

Family Group Conference Service

Annual Report 2023-24

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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 Relief FGC Co-ordinators (variable hours) who are specially recruited and trained.

This report covers the period 1 April 2023 to 31 March 2024. 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.

2. Performance Data

During the period 2023/24 the FGC Service received 157 referrals from Children's Social Care (compared to 150 last year) for 332 children. 114 FGC's have taken place which includes 17 virtual (video conferencing) FGC's.

The conversion rate from referral to initial FGC for these referrals was 71% (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 332 children subject to FGC by gender:

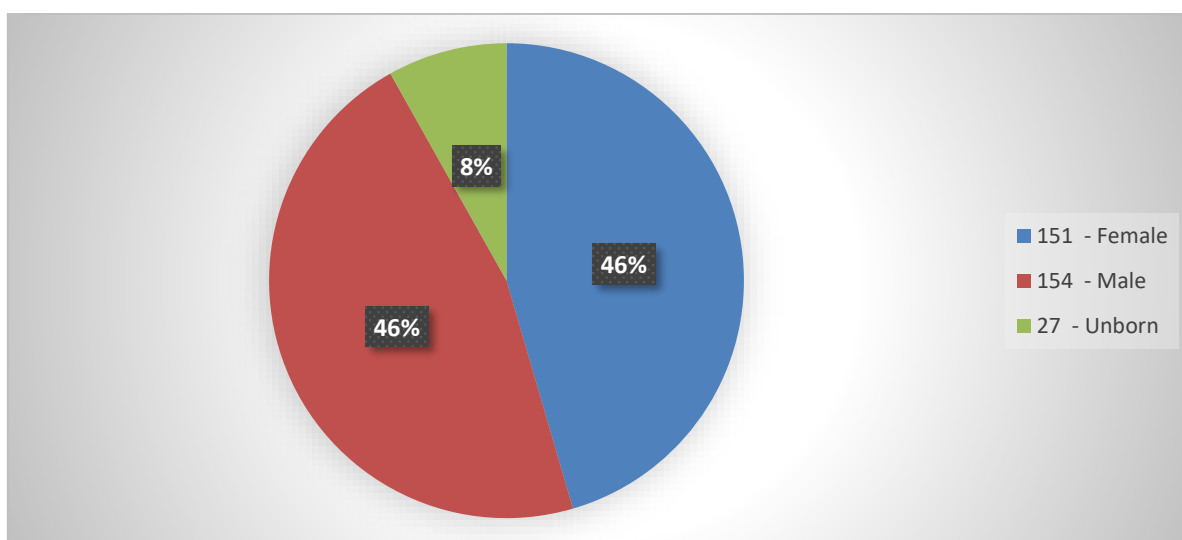


Figure 2: Age Ranges for the 332 children:

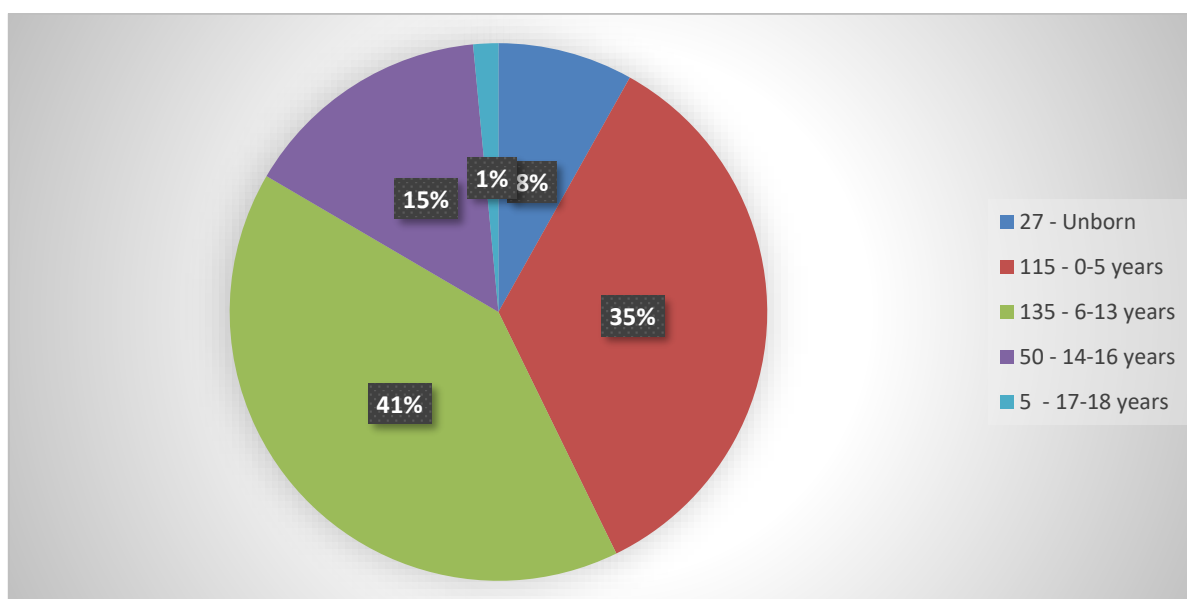


Figure 3: Ethnicity of the 332 children:

Ethnicity	No of Children
White British	215
Any other White background	12
White & Black Caribbean	21
White & Black African	3
White & Asian	7
Any other mixed background	22
Indian	2
Pakistani	11
Bangladeshi	4
Any other Asian background	4
Black Caribbean	7
Black African	9
Any other black background	1
Any other ethnic group	3
Information not yet obtained	11
Total	332

The majority of the children referred were White British – 65% (215 children).

For the 157 Referrals received for this period:

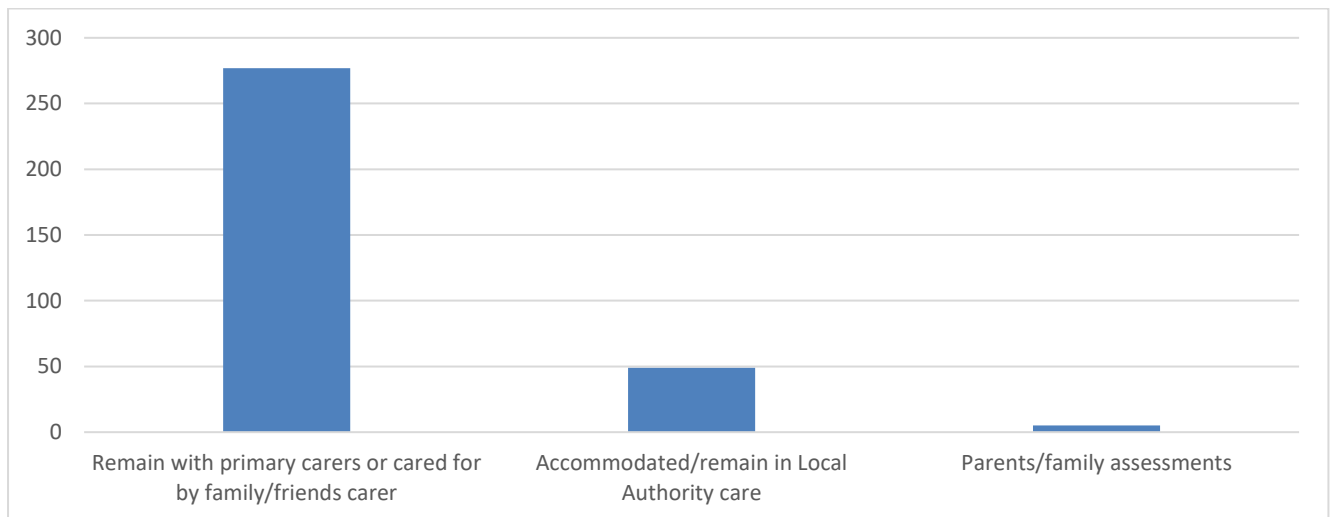
- 126 Initial and Review/Second FGCs took place for the 157 families.
- 686 Family/Friends attended.
Co-ordinators aim to visit all family/friends invited to attend. If family/friends are unable to attend, the Co-ordinator will get their contribution and share this with the family at the conference and include it in the plan.
- 70 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.
- 128 Referrers/Agencies attended as Information Givers for the 126 Conferences.

3. Outcome Data

Outcomes for referrals for the period 2023/24:

- 157 Referrals received for 332 Children which includes referrals for 27 Unborn Babies.
- 111 Referrals had an initial FGC (71%).

- 46 Referrals had 'NO' FGC (29%). 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 Children's Social Care.
- 62 children from the 46 referrals were living with parent/family carers at closure of referral.



- 277 (83%) Children/Babies from the 332 children remained with their primary carers or are cared for by family/friend's carers. For the 27 Unborn Babies, 16 Babies remained with parent/s or with family carers. 11 were accommodated by the Local Authority.
- 49 (15%) 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.
- 6 (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 2023-24 that 277 (83%) 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 City 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 Resources and PLO panel by the FGC Manager. Recommendations are made for family/friends' networks to be explored to reduce resources from other agencies and also to explore family/friends carer/s as an alternative if children are at risk of becoming LAC.

Case Studies and Foster Care Costs 2023-24

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 £36,000 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 (2023/24): prevention of care	Monthly foster care costs*
<p>Family A: Child 1 primary school age, Child 2 secondary school age and Child 3 nursery</p> <p>Status at FGC: Child Protection and at risk of escalating to Public Law Outline</p> <p>Parents used the FGC process to enable the wider family to support them emotionally and practically to address the concerns which included support with school runs, respite support, support for mother when she is struggling with her well-being and for the family to support father to have somewhere neutral and safe for him to have contact with his children.</p> <p>Outcome: A robust safety family plan of support made which prevented this case from escalating to PLO (Public Law Outline) as the Child Protection Plan concerns were addressed. Parents and family focused on the needs of the children and continued working together with the support of the Social Worker to review the plan following the FGC. The case closed to CSC.</p>	£5338.67
<p>Family B: Child 1 primary school age and Child 2 & 3 secondary school age</p> <p>Status: Care Proceedings</p> <p>Due to the ongoing concerns the children were removed from mother's care and placed with fathers and family member. Family members worked with mother to support her to address the concerns.</p> <p>Outcome: This was a complex case to manage due to the concerns and conflict between parents and wider family. The FGC process empowered and enabled the family to look at solutions and identify the best outcomes for the children. One child remained in family members care and x2 with children remained with their respective fathers following successful assessments. Family made a plan of support for the children, carers and also plan of support for mother to address CSC's concerns. Family also made a contact plan to ensure the siblings continue to have regular and</p>	£5377.67

<p>consistent contact with each other, their parents and wider maternal and paternal family members.</p>	
<p>Family C: Child 1 primary school age, Child 2, 3, & 4 secondary school age and Child 5 nursery</p> <p>Status: Care Proceedings</p> <p>Following a serious incident the children were put under Police Protection and placed with a family member who cared for the children during Care Proceedings. Separate maternal and paternal FGCs took place due to the level of conflict between the families and Court Orders preventing family members having contact with each other.</p> <p>Outcome: CSC's Care Plan was for the children to be cared by family member on a Special Guardianship Order (SGO). Plan of support offered by maternal and paternal family for family carer to meet the needs of the children and identified how the carer with the support of the wider family will manage/supervise contact between the children and their parents.</p>	<p>£8944.67</p>
<p>Family D: Child 1 primary school age and Child 2 secondary school age</p> <p>Status: Care Proceedings / Rehabilitate to Parents' Care</p> <p>Mother was struggling to care for the children and older child was placed in Foster Care. Mother did not want family to be involved as she did not want them to know about CSCs involvement. We worked sensitively, as we do with all families to support mother and father to involve the family/friends network and not be judgemental.</p> <p>Outcome: Children are in mother's care and older child rehabilitated to her care. Parents identified how they will co-parent the children with the support of the wider family. Children's views were gained and shared at the conference – these were very powerful. Family agreed emotional and practical support for both parents and for the children to ensure that they work closely together and are able to support the parents to meet the children's needs.</p>	<p>£3544.67</p>
<p>Family E: Child 1 & 2 primary school age</p> <p>Status: Care Proceeding</p> <p>Referral was for Unborn and x2 children. FGCs were in 2 parts (maternal and paternal) due to level of conflict, but a maternal family member attended both conferences to enable the family to start working together and to ensure the plan enables the parents to meet all of the children's needs.</p> <p>Outcome: Children are in mother's care. The family are supporting her to work with the father to co-parent the children, and emotional and practical support is being</p>	<p>£3423.34</p>

offered for both mother and father. Family communication has improved and there is a clear contingency plan of who will care for the children should there be concerns about the children's care in the future.	
<p>Family F: Child 1 nursery age</p> <p>Status: Care Proceedings</p> <p>Mother was living with maternal family members who were supporting her to care for her child, CSC had concerns about mother and family member/s.</p> <p>Outcome: The wider family worker participated in the FGC and supported mother to positively engage with FDAC (Family Drug & Alcohol Court) and ARC (Addiction Recovery Community) to address the concerns. CSC saw positive changes and supported mother to return to her own home. Family agreed to monitor and review the plan with the support of the Social Worker.</p>	£1633.67
Total Approximate Foster Care Costs for 6 months if children remained/were accommodated	£169,576.14

*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 **£169,576.14**. 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 Children's Social Care.

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?

- 90% said Very Good/Good
- 7% said OK

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

- 90% said Very Good/Good
- 8% said OK

Q3. Did you have enough information from the following people (Children's Social Care/Agencies) to make good decisions?

- 87% said Very Good/Good
- 10% said OK

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

- The FGC was extremely helpful, and I think an important part of our journey. I think we've made a really good plan, it's definitely workable.
- The conference went very well, I thought there was a positive response from everyone involved.
- This has given me great reassurance and I've seen so much support for me and my children.
- It went well because of good organisation - putting us at ease - focussed questions made writing the plan easy.
- The FGC Co-ordinator was very approachable and down to earth. Very supportive through this process.

Referrers/Agencies Evaluation Forms

Q1. Did you think the FGC was useful?

- 97% said Very Good/Good

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

- 95% 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?

- 98% 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?

- 100% said Very Good/Good

Quotes from referrers and agencies included:

- It was very organised, considered child's views, wishes and feelings. Very child central approach.
- It is a brilliant idea for family members to come together and commit the support the children and parents need.
- Family worked together in an open manner, and they agreed to ensure they follow through the agreed plan, to support the children to remain with their parents and continue to thrive.
- The Co-ordinator was very understanding towards the family's needs, accommodating and made the FGC happen quickly to ensure that we comply with Court timescales.
- The FGC Co-ordinator was brilliant throughout and kept me up to date throughout the process. Flexible and adaptable to meet the children and family's needs.

7. Summary and Development

FGC Services contributed significantly to the Local Authority's Child First 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 savings to the Local Authority (financial and staff time).

'Any Local Authority looking after a child shall make arrangements to enable that child to live with a member of their family, relative, friend or other person connected with them, unless to do so would be impractical or inconsistent with the child's welfare – Children Act 1989 – Section 23 (6))'

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 2024-25

- A. To continue to recruit, train and retain a bank of Relief 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.
- B. To continue working with operational Heads of Services and Team Managers to ensure that referrals are made: at the early stages of their intervention; to prevent children from becoming LAC; and to ensure wider family networks are explored and assessed at the start of the PLO process to prevent delays during Care Proceedings.
- C. 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.
- D. To continue 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.

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