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Title: Concurrency: achieving early permanence for babies and

young children

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You are watching a webinar about the PACE programme from the delivery team in CELCIS, at the University of Strathclyde. PACE is a Quality Improvement programme aiming to reduce drift and delay in permanence planning for looked after children. These webinars were recorded in the spring of 2020, so please be aware that key changes in legislation, guidance and practice may have occurred since this time.



(PS) Welcome to our latest webinar. Today's topic is concurrency, and we'll be led by Linda Davidson, one of our permanence consultants in the PACE team, who also has a vast knowledge of working with children and families. So over to you, Linda.

(LD) Hello, everyone. Today the focus of our webinar is concurrency. In particular, looking at it as a model for achieving early permanence for babies and very young children under the age of two.

We know from our PACE programme, that it's not easy to achieve early permanence, even for very young children. There are lots of barriers in the system. There are lots of competing demands between a child and parents' needs. There's often a tendency to focus on a parent's rights rather than responsibilities and there's a legal rights issue. There's a huge amount of paperwork that social work in particular has to complete, which can result in us focusing on the process rather than the child's needs. There are lots of multi-agency demands as well. 'Concurrency' is perhaps an opportunity to stop and reflect on the needs of young children.



The primary focus of concurrency is to place a child under the age of two with dual approved foster carers, while the local authority pursues rehabilitation. That means approving prospective adopters as foster carers, which is relatively straightforward to do legally in Scotland.

Should the rehabilitation plan not be possible from the child's perspective, then the child would remain with their current carers. So the adults take the risks, so the child doesn't have to. We know through our PACE work that for the majority of children in Scotland, we follow a much more sequential approach; where we tend to in the first instance place very young children in a foster placement, after which they move at some stage and that can take a very long time; they often remain in a foster placement until they move to an adoptive placement. So almost all children in Scotland, no matter how young, have at least two moves.

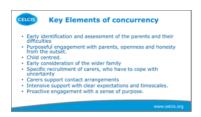
The aim of concurrency is to remove the emotional upheaval of moves and reduce the risks for very young children; particularly the emotional risk of having to move from birth parents into a care placement, and then a care placement into an adoptive placement.



The history to concurrency is that it began in 1994 with someone called Linda Katz in the United States. She looked at drift and daily for young children in the care system in America, and realised that a sequential model wasn't working. So she came up with the term 'concurrency' as a means of working intensively towards reunification with parents, while at the same time establishing an alternative permanent plan for the child should this not succeed.

The purpose of concurrency is to try and avoid delay for the child. But in each case, it's only to be used when the prognosis is poor. So in most instances, it's for children who are considered at quite significant risk in their birth families. It requires a defined assessment period; so it's not

"how long this might take", it's that we're going to make a decision within a timeframe that best meets the child's needs, and bringing parents on that journey. It also ensures earlier decision making at the completion of the assessment and reduces delay, particularly for infants.



The key elements of concurrency are: early identification; assessment of parents and their difficulties, which means in many cases, having a system of pre-birth planning in place. Concurrency is child-centred, it's taking a child developmental approach, by having purposeful engagement with parents, being open and honest from the outset, and keeping their child at the centre of decision making is really important. Purposeful engagement with parents means making sure that parents have legal representation, where they understand the key issues and the risks that are causing concern, that they are aware that the child is being fostered while the plan is rehabilitation, and that this will become their child's adoptive placement, should rehabilitation home not be possible.

The concurrency model requires those involved to consider the wider family much earlier in a child's journey. Kinship assessments take place earlier and certainly don't follow a sequential model. So if rehabilitation to the parents is not possible, an early discussion about "who else in your family might be able to become involved and support your child?" Concurrency means recruiting carers who have to cope with a level of uncertainty, about whether or not the child in their care will be able to remain with them, but also carers who are prepared to support contact arrangements, who have some empathy and an understanding of the parents' circumstances, and are willing to have reasonably extensive contact with the birth family. This model seems to have, (from CoramBAAF research), resulted in a lot of birth families feeling much more confident about their child's future, having made a relationship with the prospective adopters.

Concurrency requires intensive support and significant support for the birth parents to work towards rehabilitation, with clear expectations, timescales and contact in place. It's a very proactive process. It's following the child's need for security, stability and belonging as its paramount purpose, and everybody's is working towards that sense of purpose - carers, services, and birth families.



So why is it relevant in Scotland and why might we want to think about it now?

Babies and infants are the most vulnerable members of our society in Scotland. Homicide figures for Scotland show that you're at the greatest danger of being killed in the first 12 months of life than any other time.

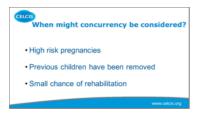
Young Children under two don't have a voice, they tend to be less visible to services, and they are disproportionately represented in serious case reviews. This slide shows that proportionally more Child Protection orders in Scotland are granted for very young children, reflecting their greater vulnerability and the requirement for immediate protection. Of the 619 children and young people with child protection order referrals in 2017-18, 25.7% were aged under 20 days old. The chart below shows that for the vast majority of those babies, the Child Protection Order was taken at birth. 50.4%, or just over half of all Child Protection orders in Scotland are taken for children under the age of two.

Concurrency is definitely about focusing on the most vulnerable children.



The SCRA and CLAS data 2017-18 shows that over the last 10 years, children in Scotland have started to be looked after at younger ages. There's also been a corresponding decrease in children 12 to 17 starting episodes of care.

In 2007 30% of looked after children were under five, by 2017 it had risen to 39%. I think the most important statistic is that of the underfives group, the under one year olds are the biggest group and have increased by 57% since 2007. In Scotland we have considerable policy and guidance on the importance of the early years, with too little focus on our youngest looked after children.



When might concurrency be considered? As I said earlier, we know most vulnerable children in Scotland before they are born and therefore the highest risk pregnancies are those where concurrency might be an option; particularly if previous children have been removed from a parent's care and the possibility of rehabilitation may be small but the risks great.

We know that many children experience a number of placement moves and by considering concurrency for the children where adoption is considered likely, concurrency is a model to protect them from birth.



So can we make it work in Scotland? Well it's a bit frustrating that we're actually behind England in terms of considering concurrency as a model. In England, CoramBAAF have been involved in the concurrency model for some time, and support a number of English local authorities, where they follow the model of concurrency very carefully.

As a result of this intensive service in England, 'Foster to Adopt' legislation became an Act of Parliament in 2013. The foster to adopt legislation requires courts to consider a child being placed on a foster to adopt basis, in all cases where it is unlikely an infant can return safely to a parent or family member; when the risks are high and the parents have significant issues that might prevent them being able to safely parent the child. The foster to adopt legislation allows children to be placed on a fostering basis with a view to adoption, should rehabilitation be ruled out. It's similar to concurrency, but doesn't require the same intensive input as the formal concurrency model.

Evidence for a child to be looked after away from home has to be substantial and it requires us to consider significant harm. In some instances where parents have had other children placed for adoption, and their circumstances have not changed, the birth of the new child is an opportunity to protect the child from the very start of their journey.

Structured pre-birth support and assessments would help to both identify those children that might benefit and enable an earlier decision about rehabilitation.

In Scotland, the only concurrency model in place is <u>between St Andrew's Children's Society and West Lothian Council</u>; where West Lothian Council agreed to support and place children with concurrent carers and St Andrew's Children's Society agreed to recruit at least three concurrent carers per year. It has not been without its difficulties, because retaining placements can prove difficult, but for those children where the concurrency model has been used, the outcomes have been very positive.

In relation to the CoramBAAF research, of the 57 children they studied in 2016, none of the children experienced a breakdown of placement; including those that returned home; which was successful for a small number of children. Adoption was also more stable for these children and they benefits from the consistency of care concurrency provided.



I've added some useful reading, for anyone interested.

Not many people in Scotland may be aware of the fostering to adopt guidance, which is attached.

I've also attached Harriet Ward's "<u>Infants suffering or likely to suffer significant harm</u>"; in fact Harriet Ward has written extensively about infants and outcomes for infants in England.

"Concurrent Planning - A good practice Guide" (2013) by CoramBAAF is a very thorough document describing concurrent planning and how to set up a concurrent planning model.

Carol Wassell, who worked for CELCIS, has also made a <u>Case for Concurrency Planning</u>, which is the last link on the slide [also linked at the end of the document].

Thank you very much for listening.

(PS) Linda, we have a couple of questions to put to you. The focus has been on concurrency for babies and young children. Can it also be used for older children?

- **(LD)** It could be and I don't think, to be honest, that it's been tested. But for older children, for whom a foster placement might be likely to become an adoptive placement, I think the concurrency model could work equally well. I do think their model of bringing foster carers and birth parents into closer connection in the support of the child, has been a good thing.
- **(PS)** Thank you. We have one second question just to conclude. We quite often hear the phrase pre-empting in our work, what would you say if people felt this approach was pre-empting any later decision on permanence for a child?
- **(LD)** Pre-emption doesn't exist as a legal term. There has been a lot of concern in England, that decisions are being made for the child at the time that concurrent planning starts and that this is, in some ways, ruling out rehabilitation. There are some examples of very good rehabilitation work undertaken, but because concurrent planning is looking primarily at the children that are at greatest risk of returning home, the legal teams in England, (both children's guardians and magistrates), have accepted that having steps in place to protect these children, (albeit before a legal decision is actually made), is worth doing, and that in many instances, it's making sure the child is safe, while at the same time the parents have an opportunity to work with services to try and improve their circumstances and change sufficiently to have their child returned to their care.

It would be fair to say concurrency has its critics and I think Coram and others have had to defend their practice, however having foster to adopt legislation in place in England has been a big move, because it means there's now legislation in place to ensure the best outcome for the child, as early as possible; rather than our sequential approach where we wait until all family are ruled out before considering adoption.

(PS) Linda, thank you for your time. And thank you everyone for listening, and we'll draw to a close there.

(LD) Thank you.

Linked resources

CELCIS Knowledge Bank:

https://www.celcis.org/knowledge-bank/

Independent Care Review and the Promise:

https://www.carereview.scot/

CoramBAAF:

https://corambaaf.org.uk/

Guide: Concurrent Planning: Achieving early permanence for babies and

young children:

https://corambaaf.org.uk/books/concurrent-planning

Fostering and Adoption Guidance:

www.coram.org.uk/Fostering-for-adoption-guidance

Scottish Children's Reporter Administration:

https://www.scra.gov.uk/

St Andrew's Children's Society:

https://sacsadopt.scot/

Blog: Stephen Small, St Andrew's Children's Society:

https://www.celcis.org/knowledge-bank/search-bank/blog/2019/11/considered-timely-decision-making-vital-children/

Report: Case for Concurrency Planning:

https://www.celcis.org/knowledge-bank/search-bank/case-concurrency-planning/

Research brief: Infants suffering, or likely to suffer, significant harm: A prospective longitudinal study; Harriet Ward, Rebecca Brown, David Westlake and Emily R. Munro; October 2010:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/182461/DFE-RB053.pdf