

# Family Group Conference Service

**Annual Report 2022-23**

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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:

- As part of PLO.
- As part of Care Proceedings.
- 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.
- Children with Disabilities - 2 requests for care package to be increased within 6 months.
- To rehabilitate a Looked After Child to their parents' care – step down from care.
- To rehabilitate a Looked After Child to their extended family's care – step down from care.
- 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 2022 to 31 March 2023. 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.

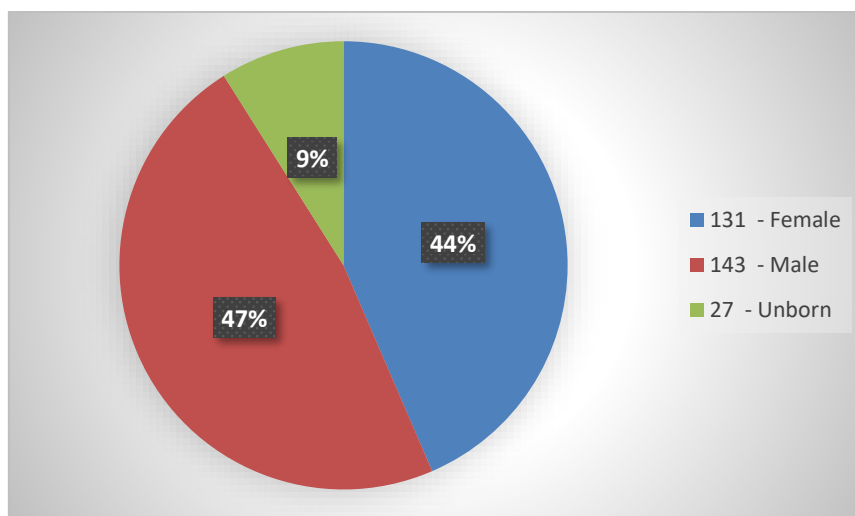
During the Coronavirus outbreak the FGC Service focused on how to support family-led decision making during the crisis when face-to-face physical meetings were the exception not the rule. It was vital for the service to adapt to the new way of working during the crisis to work in partnership with families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

## 2. Performance data

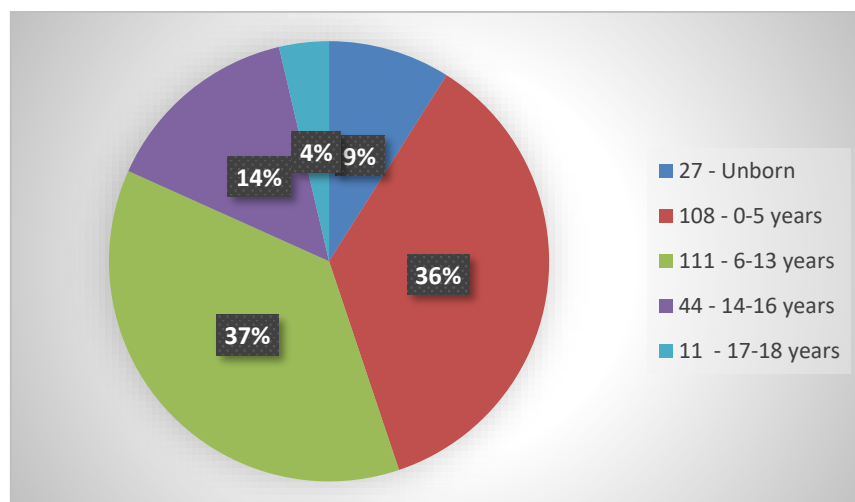
During the period 2022/23 the FGC Service received 150 referrals from CSC (compared to 179 last year) for 301 children. 128 FGC's have taken place which includes 23 virtual (video conferencing) FGC's.

The conversion rate from referral to initial FGC for these referrals was 74% (111 initial conferences). There is not a national conversation rate; however, Family Rights Group (FRG) confirmed that the average is about 75%.

**Figure 1: Breakdown of 301 children subject to FGC by gender:**



**Figure 2: Age Ranges for the 301 children:**



**Figure 3: Ethnicity of the 301 children:**

<b>Ethnicity</b>	<b>No of Children</b>
A1 White British	207
A2 White Irish	2
A3 Any other White background	4
B1 White & Black Caribbean	11
B2 White & Black African	7
B3 White & Asian	1
B4 Any other mixed background	14
C1 Indian	1
C2 Pakistani	1
C4 Any other Asian background	5
D1 Black Caribbean	1
D2 Black African	20
D3 Any other black background	9
E2 Any other ethnic group	5
E4 Information not yet obtained	13
<b>Total</b>	<b>301</b>

The majority of the children referred were White British – 69% (207 children).

For the 150 Referrals received for this period:

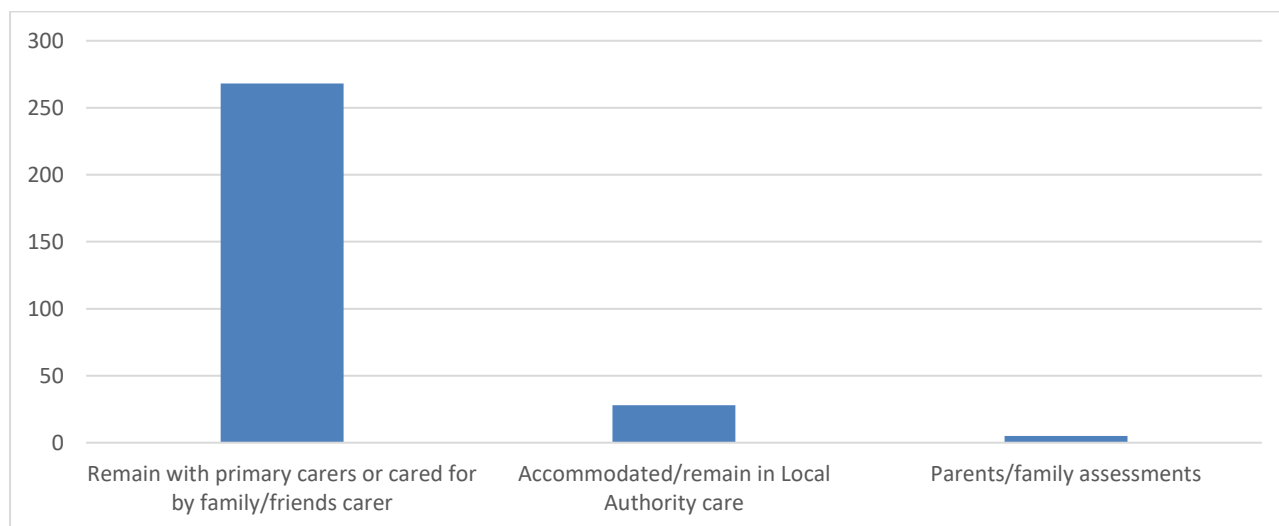
- 116 Initial and Review/Second FGCs took place for the 150 families.
- 670 Family/Friends attended.  
Co-ordinators aim to visit all family/friends invited to attend. If family/friends are unable to attend, the Co-ordinator will get their contribution and share this with the family at the conference and include it in the plan.
- 91 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.
- 121 Referrers/Agencies attended as Information Givers for the 116 Conferences.

### **3. Outcome data**

Outcomes for referrals for the period 2022/23:

- 150 Referrals received for 301 Children which includes referrals for 27 Unborn Babies.
- 111 Referrals had an initial FGC (74%).

- 39 Referrals had 'NO' FGC (26%). 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.
- 61 children from the 39 referrals were living with parent/family carers at closure of referral.



- 268 (89%) Children/Babies from the 301 children remained with their primary carers or are cared for by family/friend's carers. For the 27 Unborn Babies, 18 Babies remained with parent/s or with family carers. 9 were accommodated by the Local Authority.
- 28 (9%) Children from the 301 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.
- 5 (2%) Children – Parents/Family Assessments are currently being undertaken. Final decisions will be made by Court.

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 2022-23 that 268 (89%) children/young people 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.

FGC Service is also represented at PLO panel and Resources Panel by the FGC Manager.

## **Case Studies and Foster Care Costs 2022-23**

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 £35,000 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 (2022/23): prevention of care	Monthly foster care costs*
<p>Family A: Child 1 – secondary school age</p> <p>Status at FGC: LAC Panel Referral / PLO (Public Law Outline)</p> <p>Due to safeguarding concerns and young person going missing the case had escalated to PLO at time of receiving FGC referral. Both parents came together with their family/friend’s network and listened to their child’s views and wishes and made a safety/FGC plan.</p> <p>Outcome: A very effective plan which enabled parents to work with their child with the support of wider family. Young person’s voice was very powerful. Young person returned home to parent’s care. Plan is monitored by both parents and the wider family.</p>	£1,833.00
<p>Family B: Child 1 – primary school age &amp; Child 2 &amp; Child 3 – secondary school age</p> <p>Status: Child Looked After – Rehabilitate Home</p> <p>Parent addressed CSC’s concerns and following assessments, CSC’s care plan was for all 3 children to return to parent’s care. Parents and family heard the children’s voices and understood the impact that conflict is having on the children as well as on them.</p> <p>Outcome: Children are in parent’s care with support from the other parent and wider family with robust plan in place. Parents communication is now positive and any issues between them are being resolved without involving the children. CSC are closing case.</p>	£5,377.67
<p>Family C: Child 1 &amp; Child 2 – primary school age</p> <p>Status: Care Proceedings</p> <p>At start of FGC process parents were not communicating with wider family and not working with the agencies. Parents worked with the independent/impartial FGC Co-ordinator to parallel plan and identify the resources and support from within their family. Family made a clear contingency plan and were very clear that the children</p>	£3,423.34

<p>will not come into the Local Authority's care as they have the resources to care for them.</p> <p>Outcome: Children living with family carer/s under a Special Guardianship Order (SGO) with support from the wider family. Family are supporting parents to have supervised family time with their children.</p>	
<p>Family D: Child 1 – pre-school age and Child 2 – primary school age</p> <p>Status: Care Proceedings</p> <p>High level of conflict within the family which was impacting on the children. The family came together and focused on the needs of the children and how x1 parent will engage with FDAC (Family Drug &amp; Alcohol Court) and ARC (Addiction Recovery Community) to address their addictions.</p> <p>Outcome: x2 children living with family member on an SGO, x1 child living with parent (Child Arrangement Order). FGC plan addressed support for parents/carers, how contact between the siblings will take place and how parent will have supervised family time with the children following Care Proceedings.</p>	£5,178.34
<p>Family E: Child 1 – secondary school age</p> <p>Status: CLA – Rehabilitate Home</p> <p>Breakdown in SGO placement. Young person was initially placed in Foster Care. FGC took place to identify who in the family could offer long term care.</p> <p>Outcome: Following positive parenting assessment, young person was placed with parent. Family identified emotional, practical and financial support to enable and empower parent to meet their child's needs and care for him safely long term. CSC will be closing the case.</p>	£1,833.00
<p>Total Approximate Foster Care Costs for 6 months if children remained accommodated</p>	£105,872.10

\*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 £105,872.10. 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?**

- 99% said Very Good/Good
- 1% said OK

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

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

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

- 95.5% said Very Good/Good
- 4% said OK

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

- Families point of view and opinions were taken into consideration. We were listened to by the Social Worker, who also identified resources to support our plan.
- My mum, family and the Social Worker listened to what I said and included me in my conference.
- This meeting has been a turning point for me and the family and I'm so glad we did it. I feel we can now make the changes that we need to make with my family by my side.
- Really happy with the family conference service and the outcome, my family will support me to care for my children.
- The Co-ordinator running the meeting acted professionally as a neutral middleperson and didn't influence any negativity within the meeting. We were professionally and positively supported and reassured through the process.
- The Co-ordinator visiting each family member prior to the meeting helped us to prepare for the conference and gave us time to come to the meeting with ideas of what support we can offer.
- The co-ordinator supported us through this difficult process. The conference went well, and we made a strong plan that we presented to the Social Worker.
- Now that the family have met each other face-to-face, we have built a relationship and will continue to work together.

### **Referrers/Agencies Evaluation Forms**

#### **Q1. Did you think the FGC was useful?**

- 100% said Very Good/Good

#### **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?**

- 100% said Very Good/Good

#### **Q4. Did the family understand the FGC process?**

- 100% said Very Good/Good

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

- 100% said Very Good/Good

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

- 98% said Very Good/Good
- 2% said OK

**Quotes from referrers and agencies included:**

- The process was supportive and thorough, identifying the family network who can support the parents with the safety plan.
- I feel the FGC was held professionally, family were all aware of the concerns, the co-ordinator had a good understanding of family dynamics and understood the urgency of the FGC.
- A well-planned meeting, that has been helpful and beneficial to the family in the short and long term.
- The co-ordinator's knowledge, expertise and experience was evident in their ability to support the family to address the Local Authority's concerns.
- The meeting was co-ordinated in a way that the family were able to come up with a smart plan. Everything was clear and to a point. The co-ordinator fully supported the family from the onset.

## **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 2023-24

- A. To secure a neutral base for the Family Group Conference Service:
- 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;
  - Where there is office space for the team and co-ordinators to work during the 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 and assessed at the start of the PLO process to prevent delays during Care Proceedings.
- C. To develop the FGC service to accommodate the demand for CIN preventative work, leaving care, Life Long Links work, Adoption Connect, and to enable the reallocation of statutory intervention costs to support these priorities and to optimise outcomes for our children and families.
- D. To continue to recruit, train and retain a bank of independent FGC Co-ordinators who have the skills to empower families, ensure children/young people's voices are heard and they are able to effectively engage families with complex difficulties and/or complex family dynamics.