically been

the preferred options to permanence when reunification with birth family is not possible (Schofield et al., 2012).

Permanence for looked after children is not, however, simply about the type of placement. It is also, and perhaps more importantly, about the continuity and stability of relationships, the quality of care provided to children and a commitment to offering 'family' membership (Munro & Hardy, 2006; Tilbury & Osmond, 2006). Family being understood here in its broadest term to include any individual, group or institution committed to fostering an enduring relationship with the child; and where there is reciprocity of emotional investment and entitlement. Additionally, good quality care and family membership should be underpinned by legal security.

Both of these definitions underpin the work of the team.

The Permanence and Care Excellence (PACE) programme was established in 2013 and is delivered through a partnership between Scottish Government (PACE Programme Manager and Improvement Advisers) and Permanence Consultants from the PaCT, working with local authorities and their partners. A particular feature of the PACE approach is its remit to understand and work with the 'whole system'. A diagram which portrays a schematic of the 'whole system' of child protection and permanence process is produced in thumbnail format as Appendix 1 of this summary. The complexity of the diagram highlights the challenges of the system, and the different sub-systems and agencies that potentially need to coordinate their work to achieve permanence for children and young people.

1.1 The choice of initial launch sites: Aberdeen City and Renfrewshire

PACE seeks to work in a number of local areas. To date, the team have developed the approach in two demonstration sites (Renfrewshire Council and Aberdeen City Council ¹).

Following preliminary negotiations in each area, the PACE programme established a partnership of local stakeholders. In addition, national stakeholders including the Scottish Children's Reporters Administration (SCRA), Children's Hearings Scotland (CHS) and the Sheriffs and Clerks of the Court, and Social Work Scotland (SWS) were engaged to ensure that they supported the delivery of the programme.

Aberdeen City Council had already requested that PaCT work with them on improving outcomes for looked after children. This included PaCT undertaking a file audit of six

¹ N.B. work in a third local authority area (Aberdeenshire) was commencing at the time of the review and will be covered in future reviews.

children's cases, with a report and recommendations produced towards the end of 2013. The recommended areas for improvement related to multi-agency practice, although not as wide-ranging as PACE seeks to achieve. Work had also begun on collecting data to better understand the path that looked after children take through the system in Aberdeen City Council.

Aberdeen City Council was also embarking on a major strategic change initiative to implement '*Reclaiming Social Work*'^{2.} This was taken as an indicator that the Council has a forward facing attitude and the intention to be innovative in making improvements for all children.

With leadership that was prioritising improvement and senior managers who had a specific remit for looked after children, combined with the history of working with PaCT, Aberdeen City Council was seen as an ideal local authority area in which to introduce the PACE programme.

Renfrewshire Council conducted their own audit of children's cases in 2011/12, which had highlighted what senior management perceived as an unacceptable level of drift and delay in achieving permanence for children and young people. In their efforts to reduce drift and delay, Renfrewshire introduced the Family Assessment and Contact Team (FACT), which is an early assessment team for parents who have previously had a child removed from their care. This team has been used as an example of good practice by CELCIS, and the manager of this team has engaged in a number of events with other local authorities to share practice and their assessment model. Renfrewshire Council was also successful in securing grant funding to commission large-scale survey work to better understand the characteristics and needs of their child population. This work was carried out in conjunction with the Social Research Unit at Dartington and evidences the Council's desire to improve services based on robust information about need. This was regarded as a good fit with the ethos of the PACE programme and its focus on a structured approach to measuring outcomes; the Council was thus considered to have a forward-thinking senior management team, who clearly recognised the importance of improving outcomes for children and young people.

Renfrewshire Council have also been focussed on embedding the Integrated Assessment, and has been successful in securing commitment from all agencies, with education and health now leading on approximately 20% of Integrated Assessments. This was seen as a particular strength for PACE.

² 'Reclaiming Social Work is a programme developed In the London Borough of Hackney aimed at improving services for children and families' (Cross, Hubbard, & Munro, 2010, pt.1 p.1).

As with Aberdeen City Council, Renfrewshire Council had already worked with CELCIS. Together with the factors outlined above, this led to the selection of Renfrewshire Council as the other launch site for PACE.

2 Outline of the PACE process

The main goal of PACE is to improve outcomes for looked after children by reducing avoidable delay in each child's journey to permanence; this is based on a robust assessment process in order to reach the right decision for each child. The PACE approach is designed to recognise and build on local knowledge and strengths by supporting partnerships to apply Improvement Methodology. The Model for Improvement (Langley et al., 2009; see Figure 1) underpinning the PACE approach is based on addressing three key questions, with small tests of change enacted through the PDSA (plan-do-study-act) cycle.

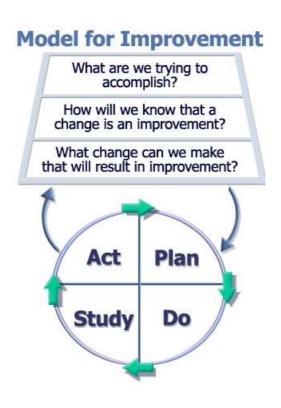


Figure 1: Model for Improvement (Langley et al., 2009)

Box 1: The PDSA process in brief

In each area, the programme begins by identifying aims and constructing one or more driver diagrams to conceptualise how progress towards the aim may be achieved. Following the construction of a driver diagram, detailed local discussions focus on generating ideas about changes which may help to achieve the stated aims. Some of these ideas are selected to be developed further as 'tests of change'. The impact of each change is studied through close monitoring of specially chosen and well defined measures. Relevant partners review these data and consider the success or otherwise of the changes in enabling progress towards the aim. Refinements are made if required and further monitoring conducted. Where a change is found to be useful, it is scaled up to assess its impact across different groups, and in different conditions. Where it is found to be unhelpful it can be abandoned or revised. Decisions to implement a change are only made when the change has been fully tested, and there is evidence to suggest that the change will lead to improvement.

2.1 Applying the Model for Improvement

The Model for Improvement is underpinned by five key principles which have guided the approach to improvement used in the PACE programme; these are described in relation to the development of work in the local areas below.

2.1.1 Principle 1: Understanding why improvement is needed

Draft aims were initially developed by senior managers who attended the two-day stakeholder event in each area. These aims were then amended and refined on the basis of initial data, and emerging knowledge about the local permanence systems. Both areas then developed a theory of change, outlining the factors and activities which they believed would assist them to meet their aims. These theories are captured in the driver diagrams, which have been continuously refined and adjusted in the light of emerging information. One area has developed three driver diagrams and the other has developed two, which reflects the number of aims they are working towards. An example of a driver diagram from each area is provided in Appendix 2.

2.1.2 Principle 2: Using a feedback mechanism to evidence improvement

An important feature of the methodology has been the identification of measures which could be closely monitored across a relatively short space of time in order to indicate whether any change introduced could be considered an improvement. This has required both areas to formulate a 'measurement plan' to gather additional data, which in turn has required extra resourcing and capacity building in each area.

Both areas have developed a tailored set of milestones which are being tracked for each child. It has been found that when this quantitative data is considered alongside other contextual information for each child, it is easier to identify, interpret or anticipate potential sources of delay, and thus target specific areas of the system for further improvement.

2.1.3 Principle 3: Developing a change which will lead to improvement

In each area a number of operational Champions have been identified who contribute to the development of the theory of change, and agree and implement the tests of change. Changes can be an alteration to any procedure or practice which it is felt may result in progress towards the aim. Various tests of change and proposed tests of change have been developed in each area. The rationale for, and progress with, each test of change is summarised in Appendix 3.

2.1.4 Principle 4: Testing a change before implementation

The PDSA cycle (outlined in box 1) has guided the process for testing each change to measure its effectiveness in improving the permanence system and progressing towards the aims in each area. Various meetings have taken place in each area to review the learning from the PDSA cycles, and to develop further change ideas. Where tests have been effective, these have been scaled up to assess their impact in different conditions (e.g. when applied by a different team) or on different groups (e.g. in relation to an older child).

2.1.5 Principle 5: Timescales and approach to implementing the change

The PDSA cycle also informs the approach to, and timescales for, implementing changes. Decisions to implement a change are made after the test has been scaled up, and there is evidence that introducing the change across the system will lead to an improvement. Due to the relatively recent introduction of the PACE programme in each area, there are only a few tests which have been implemented.

Boxes 2 and 3 provide an overview of the process for testing and implementing change ideas in each area.

Box 2 - Reducing the delay caused by continuation of Advice Hearings in Aberdeen City

After engagement through the Champions' meetings, the PACE delivery team had a meeting with the Practice Improvement Reporter and two experienced panel members to look at areas for improving the permanence journey. Scottish Children's Reporter Administration (SCRA) reported that they often had to reconvene Hearings due to parental non-attendance, thus causing delay in sending advice to the Sheriff. The panel members stated that they often felt intimidated by the gravity of the 'decision' they were making at Advice Hearings, and this was not helped by a lack of confidence in decision-making more generally. They expressed the view that parents were often given 'a second chance' to attend Hearings due to what they felt was the finality of the decision.

The social work department were concerned about the delay caused by the continuation of Advice Hearings, especially in light of comments made by a Sheriff at a national event that, in reality, the court places little weight on the Advice Hearing report. Evidence gathered showed that, in the last ten years, no adoption applications had been refused by the court in Aberdeen, with approximately 50 children achieving adoption in spite of any delay caused by the decision of panel members to seek additional information or to reschedule the Hearing due to parental non-attendance. This suggested that this delay was potentially avoidable.

The Reporter looked at the data in relation to this issue and found that approximately 50% of advice hearings were continued due to non-attendance by parents. Although this was a small number of children in real terms, the decision to reschedule the Hearing led to a significant delay in achieving permanence for those children.

Alongside a commitment to discussing the purpose of Advice Hearings during awareness raising sessions with panel members facilitated by CELCIS to convey the message that the panel give advice and do not make a definitive decision about permanence, the panel members and Reporter felt that panel members having confidence that the parents were aware of the hearing would increase the likelihood of the Advice Hearing proceeding, even if the parents did not attend.

The Reporter and panel members decided that three things would help panel members to justify the decision to go ahead in the absence of parents:

1. Parents receive notification of the hearing by recorded delivery. Evidence of recorded delivery is accepted by the Sheriff as proof and the panel felt that this would also go some way towards assuring them that parents were aware of the panel;

- 2. Social Workers would contact the family directly a day or two before the Hearing to remind them of the Hearing and address any difficulties with attendance. They would then report the outcome of this contact to panel members to reassure them that the family were aware of the Hearing and that every effort had been made by social work to support their attendance.
- 3. Where a continuation of the Hearing was justified and unavoidable, the Reporter agreed to rearrange the Hearing within two weeks.

When this test was run, only one Hearing was deferred, and this was in relation to a mother who had contacted SCRA (where it was felt that she might not have otherwise) to advise of a hospital appointment. On the basis of this, the Reporter and Champions felt that this process was valuable and should be implemented to become business as usual.

Box 3 - Early referral to the Reporter in Renfrewshire

The early referral to the Reporter was introduced in recognition that the point at which a referral is made to the Reporter affects the speed of progression to a permanence outcome. Feedback from social work managers and the SCRA Champion revealed that social workers were often opting to work with families on a voluntary basis until compulsory measures were actively being sought. This meant that the child's progress through the Children's Hearing system was operating out of synch with the social work process.

When the automatic referral to the Reporter was first discussed, there was concern among the social work Champions that workers would be opposed to this change in practice due to the culture of adherence to the 'no order' and minimal intervention principles. Further debate among the Champions led to the consensus view that this principle was not relevant to children being assessed for permanence, since removing these children from their families could be regarded as the maximum level of intervention a family experiences. This topic was debated with social workers and it was found that social workers agreed with this argument, and were willing to try this new referral process.

Social workers were therefore asked to automatically refer all children under three years to the Reporter on the date of accommodation, and to notify SCRA in advance of the referral (even at the pre-birth stage), where possible.

Feedback from workers directly involved in the tests has shown that they are very positive about this development:

The early referral is better practice. I might not have said this as an area team worker because it's adding another layer. It says in legislation that we should have minimal intervention but I misinterpreted this as an area team worker. If you're moving someone's baby at birth, and one of the parents has already lost a child, which is our criteria, and you're telling people 'we're making a recommendation in 14 weeks,' then surely there's enough concerns for a referral to the Reporter. Ultimately it's not our decision - it's the panel's decision - but it shouldn't be us saying we'll not refer to the panel. (FACT social worker)

Only one social worker suggested that an automatic referral may not be necessary in every case, but stated that it should be considered for every child:

I also think that early referral to the reporter is good in most cases but I worry we are not always focussed on the no order principle if we do this as a matter of course. Perhaps it should be about early referral to the reporter is discussed and considered but not mandatory." (Area team senior social worker)

The tracking of individual milestones for the initial cohort of children has shown that the early referral has improved the synergy between the social work process and the Children's Hearing system. For another child who was referred to the Reporter at four months (comparative case), compulsory measures were still not in place at 11 months, whilst this was achieved for one of the children who was referred to the Reporter on the date of accommodation (birth) within the 26 week target. Feedback from workers corroborates the finding that an early referral to the Reporter improves permanence timescales:

... what I have noted in a few cases is that social work have already made decisions to pursue adoption for a child and the grounds have not been established yet! The legal process is behind the actual child's care plan. An early referral to the Reporter will hopefully have an impact on this for the better. (Area team senior social worker)

Early referrals are really good because, in my experience, this has really delayed plans for children. I've done an assessment before, and by the time the grounds are established, they're asking for a current assessment. (FACT social worker)

The Children's Services Manager also commented that:

... we've been tracking the timescales closely and I think what we're seeing is that we're seeing getting the legal order in place after early referral is probably taking around about three to four months off of the timescale already.

On the basis of the positive feedback obtained, and evidence of the impact of this

change on improving permanence timescales for children, the Children's Services Manager in Renfrewshire decided to implement this change on a phased basis, starting with all children aged under one year.

An overview of the entire process for embedding the PACE programme in Aberdeen City Council and Renfrewshire Council is provided in Figure 2.

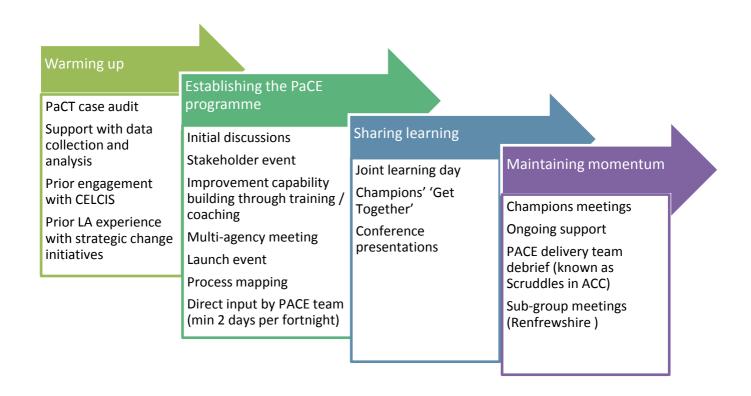


Figure 2: Outline of the PACE process in Aberdeen City and Renfrewshire

3 Enabling progress and addressing barriers

Feedback from stakeholders suggests that they value the PACE programme. Some participants have reported that they initially found the Improvement Methodology difficult to understand or implement, as it required a fundamental shift in their thinking. However, many have also stated that, with the delivery team's help, they have seen benefits and found the approach 'empowering to use.'

Factors which have enabled progress include: having support from senior managers, particularly across multi-agency fora; input from Scottish Government; input from CELCIS; the ability to start small and scale up; increasing understanding of the permanence system; recognition of the importance of achieving timeous permanence for

children and young people; the early availability of relevant data; and openness to change. Barriers to progress have included the need to collect additional data, and difficulty with completing PDSA cycles. A number of participants referred to the way that the PACE delivery team helped to maintain momentum; for example, one participant noted:

...the involvement of the CELCIS PaCT team has kept all partners on track and working to targets and timescales in a way that would not have happened otherwise. (Champion)

As well as maintaining focus, many participants also referred to benefits arising from improved data collection, analysis and use, which resulted from the introduction of PACE. Some participants additionally cited wider benefits arising from involvement in PACE, particularly in relation to reflecting on practice and partnership work:

The input from the facilitators has been outstanding and [the Improvement Advisor's] input in particular has made me re-evaluate all my work. (Champion)

...it has given real insight into the hugely complex task that the social work department has to do to achieve permanency... I believe that the partners' understanding around this has been enormously helped over the last months. It has revealed how important the parts that the partners do and the impact on the system as a whole if these are not done. (Champion, outwith Social Work Department)

An example would be Education where the reps have heard that adopters need upto-date accurate information about a child's developmental progress and if this is not available then it becomes a case of hypothesising and can contribute to mismatching with adopters. I think we cannot underestimate the amount of learning and sharing that has gone on between the members of the group to ensure that it all comes together for a child. (Champion)

3.1 Key achievements

- 1. Development of a programme for improvement of permanence processes which adopts a whole-systems approach and combines programme management with Improvement Methodology. The programme is delivered through a partnership between CELCIS, Scottish Government and key stakeholders in local areas.
- 2. Successful trialling of an approach to engaging a range of partners around an improvement programme.

- 3. Increase in partners' understanding of the roles and responsibilities of different partners in progressing permanence work. This has greatly enhanced Champions' awareness of the input required to improve planning and decision-making for children, and their joint commitment to achieving this.
- 4. Partners better appreciate the value of data to support the accurate identification of sources of drift and delay, and to continue to provide essential information to evidence improvement or highlight areas where efforts to make changes are not improving decision-making and outcomes for children.
- 5. Positive acceptance of the improvement approach, and the use of small tests to learn about the impact of change with minimum risk. Scaling up tests on the basis of learning what works has been regarded as a safer and more effective method of implementing change.

3.2 Lessons learned

3.2.1 Whole systems

The success of the PACE programme to date appears to be rooted in the whole systems approach to change and the co-ordination of change efforts through the meaningful involvement of a number of agencies. Being in a position to effect change across several parts of the system at the same time has brought several advantages; one example is provided by educational psychologists in one area who for the first time have become involved in discussions about how to support children being assessed for permanence before they formally enter the education system. Wider stakeholders from across the whole system have jointly taken responsibility for driving forward change and have been empowered to become involved in improving permanence processes:

... being a participant in the PACE programme has given me 'authority' to highlight the essential needs for educational assessment and/or advice to be considered at the early stages of the adoption/permanency process. (Champion)

... the biggest bang you get is when you think of the system in terms of interdependencies and interconnections. (Delivery team member)

3.2.2 Support for partnership

Partnership working has repeatedly been cited as a key component of the approach needed to achieve the full range of changes in the system necessary to improve permanence. Efforts from the outset to engage all of the partners appear to have been a particular strength of the programme; without the support of the delivery team, achieving this may represent a particular challenge for local areas attempting to introduce improvement to permanence practice:

... but actually the bit that's really powerful about it is the partnership, and the way that I see the PaCT team and the Scottish Government is very much about they're the kind of threads that are holding the rest of the partnership together. (Champion)

3.2.3 Applying a method for improvement

Supporting local areas to understand and apply a method for improvement has been a key benefit, not just in relation to improving permanence systems, but also in being able to apply this approach more widely. Champions commented on the support to apply the Improvement Methodology as being key to successfully addressing drift and delay in permanence cases, and attributed the success of the approach to its premise of starting with small tests of change, and scaling up what appears to be working:

It is timely and initially only in a small way therefore easier to manage. (Champion)

A number of Champions noted that the input of the PACE delivery team in introducing Improvement Methodology and in supporting 'better data collection and analysis' was particularly helpful, with one implying that the approach will be adopted in other areas of work:

The input from the facilitators has been outstanding and [the IA]'s input in particular has made me re-evaluate all my work. (Champion)

Across both areas, the importance of collecting data which tracks individual children through the permanence process has been highlighted. As part of their measurement plan, both areas have committed to collecting new individual-level data, which they appear to regard as the most reliable way to monitor and address drift and delay in securing permanence for children and young people.

3.2.4 Data utilisation

Involvement in PACE has given both areas an opportunity to improve their data collection, analysis and utilisation. Crucially, areas have been supported to use data to track individual children's journey to permanence. This has allowed sources of drift and delay to be accurately identified in the context of the individual circumstances of the child and has allowed close monitoring of the test cycles.

It was found to be critically important to allocate ring-fenced time to relevant workers from each local area in order to develop and implement a measurement plan and to monitor each child's progress in their permanence journey.

3.2.5 Involving the right people in the right way

The format for the initial set-up activities has now been revised in response to the finding that senior managers struggled to provide the operational context for developing the first aim and driver diagrams. A new format for the initial meetings has been proposed, with a shorter stakeholder meeting replacing the initial two-day stakeholder event. Following this, the intention is to deliver a more in-depth session on Improvement Methodology to the operational staff identified as local Champions, who will develop the first draft of the driver diagram and progress the programme of work.

3.2.6 Sensitivity

One of the key lessons learned has been the need for the PACE delivery team to balance their input to support the process with the need to promote local ownership and capacity building. This has required a sensitive approach to encouraging the continued engagement of the Champions to lead the programme. To that end, the PACE delivery team has recognised the importance of supporting local staff to undertake tasks such as updating PDSA's and driver diagrams. Many stakeholders have regularly requested feedback from the delivery team and there is therefore a plan to arrange an end of year celebratory event in both areas, to highlight the considerable progress made.

3.3 Looking forward

At a local level, it is intended that through the promotion of ownership of the PACE programme, cultures will develop which will ensure that improvement approaches become embedded and that monitoring and improvement of permanence processes continue. However, a Quality Improvement approach is not only owned by the local areas; it is recognised that each of the stakeholders plays a key role in responding to the learning emerging from the change cycles. For example, early learning from the local tests has led to meetings between the PACE Programme Manager and the Scottish Legal Aid Board, BAAF, and other agencies and partners who contribute to or influence the permanence system. Findings from the PACE programme which potentially impact national policy, practice or legislation will also be regularly presented to the Children's Hearings Improvement Partnership (CHIP), given that its membership spans the Scottish Government, CHS, SCRA, Social Work Scotland and the Courts. Sharing this learning in order to support national and whole scale systemic change in permanence practice is a vision which is summed up by a member of the delivery team:

... I think we need to get better at hearing different messages in the system. So if we're seeing things happen at the local level and clearly it's to do with (...) I don't know legislation, guidance, policy, strategy, resourcing, whatever, I think we need to get better and cleverer at acknowledging that, listening and being seen to do

something even if it's in the spirit of quality improvement which is you know, actually, we'd like to test something.

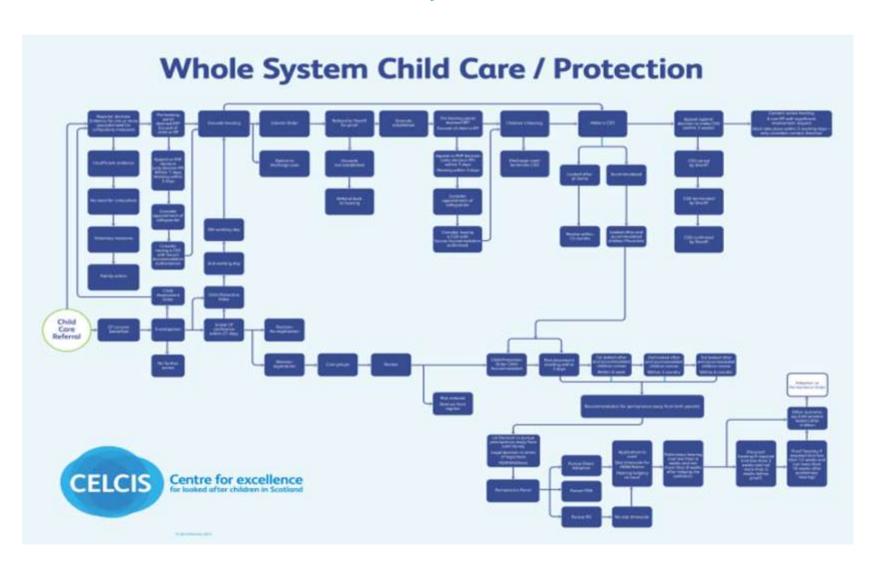
Thus far, PACE has only been delivered in two areas; it is recommended that further reviews are undertaken as PACE is implemented in other local authority areas, where practice, structures, needs and expectations might be different.

4 References

- Harris, R., & Harvey, D. (2014). Interim review of activity, outputs, and progress of the Permanence and Care Excellence (PACE) programme. Glasgow: CELCIS.
- Langley, G., Moen, R., Nolan, K., Nolan, T., Norman, C., & Provost, L. (2009). *The Improvement Guide*. San Francisco: Jossey-Bass.
- Munro, E. R., & Hardy, A. (2006). Placement stability a review of the literature. Report to the DfES. Loughborough: Centre for Child and Family Research.
- Schofield, G., Beek, M., & Ward, E. (2012). Part of the family: Planning for permanence in long-term family foster care. *Children and Youth Services Review*, 34(1), 244-253.
- Tilbury, C., & Osmond, J. (2006). Permanency Planning in Foster Care: A Research Review and Guidelines for Practitioners. *Australian Social Work*, 59(3), 256-280.

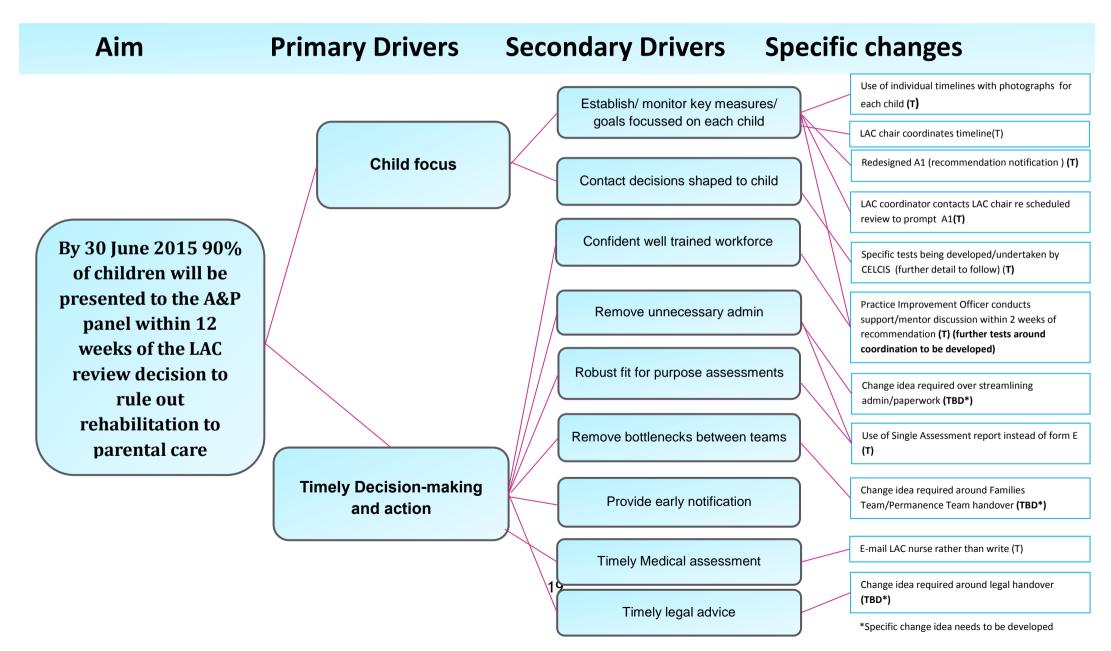
Appendices

Appendix 1: Thumbnail schematic of the 'whole system'



Appendix 2: Example of driver diagrams (Aberdeen City and Renfrewshire)

Aberdeen City



Aim **Primary Drivers Secondary Drivers Specific changes** Pilot the use of templates, case studies and good practice guidance (T) Confident skilled workforce (all Renfrewshire agencies) Peer-to-peer support between social workers to Robust prepare written reports and for appearances at Sheriff Court and Children's Hearings (TBD) assessment Clear evidence based Use of social work champion(s) to monitor recommendations (written & verbal) timescales for individual children and share learning from PACE (T) By 31 Efficient timescales Learning and development events for panel **December** members on communication during hearings and decision/reasons (T) 2015, 95% of Individualised, child focussed, plan Replace the Legal Advice Meeting with written decisions on a **Planning** legal advice (TBD) Early referral child's Use of template for presentation of information in destination will Panel members' reasons/ reports to clearly signpost and evidence the recommendations be made within recommendations for Panel Members (T) 6 months of the Introduction of permanence planning meetings to Early placement identification child being agree plan for achieving timescales (T) accommodated. Focussed LAC review **Decision-making** Early identification of RO (T) Multi-agency commitment to child Refer child to Reporter at birth/day of accommodation (T) Grounds established Continuity of health visitor between birth and foster family (T) Involvement of education and health colleagues in the assessment (T) Reduce timescales for Reporter's decisions (TBD) 20 Presentation of parenting capacity assessments at

LAMs (TBD)

Appendix 3: Rationale for, and progress with, tests of change in Aberdeen City

Rationale	Progress
Introduction of timeline, including a picture of the child The timeline was introduced to provide a focus on key milestones for the child, to track timescales actually achieved and to use a picture to personalise the document, thereby reminding workers of the child behind the process. Since the initial simulated test case, nine children have been involved in the test.	Learning identified that while the timeline provides clarity of timescales for key milestones, and is useful in identifying causes of drift and delay, it alone does not impact on milestones being met. The testing has therefore progressed to the timeline being coordinated by the LAC chair, and two further children have been identified for the next cycle.

Rationale	Progress
Single Assessment Report (SAR) The delay in producing part 2 of the Form E in addition to the SAR led to the proposal to use the SAR to present the information normally contained in the Form E as a way to simplify and streamline assessment and reporting.	Testing has built up from one child through three cycles across SW, Legal and Health, with the same three cycles being repeated for a total of 14 children. Eight of these children including a sibling group of three have now been to panel and it has been found that this report format provides sufficient information for the panel to make an informed decision about permanence planning for the child. The latest child's information reached the panel in 5.1 weeks. Findings show that: The report format provides sufficient information for medical and legal advisers to provide advice to the panel. There is agreement that in the right circumstances this saves significant time when compared to completing the additional Form E as is current practice. Where a child has already experienced drift and delay, the work required to prepare the report for panel is largely seen as being no different to writing a Form E. The proposal is for the single plan to be used only where drift and delay has not yet occurred. Aberdeen City Council has now implemented these two assessment routes.

Rationale	Progress
Practice Improvement Officer (PIO) support meetings at two weeks This is to help the SW and their team manager feel supported and flush out any issues early on so that strategies can be developed to tackle these.	Test cycles have covered a range of children: babies, sibling groups, and children where drift and delay has already occurred (now 24 children in total). Currently getting fuller feedback from SWs to augment the learning before proceeding closer to implementation. This test appears to be broadly meeting the predictions, though an issue has been highlighted in relation to the timely notification of recommendation (current A1 process) that has led to further change ideas. PIO is currently pulling together learning on common causes of gaps in the plan, as identified at meetings.
Use of LAC review co-ordinator This change idea builds on the timeline test, but introduces the use of the coordinator to help provide reminders and remove blockages around case progression, e.g. to inform the LAC chair about rescheduled meetings to prompt the issuing of the A1 form.	This idea is currently being tested with one child, and may be scaled up if it is successful.
Notification of permanence recommendation A(1) This form is used to advise legal services and health of the permanence decision, and triggers their involvement in the permanence process. Non completion of this form, and a failure to pass the completed form to the PIO was found to be a cause of delay. The form has now been simplified, with clearer options as to the path for permanence, and the necessity for reviewing officers to fill it in has been restated.	Currently the changes do not appear to be improving the process. The learning is that people are confused about when the form needs to be completed, particularly if a decision for permanence is made but if there is a delay in deciding what the plan will be. Amendments are going to be made to the process and form in the next test cycle.

Rationale	Progress
Advice Hearing notification The decision to notify parents of the Advice Hearing by recorded mail was chosen as a test because parents were often failing to attend Advice Hearings, which was building a source of unnecessary delay into the process. Notification of the Hearing by recorded mail is now used to provide evidence that parents have received information about the Hearing.	This test has shown that the panel feel more able to proceed with a Hearing in the absence of parents when they feel confident that the parents have received the notification. This test has also shown that parents who have received the notification by recorded delivery are more likely to inform the Reporter of the reasons they cannot attend. In these circumstances, the hearing is re-arranged within two weeks. This process has now been implemented.
Additional notification of Hearing by social worker The social worker contacts the family prior to the hearing to provide additional support, which acts as a second reminder of the hearing. The social worker is also able to provide information to the panel in situations where the parent has not attended, thus allowing the Hearing to continue to make a recommendation if appropriate.	SCRA and Social Workers are reporting that the action taken by Social Workers is having an impact on improving the rate of attendance, and that panels are not continuing Hearings when parents fail to attend. Further work needs to be done to gather data that support these observations.
Raising awareness of the permanence process among panel members. In response to feedback from panel members, which had identified that panel members lack the confidence to make permanence and contact decisions, three awareness sessions have been delivered covering the social work process, the purpose of contact and writing reasons to support decisions.	Questionnaires assessing the impact on panel members' confidence levels have been analysed and suggest that the sessions have increased panel members' levels of confidence and understanding of the process.

Rationale	Progress
Contact centre workers' attendance at hearings. Panel members identified that they felt more informed about the parental contact sessions when the worker who supervised the sessions attended the Hearing and the panel members were able to ask questions. They reported that this allowed them to make more informed decisions about contact and reduced the need to appoint a Safeguarder.	Currently in test, but evidence from the Reporter is that this test is having a positive impact by reducing the number of Hearings which are delayed. Anecdotal information from social workers is that the test is having a notable positive impact on panel members' confidence in their decision- making.
Written notification of the need for a LAC medical has been replaced by an email directly to the nurse responsible, since sending a hard copy of the letter was identified as a reason for delay.	Findings show that a greater percentage of medicals are completed within the four week timescale, thus reducing delay. This test is progressing well and is likely to be implemented in the near future.
Greater involvement of an educational psychologist before children formally enter educational placements (at age 2) Given that a significant number of children who are looked after from birth or as very young children later develop learning difficulties and/ or require special educational provision, additional input has been introduced from educational psychologists to proactively identify additional resources and provide support from the earliest stage, and certainly before the child reaches 2 (when they are first entitled to a nursery place).	This test has allowed vulnerable children to be supported by educational professionals before they formally enter the education system. The educational psychologists have also recognised their role in giving advice to CHS and the A&P Panel; preparing carers to understand what they might expect in terms of behaviour from children; how to deal with the child's distress and the management of their own feelings; and in working with carers to support them through difficulties and reduce placement breakdown. It has been valuable for educational psychologists to learn more about the permanence process, and sources of drift and delay, in order to more effectively support carers and children.

Rationale	Progress
Redesigned A1 The A1 form has been redesigned to make it more user-friendly to increase likelihood of completion, on time, and delivered to the right people.	Use of the modified A1 form has allowed the form to be completed and submitted in a more timely manner, i.e. within 24 hours of the LAC decision
Practice Improvement Officer conducts support/ mentoring discussion within two weeks of recommendation	This first cycle of this test is currently assessing if the single assessment provides sufficient information to allow the A&P panel to make a positive permanence recommendation to the Agency Decision Maker. More tests are planned to develop this change idea.
Use of fact sheets to explain child's potential journey and support available	To be developed
Streamlining admin/ paperwork	To be developed
Families team to permanence team handover	To be developed
Legal handover and the length of time the Court takes to make a final decision for children	To be developed
Use of a private solicitor rather than a council employed solicitor	To be developed
Process of decision-making about the suitability of potential kinship carers	To be developed
Developing more effective links with Aberdeenshire	To be developed

Rationale	Progress
Developing links with local churches	To be developed
Developing links with fertility clinics	To be developed
Updating website and information pack for prospective carers	To be developed
Process developed for following up adoption enquiry with a home visit within seven days	To be developed
Develop profiles of children needing an adoptive placement for prospective adopters	To be developed
Profiles of children to be shared at preparation groups	To be developed
Adoption and permanence teams to meet fortnightly to explore matches/ new adopters	To be developed
Review of post adoption supports	To be developed
Increase confidence in the assessment of adopters for sibling groups, harder-to-place children, and concurrent placements	To be developed

Appendix 4: Rationale for, and progress with, tests of change in Renfrewshire

Rationale Progress

Referral to the Reporter on the date of accommodation

Early conversations between social work and SCRA at the Champions' meetings revealed that there was a culture in Renfrewshire of adherence to the principle of minimal intervention, which meant that social workers were working with families on a voluntary basis initially, and referring children to the Reporter only when compulsory measures were actively being sought. This was felt to be contributing to the drift in permanence cases, and the group felt that rigidly adhering to this principle was not appropriate in cases where children had been removed from their families, since separating children from their families is already evidence of a high level of intervention.

The introduction of the automatic referral was tracked through the PDSAs which have been developed for individual children and through a PDSA which has been devised to capture feedback specifically on this new referral procedure. The PDSAs show that people generally agree that this has been a positive development and that it increases the level of security for the child. One of the concerns was that automatic referral to the Reporter would dilute the level of trust and rapport between families and social workers, and that social workers would feel it runs counter to their training where they are encouraged to work with families on a voluntary basis. However, only one worker who has provided feedback on this test (out of a total of six) has suggested that the early referral should not be mandatory due to the 'no order' principle, and even in this case the worker agrees that the early referral should be discussed and considered in every case. The Children's Services Manager has also stated at Champions' meetings that she is surprised about the level of acceptance of this development by workers and team managers and, on the basis of feedback provided, has made the decision to implement this procedure for all children aged under one year. The intention of the Children's Services Manager is to phase in this approach for other age groups.

Rationale	Progress
Introduction of social work permanence planning meetings to plan timescales for individual children The reason for introducing permanence planning meetings was to bring all workers together to agree timescales for each child. This meeting has so far been led by the Senior Social Worker for the FACT, who has had an important role in introducing the PACE philosophy to workers, encouraging buy- in, and monitoring timescales for individual children (and tracking reasons for drift and delay).	The introduction of permanence planning meetings has been regarded as a useful way to plan permanence work because it provides an opportunity to schedule meetings early, which means that there is less likelihood of other work taking priority. The meeting has also provided an opportunity for workers to discuss roles, and has emphasised the shared responsibility for permanence work, which appears to have had a positive effect on workers. Workers have been overwhelmingly positive about the new meeting, commenting that it has supported their understanding of the process, provided clarity about the structure and timescales of work, improved communication and avoided delays in progressing children's plans. A decision has not been reached about implementing this test, but the permanence planning meeting will continue to be scheduled when the tests are rolled out to other groups of children.

Rationale	Progress
Involvement of a social work Champion to monitor timescales for each child There has only been one Champion involved in this work so far, who is tasked with monitoring progress and timescales for each child. It is intended to roll out this Champion role so that workers who have had involvement in the programme will be tasked with supporting workers who are new to PACE as the tests are scaled up.	The social work Champion has played a key role in introducing the tests to workers; monitoring timescales for individual children; and motivating workers to achieve the key milestones. Only one worker (FACT senior social worker) is undertaking this role at present but the plan is to scale up this test so that an additional two senior social workers support others to run the tests. The initial learning from the six children who have been tracked through the system is that the critical role of the Champion is to monitor timescales in the context of the individual circumstances of the child, and therefore that it is important to use workers who have an operational knowledge of the system and the child. Feedback so far suggests that it is not sufficient to standardise timescales, but that improving permanence timescales and decisions is reliant on involving a worker who has a knowledge and understanding of the child's circumstances. This test will be expanded to other children, and natural 'control' cases will be identified, to compare the timescales for children who have been included in the tests and

those who have not.

Rationale	Progress
Early identification of the Reviewing Officer (in the case of one child) Workers involved in one of the permanence planning meetings suggested that it would be beneficial to identify the Reviewing Officer earlier so that they could support the planning and monitoring work.	There is evidence to suggest that the early (pre-birth) identification of the Reviewing Officer has positively impacted on timescales in one case which was initially delayed due to the need for a health assessment in relation to the mother. Despite the initial delay (which could not be addressed through the whole systems approach and involvement of all agencies due to the mother living out with Renfrewshire and her local authority area not deeming her case to be a priority because her child was accommodated in a different local authority area), this case has been quickly progressed, which may have been partly due to the involvement of the Reviewing Officer at the outset. This test needs to be scaled up, which may prove challenging due to the nature of the role in Renfrewshire (i.e. senior social workers undertake this task in addition to their team management duties, which has led to a significant increase in workload).

Rationale	Progress
Awareness-raising events for panel members The group discussed panel members' decisions about contact as being a potential barrier in achieving timely permanence for children, which was borne out in the analysis of the permanence report which is presented to the Head of Service in Renfrewshire. It was therefore agreed to conduct a number of awareness raising sessions to discuss contact, and to help panel members to develop the reasons to support their decisions.	The first three awareness sessions delivered to a subset of Renfrewshire panel members have been very successful, as evidenced in the evaluation report (Gadda, 2014). Several panel members have reported anecdotally that they have been able to translate the learning from these sessions into their role, and have felt more confident in asking supplementary questions and drawing out evidence to support their decisions. As well as helping them to write reasons, panel members have reported that the sessions have helped them to challenge social workers and solicitors and have provided clarity about their role, and particularly in making decisions about contact. The plan is to roll out this awareness raising.

Rationale	Progress
Involvement of health colleagues in the assessment It was felt that involving health and education colleagues in the assessment would increase its robustness and credibility for panel members. It was acknowledged that current input from health is limited due to their lack of knowledge about the permanence process, and therefore that involving staff more directly in the assessment would also serve to raise awareness about permanence, and thereby increase health professionals' level and quality of contribution to the assessment. It was felt that this multi-agency ownership of the process would also lead to a fairer and more transparent assessment process for families.	Health colleagues have been involved in conducting an assessment for several months and have reported that their involvement in the permanence assessment has been a positive development. The health and social workers involved with the family believe that the birth parents are being given a better opportunity to demonstrate their ability to care for their child due to the multi-agency support being provided. The family have commented that they are concerned about the level of support they will receive when the assessment ends, which demonstrates the value that they are attaching to the support being offered throughout the assessment process. The health worker has also reported that she is enjoying this work, and feels that it is giving her a better understanding of the permanence process, and of how to support families during it. As a result of this feedback, the senior manager from health services (who attends the PACE Champions' group) has suggested that parents undergoing permanence assessments should routinely be given access to community-based services, including PPP and Families First, to encourage them to build up a network of support, even before a permanence decision has been reached (and their children and not in their care). These tests are ongoing, and are likely to be scaled up.
Involvement of education colleagues in the assessment	To be developed; currently awaiting identification of a suitable child to run the test.

Rationale	Progress
Providing continuous health visitor support to the birth and foster family	This test was delayed due to staffing issues, but a health visitor has recently been identified to take forward the test.
The group felt that providing continuous health visitor input to the birth and foster families would serve two purposes: firstly, provide a better service to children, who would only have contact with one health visitor regardless of their circumstances meaning that the health professional has a full history of the child and more opportunity to develop a relationship with the child; and secondly, to give the birth family a high level of consistent health support to optimise their chances of demonstrating their ability to meet their child's needs, and thus produce a fairer and more robust assessment.	
Reducing the timescales for the Reporter's decision Reducing the timescales for the Reporter's decision has been an attempt to ensure that all agencies are working to the same timescales to allow permanence decisions to be reached within 6 months.	This test links to the tracking of timescales for individual children, and the associated need to reduce the time it takes for Reporter to prepare grounds. In response to the early referral to the Reporter, SCRA workers are attempting to reduce the timescales in which they reach decisions. Early indications are that this has been effective in reducing the timescale for the permanence decision.

Rationale	Progress
Racionale	11051633
Use of template for presenting information in reports to clearly signpost and evidence the recommendations for panel members Feedback from panel members (locally and nationally) suggests that an obstacle to making good decisions at panels is the quality of reports provided by social workers. In addition to quality issues in terms of the nature of information provided, panel members have reported that the evidence provided to support social work recommendations sometimes gets lost in the body of the report and that panel members therefore find it difficult to produce reasons to support their decisions. The first cycle of a test on report writing has been developed where two social workers and a senior social worker will present their recommendations and supporting evidence in a template containing bold type and bullet points to ensure that recommendations and evidence to support them are highlighted, easy to identify, and accessible during the Hearing. The next phase of this test will be to support social workers with improving the quality of information presented in reports.	Currently awaiting results for this test.
Incorporation of the parenting capacity assessment in the Integrated Assessment Recently, workers are more commonly being asked to complete parenting capacity assessments as an outcome of the Legal Advice Meeting (LAM), which is causing delay due to the need to complete the assessment, and schedule a second LAM. Workers have reported this as a source of frustration, particularly as the assessment of parents is part of the process up to the point of the LAM.	In keeping with the philosophy of the <i>single</i> Integrated Assessment (IA), a test is being run to incorporate the parenting assessment in the IA in preparation for the LAM.

Rationale	Progress
Peer-to-peer support for social workers to improve the written reports for, and appearances at, Sheriff Court and Children's	To be developed.
Feedback from panel members suggests that they are more likely to support the recommendations of social workers who appear confident at panels. Similarly, SCRA has suggested that delivery style is important in the Court setting. Social work managers acknowledge that workers' delivery style varies and that it may be useful to pilot a mentoring scheme where workers with strengths in different areas (e.g. report writing skills vs. confidence in presenting cases in court/ at children's hearings) are paired to share their knowledge, experience and skills. They believe that using a strengths-based approach will be a less threatening system and will allow workers to share their learning in a safe environment.	

Rationale	Progress
Develop alternative to Form E	To be developed.
Analysis of the permanence report which is presented to the Head	
of Service on a monthly basis highlighted that the main reason for drift in permanence cases is completion of the Form E. Anecdotal	
evidence suggests that workers feel overwhelmed with this report,	
and do not prioritise it because the children who are the subject of these reports are in safe and secure placements. There is also a	
current drive in Renfrewshire to embed the Integrated Assessment	
and move towards a single assessment for all children in line with	
the GIRFEC agenda. For these reasons, a test will be developed to modify the IA for presentation at the Fostering and Adoption panel.	
In the context of aim 2, this means that workers will have eight	
weeks to revise the IA to ensure that it serves its purpose at the panel (i.e. provides a profile of the child for family finding).	
Use of change Champions	To be developed.
The use of change Champions will build on the existing approach	
where a social work Champion is monitoring timescales for each	
individual child. It is likely that this model will be rolled out to other agencies so that workers who have been involved with the	
PACE programme and are familiar with its approach introduce	
others to the philosophy and aims of the programme.	

Rationale	Progress
Allocation of protected time for seniors to sign off reports	To be developed.
This test will be developed to ensure that the process of social	
work seniors signing off reports is not delayed as a result of competing priorities, and that the timescales for meeting key	
milestones can be planned accordingly.	
Use of mentor for report-writing	To be developed.
For aim 2, this may involve providing mentoring support to ensure	
that the IA contains the core information required by members of the Fostering and Adoption Panel.	
the rostering and Adoption Panet.	
Review structure of work	To be developed.
This test alludes to a review of how work is allocated and resourced	
in the locality teams, with ideas such as increasing the number of workers in the FACT (and removing this remit from locality team	
social workers) or increasing the number of posts specialising in	
permanence work.	

Rationale	Progress
Use of Permanence Order with Authority to Adopt	To be developed.
Interest in increasing the use of POAs in Renfrewshire has resulted from the more widespread use of POAs in the East Coast, and in particular learning from Aberdeen City, where they are used routinely. Renfrewshire recognise the value in the use of POAs because it avoids the adoptive carers having to petition the courts directly, but Aberdeen City have cautioned that they are hoping to move away from them in some cases where they believe direct adoption is more appropriate.	
Review of FACT assessment content	To be developed.
The FACT assessment is widely held to be a model of good practice in early assessment (the team manager and one of the FACT social workers recently attended a PEW to describe the model to colleagues in South Lanarkshire). Therefore a test will be developed to scrutinise the content of the FACT assessment and replicate areas of it in the IA.	