



Permanence Planning for Children in a Time of Austerity

1. Introduction

I grew up in a family which fostered for the London Boroughs of Kensington & Chelsea, and Westminster. Pre-adoption babies to start, becoming more complex as time moved on to include children with disabilities, children of drug using parents, children who had experienced domestic violence, neglect and abuse. One of the children placed at 36 hours old in 1976, has Downs Syndrome. My mum is 80 and is still caring for her – very permanent fostering.

My family also adopted – my youngest sister, who was placed for 48 hours at the age of 4 months and was still with us 5 years later – and is still with us 40 years later – permanency through adoption.

Professionally, I qualified as a social worker almost 30 years ago, and have specialised in adoption and fostering since 1988, working both in Local Authorities and the Voluntary Sector. I am the Family Placements manager at Father Hudson's Society. It is a registered Charity, which has been offering care to children for over 100 years. Originally this was through residential provision supported by charitable donations from the Catholic parishes in the Archdiocese of Birmingham. Adoptions were also arranged, and foster placements made.

The residential homes closed in the 1980's, and as statutory responsibility for children in need had shifted to the Local Authorities, the Charity developed and extended its remit to include adults and older people.

The New Routes Fostering Service now operated by Father Hudsons Society, started in 1992. Originally intended to provide teenage fostering, supported lodgings and an aunt & uncle befriending service, the supported lodgings and befriending services soon closed when Local Authorities who had stated a wish for us to provide the services, did not want to pay for them. The service is small, friendly and retains its carers for many years. It now offers placements for children aged from 0 – 18 years.

I am also the CE of Adoption Focus, the adoption agency operated by Family Society, a separate and new Charity established in 2009, when the Father Hudson's Society adoption agency closed. It has placed 83 children since becoming operational.

2. Recurring themes in the public debate relating to looked after children include:

High numbers of children in care

- High numbers of children waiting for adoptive placements
- High numbers of placements experienced by children in care
- A significant shortfall in the numbers of foster placements
- Concerns about residential care (both historical abuse; and children being moved to cheaper parts of the country)
- Poor outcomes for formerly looked after children in terms of educational achievement;
 physical and mental health; criminal behaviour; employment prospects
- Processes in respect of the recruitment criteria and assessment of foster carers and adoptive parents are too long, too PC, and lacking in good common sense which puts perfectly good people off
- Social workers intervene in family life too quickly/not soon enough

And underpinning this is a view that if the process was simpler, quicker and more accessible then more people would come forward to foster or adopt.

And that if we had more providers we could probably get more foster carers/adopters

And the regulatory changes about which the consultation process ended last Friday, aims to speed things up......

But LA's have to make significant budgetary cuts – which will impact on staffing levels, and service provision – not only what will be provided, but who will provide it, how, and how will it be funded?

We do know that there is an increasing demand for children's care:

DfE published data re England LA's looked after children (25th September 2012)

- There were 67,050 looked after children at 31 March 2012, an increase of 2 per cent compared to 31 March 2011 and an increase of 13 per cent compared to 31 March 2008.
- Of children looked after at 31 March 2012, 50,260 were cared for in a foster placement. This represents 75 per cent of all children looked after at 31 March 2012.
- There were 3,450 looked after children adopted during the year ending 31 March 2012. This was the highest figure since 2007 and an increase of 12 per cent from the 2011 figure.

The statistics reveal that there are a lot of children and young people who need and must be provided with care. That care must be of a good quality, and it must provide the child with the stability and security which is the means by which children have the best opportunity to develop and thrive.

3. So what motivates people and providers of child care services?

Foster carers: - our experience at FHS (and from when I worked in LA) is that the majority of foster carers are either people who have enjoyed bringing their children up, miss the busyness of family life, and wish to continue their child focussed lifestyle; or people who combine fostering with caring for their birth children. Foster carers want to give a positive experience of family life to children who have not had this. Their skills are to do with achieving successful family life. Fostering offers them the opportunity to do this, and pays them for the skills and expertise they have.

Adopters:- our experience at Adoption Focus is that the majority of adopters are people who did not choose (initially) to adopt – they are adopting because they have been unable to achieve a successful pregnancy. There are exceptions to this which include people who have previously adopted, or already have birth children; people who want to adopt a child with disabilities; single adopters who want family life, but don't have a partner; and same-sex couples who approach adoption as the positive means by which they can become parents. There are also some foster carers who adopt children placed with them.

Charities:- the reasons why the charities I work for exist, is to enable children to have a childhood. To experience security and nurture and family life which will help them to learn to trust others and build lasting relationships, and to grow into the adults they can be. It is about valuing and supporting family life, and believing that every child should have the opportunity to have the best experience of this.

We are not alone in this – it is my belief that all providers of child care services want children to get the best that they can.

And of course it is not as simple as the fact that being a charity means we provide services – we have to be paid for the statutory services we provide, and because they are statutory services, we cannot use charitable funds to provide them. Therefore a Local Authority which has a statutory duty of care for a child assessed to be in need, can provide in-house, or source externally – and pay the agreed fee. Charitable funds can be used to enhance service provision, and any surplus is used to develop the services we know to be essential to support foster carers and adopters in the crucial and demanding tasks they are undertaking, in the long term.

4. So what does it cost?

Fostering: for FHS to provide a fostering service we have to have the funds to cover building, heating, computers, admin, panel costs, legal advice, medical advice, insurance costs (foster carers; public liability; building and contents) stationery, recruitment (advertising, publicity to encourage more people to foster), training (foster carers and staff), staff salaries, fostering fees and allowances, travel costs, management costs, regulatory costs (i.e. registration and inspection by Ofsted, registration with HCPC) etc etc. These have been increasing – not salary costs, because staff have not had an increase – but travel costs, fuel costs, insurance, and training requirements (particularly in relation to core training requirements), staff costs arising from the increased time spent on completing tender documents, datasets and Local Authority evaluation and monitoring forms, and recruitment.

Any organisation providing a fostering service faces the same financial demands – independent fostering services (private and not for profit); and Local Authorities.

Foster carers must be reimbursed for the cost of caring for the child entrusted to their care: The governments national minimum fostering allowance weekly rates for 2012 -13 in the area we cover are £114 for babies; £117 for pre-primary children; £129 for primary school aged children; £148 for secondary school aged children (11 - 15); and £172 for secondary school aged children aged 16 - 17 years. They are higher in the South East and in London.

The allowance relates to the basic amount which foster carers receive to cover the costs involved in looking after any fostered child.

In addition to this, and any other payment the fostering agency deems to be appropriate in recognising the value of the care provided, and to keep their foster carers (who could choose to move to a higher paying provider), foster carers are paid a fee.

Much of the fee charged by the fostering service to the placing Local Authority is therefore paid directly to the foster carer. The management fee charged on top of that aims to cover the cost of providing the service – as a charity we do not make a profit. If we make a surplus it goes back into the service. The inability of the Local Authorities to increase the fees they pay to fostering providers, because they are under huge pressure to reduce costs as their budgets are slashed, at the same time as they are caring for an increasing number of looked after children, means that the fees paid to foster carers cannot increase in line with the increased household costs they are facing.

We know that foster carers don't just do it for the money – but they do need to be paid, and their household costs are increasing. To be told (as we were) by a Local Authority commissioner that she was facing an increase in her family's household bills and had not had a pay rise (and therefore we could not expect the Local Authority to increase the fee paid to us so that we could increase the fee paid to foster carers) misses the point – the children the foster carers care for are the responsibility of the Local Authority, and looking after children costs money.

So compare this with adoption...

The motivating driver for adopters is (I have suggested previously) usually different from foster carers — we may feel concerned that a commissioner assumes that a foster carer should continue to provide the same high level of care whilst their household budget is squeezed, because that is what is happening to all families, because that misunderstands who is responsible for the child. What we frequently experience with adopters is the view that if they want to be parents, they should expect to manage the costs, just like any other family. There is a big difference though — the children who need adoptive placements often need parents who can either take a longer period of time off work (than a birth parent might expect), or (if adopting as a couple) have one of the couple remaining at home in order that the child can build attachments, and the parent can attend appointments with therapists and social workers and school meetings etc

The costs to the service provider (VAA or LA) in providing an adoption service are very similar to those noted previously in respect of fostering. We don't have to spend time on tender documents (at the moment), and we don't insure our adopters, but the other costs are the same.

The fee paid to the VAA is intended to cover the recruitment, preparation and assessment process, and the linking, placement support, legal process and post adoption support. It is only paid when a placement is made – the cost of providing advice, support and guidance to those who choose not to proceed to adoption, is covered by the VAA.

The cost to adopters is the same (plus those noted above) as any other family.

In January this year, the Guardian reported the findings of the Liverpool Victoria Insurance Company survey regarding the cost of raising a child in the UK. According to their figures, it costs around £218,000. This equates to around £10,400 a year, £865 a month or £28.44 a day.

The figures assume a typical household where the child:

attends a private nursery from six months until they are five as both parents will return to work

- attends state school, full time from age 5 to 18
- takes an annual holiday from the age of one
- attends university for three-years where tuition fees and living costs are paid in full by the parents (education calculated to be £71,780).

Take the cost of university out of the equation in order to compare with the cost of foster care (on the basis that children leave care at 18) - £146220 – about £7000/year, £584/month - £16/day - £112/week. Almost identical to the Government national minimum fostering allowance.

Looking after children is expensive. Adopters can claim child benefit (provided that their household income does not hit the new threshold) – they may get an adoption allowance paid by the placing Local Authority, depending on the needs of the child, and the local criteria. It is ordinarily means tested, and many adopters do not qualify. This means that the assessment of prospective adopters includes a financial assessment – how will they manage on a reduced household income (arising from changed working arrangements because they must be available for the child or children), and increased household expenditure because they will be caring for a child or children? Obviously all parents have to adapt if they want children – but because we want to achieve stability and security, and adopters have got to do more than other parents because of the children we place with them, we know that finances must be secure. We are also approving adopters with household budgets which include debts arising from student loans, and large mortgages.

We expect a lot of adopters – financially, emotionally, and practically. They want reassurance that if they are committing to children who we know have been traumatised by their pre-care experiences, they will be able to access the support services they need in the long-term. These are services which in this time of austerity, are facing cut-backs.

Of course the true cost of child care services can be measured in terms of what it costs if good care is not provided for children. They are over-represented in the criminal justice system; in poor mental-health; and lower educational achievement.

5. How can the care be provided?

We are currently experiencing a significant and continuing financial crisis as a country. There is less money to spend on public services, and they need to adapt and change, make efficiency savings, and ensure value for money.

As a provider of both fostering and adoption services, I am dependent on a number of things:

- qualified, professional, and committed social workers who can assess and support foster carers and adopters
- people putting themselves forward as potential foster carers and adopters and committing to the long-term
- an income to pay for the cost of providing the services if Local Authorities cannot pay the fees I
 need to charge to recoup my costs, reimburse foster carers, and pay my staff, I cannot provide the
 services.

And as Local Authorities around the country are having to make further and deeper cuts, there is no guarantee that the services I provide will continue to be used. When I started this presentation, I

mentioned that FHS originally set up a befriending and supported lodgings service with the fostering provision, but it quickly closed because the Local Authority which had been consulted and had stated an intention to utilize a befriending and supported lodgings service, pulled out.

Our fostering service has a few vacancies at the moment – and when there are vacancies, there are no fees paid.

There are a couple of reasons for the vacancies:

- most of the vacancies are alongside other children in placement this means that there must be very careful matching to ensure that the new arrival does not negatively impact on the existing placement
- Local Authorities are under pressure to place internally this is seen as the cheaper option

The first factor is something we will live with – vacancies will not be filled if there is the risk of damaging another child's security, and causing a disruption.

The second factor has wider implications in relation to permanency planning for children. We have recently placed three young brothers. They arrived on a Police Protection Order, and could have been returned to birth mother or moved to other carers within the first week. 4 months later they have just had their second review – the oldest brother (6 years) has stated in his LAC review consultation document that he wants to stay with his foster carers. The Local Authority has already asked the foster carers to consider SGO's –one of the alternatives is that they may be placed with 'in-house' carers. The foster carers do not feel that they can become SG's. They are already adult carers to a 21 year old (originally placed at 9). They converted their garage (at their own cost) so that they could do this. The male carer took early retirement last year, which enabled the couple to extend the placement types they could offer. They want to offer long-term fostering placements. If they take out SGO's in respect of these 3 small boys, the male carer will have to return to work because they will not be able to afford to care for the children. And the female carer will have the main caring responsibility (in addition to the young adult), which is managed at the moment, because it is shared.

This is not an isolated example – we have had other children waiting for more than two years before their placement was finally confirmed as permanent. The factor which prevented an earlier decision, was about the long-term use of an independent fostering provider.

One thing has not changed – childhood is a once in a lifetime opportunity – and children have a right to expect that they can live without fear of violence or neglect; and that if the state intervenes to protect them from this, that they can live without uncertainty and constant change. Long-term foster care can provide this for children. But it needs to be a properly assessed option for the child, and a properly matched and supported placement – i.e. can this or these foster carers properly provide the care this child is likely to need throughout his childhood.

The costs of utilizing external fostering providers must be properly compared with the cost of in-house provision which includes the factors noted much earlier. The contribution made by foster carers to the positive care experience of children who can feel reassured that the placement they are in today, will be the one they are still in this time next week, next month and next year, must be recognised.

Adoption as a permanency option is often complicated for the child and the adopters, by the length of time it takes to achieve the decision to permanently sever the birth parent- child relationship. The

length of time needed to properly process the legal consideration of this option is based on adult timescales. The baby placed on an Interim Care Order at birth may be waiting for her adopters to be found a year later(when the Placement Order is granted) – and if she has older siblings who also need to be placed with her; or (e.g.) foetal alcohol syndrome, it will take some time to find anyone. One solution – fostering through to adoption - can work provided that the fostering placement at the outset is made on the basis that these carers could become the permanent adopters at the point at which this is the child's confirmed plan. In this way foster cares/adopters are properly prepared to become the adopters, will therefore be properly matched, and will not be foster carers like those in the example previously given who feel pressurised into a course of action they had not intended. This option is something which Adoption Focus is developing in collaboration with two other VAA's (St Francis & Faith in Families). The Triangle Project will only work though if Local Authorities want the service, and are in a position to pay the fee which covers the cost of providing it.

Adoption is the obvious permanent solution – and it could be seen to be a free service. People who want to adopt, agree to be assessed, and take over the care of children who cannot return to their birth families. By definition, these children are likely to be some of the most hurt and traumatised children, because things are so bad, that they cannot return home. This means that unless adopters are properly prepared and supported in the long-term, this permanent provision may prove to be temporary.

6. Conclusion

Children need security and stability, and have a right to family life. Those who find themselves in public care have already, by definition, experienced insecurity and change. We have a duty to ensure that this is not exacerbated by the care provided once they leave their birth families.

Foster carers and adopters are often motivated by different things. However, they all care about children (and if they don't they should not be approved).

The contribution made by foster carers in providing permanent and good care for children and young people must be recognised. The fact that they should continue to be paid for the role they play, must not be viewed negatively. The fact that they may be foster carers approved by an independent provider should not make those placement less stable because of situations where Local Authorities automatically assume that external placements are too expensive, and therefore do not agree the permanent status of the placement.

Adoption offers a legal option which secures the child's permanent status. The quicker that this can happen for a child, the better. This means that Local Authorities must be able to consider VAA placements at the same time as they consider their in-house provision. Adoption can be complex and demanding, and adopters (and their children) will need to be able to continue to access support services (which might include adoption allowances). We are expecting adopters to be able to help their children overcome significant trauma and disadvantage. Being a parent is never easy – adoptive parenting is even more demanding.

Fostering through to adoption provides the child with the security of their probably permanent home at an earlier opportunity, and in a planned way. It is a different way of achieving permanency, and demands specific support and input to enable the carers to undertake the dual function. This is not a quick-fix which happens because it is where the child is after a couple of years – it must be properly and clearly planned from the outset of the child's journey through care.

The pressure to find more foster carers and adopters for the increasing numbers of children who need them, is huge. What we have found in fostering, is that a large number of providers are chasing the same group of potential carers – it is very hard to recruit foster carers. We have the capacity to train and assess more foster carers, but they have a lot of potential providers to apply to – this makes competitive recruitment an expensive activity.

In adoption, there has been a shift in the last few years from prospective adopters automatically assuming that they needed to go to a LA. The evolution of google means that prospective adopters can research LAs and VAAs, and the numbers approaching us have increased. But I am not turning people away because I have reached capacity – appealing to a wider group of potential adopters is the challenge. Ensuring that they continue to get the support they need as services are cut, is essential.

Removing children from their birth families is a huge responsibility. It is as important a responsibility to ensure that the care they are provided with as an alternative, is properly planned and adequately supported. That costs money, and time.

And finally......when I was training, one of the essential texts we were required to read was the 1973 research 'Children who Wait: a study of children needing substitute families' by Jane Rowe and Lydia Lambert. In brief, chapter 10, argued that in the short term there needs to be greater recognition of the situation, and commitment of staff and resources of all types. In the long term there needs to be more effective family diagnosis, decision-making and implementation; there needs to be a range of substitute families available, accompanied by greater recognition of issues relating to good quality foster care. More emphasis needs to be placed on both pre- and post-placement services. Even though adoption is often regarded as cheap and fostering more expensive, both require effort and investment.

40 years later, and the same argument can be made.

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December 2012