

Family Group Conference Service

Annual Report 2021-22

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1. Introduction

The Family Group Conference Service actively supports family-based solutions at key points in the child's journey through Children's Social Care Services. Family Group Conferences (FGCs) are meetings about the care and protection of children that include and involve the extended family and friendship network in the planning and decision-making process. The FGC Service sits under Safeguarding & Quality and responds to referrals from all the children's teams.

FGC services were initially developed to identify and implement family support for children where families were in crisis and there was a risk of statutory intervention.

We have reviewed the structure and reach of the FGC service to optimise the impact on outcomes for children and make best use of local authority resources. The criteria agreed with operational Heads of Service are:

- There has been a CP Consultation or Strategy Meeting and an FGC has been recommended;
- There is a CP Plan in place and an FGC has been recommended;
- The primary concern is neglect and the case has been open 6 months;
- The primary concern is neglect and there have been one or more re-referrals last 6 months.
- Step down from care cases
- Reconnecting care leavers with family/friend networks

The service is managed by the FGC Manager who reports directly to the Safeguarding & Quality Manager. This role also undertakes some of the more complex FGCs. The majority of the FGC work is undertaken by self-employed FGC Co-ordinators (variable hours) who are specially recruited and trained.

This report covers the period 1 April 2021 to 31 March 2022. It focuses on outcomes, the effectiveness of FGCs and value for money, through provision of sources of support identified through Family Plans as an alternative to Local Authority resource.

During the Coronavirus outbreak the FGC Service focused on how to support family-led decision making during the crisis when face-to-face physical meetings were the exception not the rule. It was vital for the service to adapt to the new way of working during the crisis to work in partnership with families to make workable plans for vulnerable children and families.

2. Performance data

During the period 2021/22 the FGC Service received 179 referrals from CSC (compared to 148 last year) for 332 children. 147 FGC's have taken place which includes 94 virtual (video conferencing) FGC's.

The conversion rate from referral to initial FGC for these referrals was 79% (142 initial conferences) with one referral awaiting FGC. There is not a national conversation rate; however, Family Rights Group (FRG) confirmed that the average is about 75%.

Figure 1: Breakdown of 332 children subject to FGC by gender:

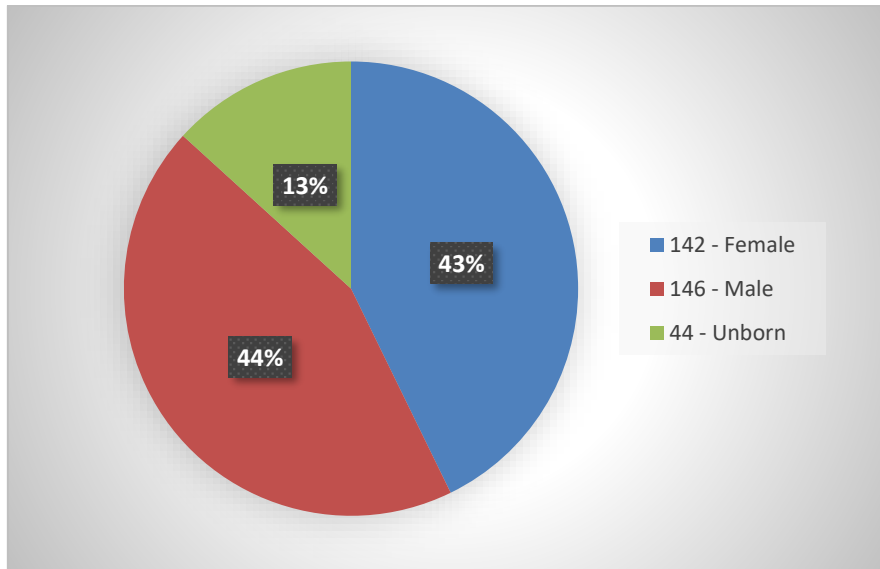


Figure 2: Age Ranges for the 332 children:

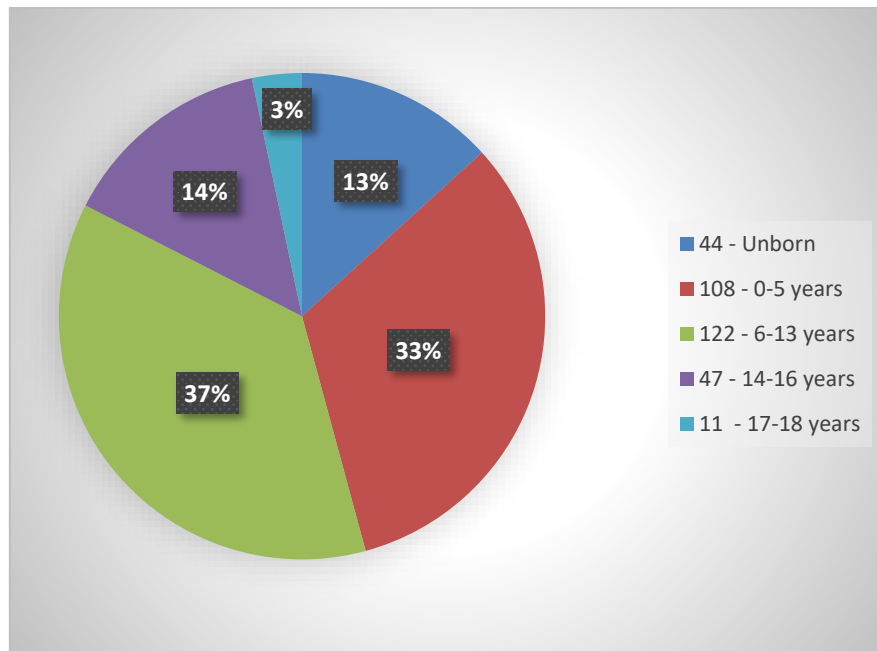


Figure 3: Ethnicity of the 332 children:

Ethnicity	Number of children
A1 White British	207
A2 White Irish	4
A3 Any other White background	9
B1 White & Black Caribbean	17
B2 White & Black African	3
B3 White & Asian	5
B4 Any other mixed background	19
C2 Pakistani	3
C3 Bangladeshi	8
D1 Black Caribbean	3
D2 Black African	16
D3 Any other black background	7
E2 Any other ethnic group	3
E4 Information not yet obtained	28
Total	332

The majority of the children referred were White British – 62% (207 children).

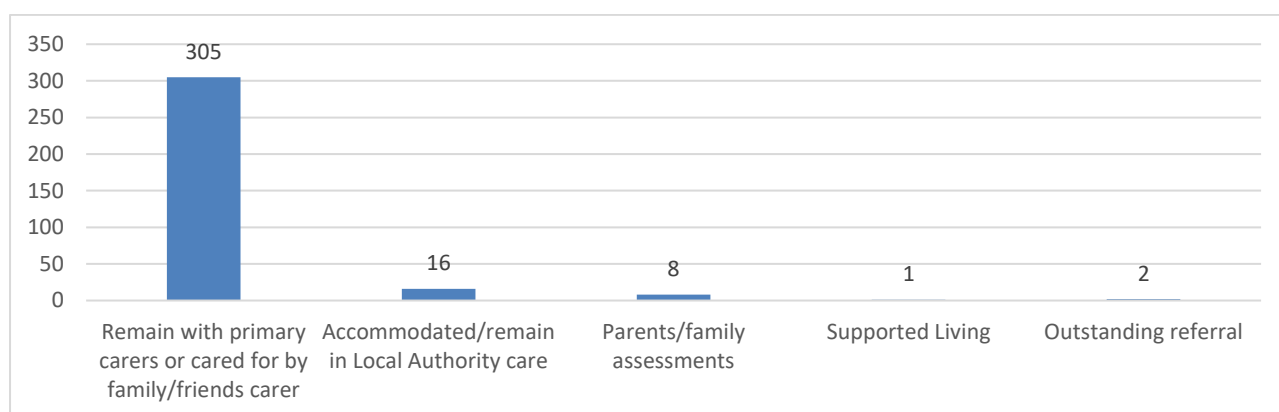
For the 179 Referrals received for this period:

- 159 Initial and Review/Second FGCs took place for the 179 families up to end of July 2022.
- 852 Family/Friends attended.
Co-ordinators aim to visit all family/friends invited to attend. If family/friends are unable to attend, the Co-ordinator will get their contribution and share this with the family at the conference and include it in the plan.
- 98 Fathers/Stepfathers attended.
Fathers are an important part of the FGC. If they are unable to attend, the Co-ordinator will get their contribution and share this at the conference.
- 174 Referrers/Agencies attended as Information Givers for the 159 Conferences.

3. Outcome data

Outcomes for referrals for the period 2021/22:

- 179 Referrals received for 332 Children which includes referrals for 44 Unborn Babies.
- 142 Referrals had an initial FGC (79%).
- 36 Referrals had 'NO' FGC (20%). In these cases the decision was made by family and/or the Social Worker to not proceed with the FGC because for example: the children returned to their parents/family carers during the preparation process; the difficulties were resolved; no family/friends network was identified; the family moved out of the area; or case closed by CSC.
- 1 (1%) Referral still outstanding awaiting FGC.
- 62 children from the 36 referrals were living with parent/family carers at closure of referral.



- 305 (91.9%) Children/Babies from the 332 children remained with their primary carers or are cared for by family/friend's carers. For the 44 Unborn Babies, 38 Babies remained with parent/s or with family carers. 6 were accommodated by the Local Authority.
- 16 (4.8%) Children from the 332 children were accommodated or remained in Local Authority Care because family/friends did not get through the assessment process to care for the children or no family members were identified.
- 8 (2.4%) Children – Parents/Family Assessments are currently being undertaken. Final decisions will be made by Court.
- 1(0.3%) Child – Supported Living.
- 2 (0.6%) – Outstanding referral.

Positive outcomes demonstrated that children re-established positive contact with their fathers, paternal families and wider family. Additionally, parents and family members worked on improving relationships, positive communication and resolving conflict. The need for ongoing intensive support from the agencies was reduced.

4. Evidence of FGC Effectiveness

FGCs are expected to be effective in two ways:

Enabling the wider family to be fully involved in decision making and planning for their children.

Achieving better outcomes for children.

Research evidence demonstrates that families are willing to come together and make plans for their children. Most plans are approved by the Social Worker unless the case is in the Court arena, in which case final decisions are made by the Court. FGCs result in more people contributing to the plan with a considerable increase in the involvement of fathers and paternal family members. For most families the process can initially be uncomfortable, however evaluation shows that the majority of families are positive about coming together and feel listened to.

Outcomes: There is evidence that FGCs reduce the demand for services. FGCs also maximise the family's own resources. Table 4 shows for 2021-22 that 305 (91.9%) children/young people who were 'Edge of Care' or were in Local Authority Care are now living with parent/s or family/friends.

Emergency LAC Panel: The Children and Young People's Emergency LAC panel was established in January 2016. The aim of the panel is to prevent young people from being accommodated and seeks to put into practice the intentions of the Milton Keynes Council's Family Support Approach 2010:

There are unique advantages for children experiencing life in their own birth family and in most circumstances; children's needs are best met by being cared for within their families.

The FGC Service is represented at panel by the FGC Manager. Recommendations are made for an FGC for all cases if an FGC has not already taken place. Panel referrals are given priority, for example to prevent a child from becoming accommodated or to return them home from emergency short-term foster care.

An internal review in January 2016 highlighted The Panel makes very good use of alternative options especially FGC which seems well suited to its role in support of the Panel and has shown itself to be effective in a number of complex cases.

Outcomes for Emergency LAC Panel referrals have prevented the majority of young people from becoming accommodated.

Case Studies and Foster Care Costs 2021-22

There are significant costs associated with children not being able to remain in the care of their family network. Successful FGCs prevent these costs.

The average unit cost of care proceedings is estimated at around £30,000 and above, depending on the length of contested hearings, plus administrative costs. If a child becomes looked after, the costs of their care are high and potentially long term. Some examples of successful FGCs are given in the table below. Residential care costs would be significantly greater.

Case Studies (2021/22): prevention of care Children accommodated by the LA at the start of the FGC process	Monthly foster care costs*
<p>Family A: Child 1 & 2 – pre-school age. Child 3 – primary school age.</p> <p>Status at FGC: Care Proceedings</p> <p>Social Worker’s understanding was that the parents had no support and also were not engaging with agencies and unlikely to engage in the FGC process. Parents and wider family worked with the Social Worker to address CSC concerns and made a clear robust and effective plan. Wider family played an active role to support parents and in the children’s care.</p> <p>Outcome: Following positive assessment x2 children are living with family members and 1 child living with parent. Wider family are supporting family carers and managing and supervising contact to ensure that this is positive between the siblings and mother.</p>	£4,547.04
<p>Family B: Child 1 – secondary school age.</p> <p>Status at FGC: Child Looked After – Rehabilitate Home</p> <p>Young Person in Foster Care on Section 20. FGC identified the wider family to support the young person and father to rebuild their relationship. Mother who was not living in the UK was also part of the FGC which enabled family to plan how young person will have positive contact with mother.</p> <p>Outcome: Young person’s voice was heard and acted upon by the parents, family members and CSC. Young person has returned to father’s care which is supported and monitored by the wider family. Young person is now having positive contact with mother which is also monitored by the family.</p>	£1,813.24

<p>Family C: Child 1 – pre-school age. Child 2 & 3 – primary school age.</p> <p>Status: Section 20</p> <p>Wider family were not aware of CSC’s involvement until children were placed in Foster Care. Parents did not want wider family to be involved initially due to worries that they may be judged and family conflict. FGC process enabled the parents and wider family to work together to focus on the children, resolve the family conflict, and parallel plan.</p> <p>Outcome: The children returned to parents’ care with the support from the wider family network. A contingency plan also made to ensure that if ever in the future there are difficulties the children will live with family member/s short or long-term and will not become Looked After by the Local Authority.</p>	<p>£4,616.37</p>
<p>Family D: Child 1, 2 & 3 – pre-school age. Child 4 - primary school age.</p> <p>Status: Care Proceedings</p> <p>Children were Police Protected and placed in Foster Care as wider family were not know. FGC enabled parents to work with CSC and with the support of the wider family address the concerns and make and maintain changes.</p> <p>Outcome: Following positive assessments of parents and family safety plan, the children returned to parents’ care. Positive assessments also undertaken for wider family to ensure the children will be cared for by family if there are difficulties in the future.</p>	<p>£6,039.61</p>
<p>Family E: Child 1 – secondary school age.</p> <p>Status: Child Looked After – Rehabilitate Home</p> <p>At the time of young person becoming Looked After by the Local Authority, father was not aware of the situation. FGC enabled father and wider family to work with the Local Authority to identify a plan of emotional and practical support to ensure that father is able to meet the young person’s needs long term.</p> <p>Outcome: The young person’s views and wishes heard by parent/s, wider family and CSC and plan made to take this into account. Following positive assessment for parent, young person is now living with parent. Wider family have also been assessed to ensure if there are any difficulties in the future, young person will live with a family member and not come into Local Authority Care.</p>	<p>£1,670.24</p>
<p>Family F: Child 1 – pre-school age. Child 2 – primary school age.</p>	

Status: Care Proceedings	£3,054.47
Due to ongoing concerns children were placed with family members whilst parenting assessments took place. FGC enabled parents to parallel plan with the family carer/s and wider family to make and maintain changes and demonstrate that they can meet their children's needs.	
Outcome: Following assessment, the Court decision is for children to remain with family carers long term. FGC enabled parents to rebuild their relationship with family and agree positive contact between the parents and children which is supervised by the wider family.	

*Savings/costs based on information provided from Finance/CPS Payments for the FGC Annual Report.

The total approximate Foster Care cost for 6 months if children had remained accommodated would have been £130,445.82. It is not possible to give exact figures for these children as pathways vary, for example the permanency plan for younger children would normally be adoption.

The FGC Service demonstrated its effectiveness and value for money through the provision of sources of support identified through the Family Plans as an alternative to Local Authority resources. Not only is this a saving to the Local Authority and importantly, best outcomes are achieved wherever possible for the child through them being placed with their birth families.

5. Participation of children in FGCs and their views and wishes

The FGC Coordinator is the advocate for the child, supports them throughout the process and is committed to ensuring their views are heard at the FGC by family and CSC.

Children/young people are central to the decision-making process and will always be involved in the FGC conference process. A child may not attend due to their young age or capacity, or where parents are not in agreement for them to be in attendance, in which case the Co-ordinator will share their views and wishes and ensure that they are recorded in the plan.

We see a shift in family thinking and planning when children's voices are heard; at times adults do not realise the impact their actions are having on their children. Children are open and honest and will say it as it is.

Feedback from children consistently shows that they feel they have been listened to by the family and Social Worker.

The FGC Service places critical importance on gaining, learning from, and acting on feedback from service users. Families and young people complete the evaluation forms at the end of the initial FGC conference. Referrers and agencies also complete evaluation forms on the day of the conference.

Family members and agencies who engaged in the process were very positive about the FGC process and responded as follows to the questions on the evaluation form:

6. Quality Assurance and Service User Feedback

Family/Friends/Young Person's Evaluation Forms

Q1. What do you think of the plan the family has made?

- 95% said Very Good/Good
- 3% said OK

Q2. How helpful do you think the Family Conference has been?

- 98.5% said Very Good/Good

Q3. Did you have enough information from the following people (CSC/Agencies) to make good decisions?

- 92% said Very Good/Good
- 3% said OK

Quotes from family and friends about the process and FGC Co-ordinator:

- Getting together as a family and putting all our ideas across on neutral ground went well, as well as showing how well we all work together as a family and how supportive we all are for our children.
- A nice mutual way to reach an agreement and to start my co-parenting relationship. I'm pleased and feel my thoughts and feeling were heard. I was given enough information to explore my options and make decisions.
- The whole meeting went very well. The co-ordinator was very kind and made me feel comfortable and safe enough to attend the meeting. Awesome mediator through the whole meeting and helped me a lot with preparing me for the meeting and lending me the strength to be strong enough to complete the meeting.
- I feel positive after this meeting and finally feel supported by my family.
- The plan we have made is as best as we can make it. We will stick to it as we are all supportive of one another. We will do this to get my family back together. The co-ordinator was a great support for me, and I found it easy to talk to the co-ordinator.
- We were all in agreement to the plan and it all went well which has been made with the co-ordinator's support to me and my family.

- It was good how everyone has come together and made an exceptional effort to put this plan together to make sure our child is safe and well.
- The process was very well explained in advance of the FGC. The co-ordinator kept me informed and was a great support during the meeting. It was very much appreciated that the conference was scheduled outside of normal working hours.

Referrers/Agencies Evaluation Forms

Q1. Did you think the FGC was useful?

- 97% said Very Good/Good
- 3% said OK

Q2. Do you think the plan made addressed the concerns and was specific/smart/clear?

- 100% said Very Good/Good

Q3. Did the FGC Co-ordinator fully prep family for the FGC?

- 97% said Very Good/Good
- 3% said OK

Q4. Did the family understand the FGC process?

- 100% said Very Good/Good

Q5. Was the family supported during Private Family Time adequately?

- 97% said Very Good/Good
- 3% said OK

Q6. Were the guidelines/support for writing a FGC report useful?

- 100% said Very Good/Good

Quotes from referrers and agencies included:

- The co-ordinator had involved the children, the voice of the children was clear to the family involved. It is extremely beneficial to the plan and for the family to hear what the children are saying to the independent co-ordinator, which has helped make the plan more effective."
- The co-ordinator worked hard to identify and get a support network around this family. It was really important given we are in PLO that this FGC took place, despite parents' lack of engagement, the co-ordinator managed to engage them and bring a support network around them to enable them to make a safety plan.

- This was a really useful and effective meeting; the family came together and were supportive of one another. The co-ordinator noticed that there may be conflict and worked hard to support the family to ensure it was a constructive meeting.
- Having the FGC in person is far better in comparison to online.
- It was clear from the child's views that the co-ordinator had effectively engaged with the child to gain their views and had ensured to do this in a child centred way.
- The FGC Service is invaluable to families and professionals. It takes time to get to know family dynamic and how they work in order to support them to have a successful conference and create child/family focused plans.
- The meeting was very helpful, everybody had time to reflect and answer the questions and contribute to a safety plan. Family worked well together and discussed their worries and things that they consider need to happen to ensure all children stay safe within the family environment.
- The family have produced a robust FGC plan with the support of the co-ordinator. FGC plan also gave me other options to consider in terms of the baby's care plan once born.
- The co-ordinator has worked tirelessly to facilitate this FGC which had many challenges, changes of date and we had to then do separate meetings for the maternal and paternal families due to legal restrictions.

7. Summary and Development

FGC Services contributed significantly to the MK Family Support approach and Signs of Safety practice model. They provide a cost effective and family focused means to reduce the need for looked after children, court proceedings and child protection plans and the concomitant costs (financial and staff time).

FGCs have provided a structure for families to help ensure that even during the Corona Virus crisis, parents got sufficient help and support from family, community and public services to be able to manage during the crisis. Co-ordinators have been creative in the way they have worked with families and children to ensure that virtual FGCs have taken place including those for the most vulnerable families. The fundamentals and principles of an FGC have not changed.

Face-to-face contact continues to be the key part of building relationships with children/young people, parents and family members that make FGCs a success. It is vital that families have the opportunity to come together in a neutral environment to have open and honest discussion to make safe plans for their children.

8. Areas for Development 2022-23

- A. To secure a neutral base for the Family Group Conference Service:
- Where there is office space for the team and co-ordinators to work during the day and out of hours
 - Rooms are available to meet families, young people to prepare them for the FGCs if they cannot be visited in their family home or they are homeless;
 - Where rooms are available for FGCs to take place during the working day and out of hours.
- B. To continue working with operational Heads of Services and Team Managers to ensure that referrals are made before they become urgent and ensure wider family networks are explored possibly before PLO/Care Proceedings process.
- C. To develop the FGC service to accommodate the demand for CIN preventative work, leaving care and to enable the reallocation of statutory intervention costs to support these priorities and to optimise outcomes for our children and families.
- D. Continue to recruit, train and retain a bank of independent FGC Co-ordinators who have skills to empower families, ensure children/young people's voices are heard and are they are able to engage families with complex difficulties.