





Final Report for Evaluation of Fostering Wellbeing Programme 2019

Dr Alyson Rees, Dr Nina Maxwell, Dr Jillian Grey, Dr Cindy Corliss, Anya Barton, Dr Asma Khan, Dr Chloe O'Donnell, & Dr Victoria Silverwood

Contact

Dr Alyson Rees
Assistant Director of Cascade Research centre,
Senior lecturer at Cardiff University
029-20875261,
ReesA1@Cardiff.ac.uk

Acknowledgements

We want to thank the local authorities of Rhondda Cynon Taf and Merthyr, their foster carers, schools, teachers, social workers and senior local authority staff. Most of all, we are particularly grateful to the young people who were interviewed and who contributed their views on how we can improve the wellbeing of young people looked after in the future. Comments on a draft of this report were received from the Fostering Network. The Fostering Network has funded this evaluation but the views expressed are those of the authors and not necessarily those of the Fostering Network.

Contents

Terminology	6
Executive Summary	7
The Fostering Wellbeing Programme	10
Aims	10
Background	11
The Fostering Wellbeing Programme	13
Fostering Wellbeing Evaluation	15
Method	17
Review of existing literature	17
Observational data	17
Survey data	18
Semi-structured telephone interviews	19
Children's perspective	19
Case study	20
Focus group	20
Key stakeholder interviews	21
Analysis	22
Limitations of the study	23
Literature Review	24
Needs of children looked after	24
Children looked after children and their subjective wellbeing	24
Children looked after and education	25
Training and support of foster carers	26
Findings	28
Current context	28
Motivations and expectations of the masterclasses	28
Professional Relationships	30

Children's perspectives	32
Mia	32
Marcus	35
Nadia	37
Peter	38
Summary of child's perspectives	39
Question One - Examine the Fostering Wellbeing programme to assess whether the key elements are being delivered to a satisfactory standard	40
Masterclass organisation	40
Masterclass delivery	41
Benefits of joint training	43
Perceptions of the Masterclasses	45
Learning from the Masterclasses	46
Networking	47
Changes to practice	48
Education	49
Perceptions of other professionals brought about by masterclasses	50
Summary	51
Fostering Wellbeing Pioneers	52
Context and Background of Pioneers	52
Motivation to support other foster carers	52
Training	53
Pioneer Role	53
Summary	55
Structural and Cultural Change	56
Question two - Determine whether Fostering Wellbeing has led to greater engagement between foster carers, education and social care	59
Case Study	
Team around the child	

School	64
Health	65
Conclusion	66
Question three - Assess levels of service engagement with the programme and future	
sustainability with the programme	67
Conclusion	69
References	73
Appendix 1 Delivery elements	78
Appendix 2 Action plan	79
Sustainability with the programme	87
Appendix 4 Co-professional survey results	92
Appendix 5 Additional Pioneer training outline	95
List of Figures	
Figure 1 Ten Principles	13
Figure 3 Masterclasses	14
Figure 2 Fostering Wellbeing Masterclasses Error! Bookmark not de	fined.
Figure 4 Logic Model	16
Figure 5 Table of interview participants	21
List of Tables	
Table 1 Cohorts 1-4 co-professional attendance	59
Table 2 Cohorts 1-4 foster carer attendance	59

Terminology

Children looked-after – The definition of children looked-after (children in care) is as in the Children Act 1989. A child is looked after by a local authority if a court has granted a care order to place a child in care, or a local authority's children's services department has cared for the child for more than 24 hours. The Local Authority can have either full or shared parental responsibility.

Children in public care are placed with foster carers, in residential homes or with parents or other relatives (under certain circumstances).

Wellbeing – We use the Fostering Network's definition which refers to the five basic needs: social, physical, emotional, cultural and learning.

Executive Summary

Fostering Wellbeing is a pilot initiative devised by The Fostering Network that has been trialled in Cwm Taf, Wales drawing on elements of the Head, Heart and Hands programme (McDermid et al., 2016) and London Fostering Achievement model (Sebba et al., 2016) and set in a Welsh context. Fostering Wellbeing encompasses three strands of work:

- i. A set of five themed masterclasses delivered to multi-disciplinary members working in the team around the child (social work, health, education, youth justice).
- ii. The development of the Pioneer foster carer role to provide training, operate a telephone helpline and run support groups for foster carers, based within the local authority fostering team offices.
- iii. Service support and action plan.

The pilot programme ran from 2017 to 2019. To date, four cohorts of professionals have attended the series of masterclasses, seven Pioneers have been appointed, and a service-level action plan has been devised and is being implemented. Cardiff University were commissioned to evaluate the Fostering Wellbeing programme between October 2017 and March 2019. In order to evaluate the programme a mixed approach was adopted, including: a survey of 117 participants; observations of the masterclasses (one of each session across the first three cohorts, and all five in the fourth cohort); interviews with 13 delegates three months after masterclass attendance, and seven of the same delegates 12 months later; interviews with 16 key stakeholders; a focus group with foster care Pioneers; creative methods with four children; and an in-depth case study of one unit of professionals working in the team around the child.

Findings

Masterclasses

- The masterclasses have been well received, facilitated in a way responsive to the audience.
- Powerful personal narratives of care-experienced young people and foster carers provided insight into their lived experience. This was particularly pertinent for professionals who were not solely involved with care-experienced children.

- Using expert speakers from a range of different fields was innovative and well received by delegates.
- The provision of joint training was a key feature of the programme as it provided participants with a shared framework of understanding and language and the opportunity to engage in discussion and hear from colleagues from foster carer, health, education and social work.
- The masterclasses reinforced a set of key principles and values.
- Attendance and reach across some professional groups has been problematic.
- Messages and techniques from the masterclasses have been used in supervision between fostering social workers and foster carers and this had a levelling effect.
- Some professionals have gone on to do further reading and learning around some of the topics covered in the masterclasses.
- Foster carers and Pioneers reported some increased confidence in their ability to advocate on behalf of the child.

Pioneer role

- The role of the Pioneer foster carer was well received although had taken time to set up and as a result, not yet fully embedded.
- The Pioneer role has a lot of merit and is innovative, especially the local authority based helpline. However, there were practical difficulties in co-locating foster carers within social work teams which led to delays in starting the helpline.

Service engagement

- Findings suggest that local authority leadership of Fostering Services have a strong commitment to embedding the principles of Fostering Wellbeing into professional practice.
- The Fostering Network is working with Cwm Taf Social Services and Wellbeing Partnership to develop an action plan for service-level activities to cascade learning and enhance service delivery.

 Fostering Wellbeing sits alongside other complementary programmes, such as the 'Children Looked After Friendly Schools' initiative and development of a National Fostering Framework.

Recommendations

- Fostering Wellbeing should retain the broader principles and models, such as PACE, and practical exercises but should reduce the overall content.
- The inclusion of the voice of the child and the experiences of foster carers should be retained as a core aspect of future training.
- Future training should retain multi-disciplinary attendance to ensure culture change across foster carers and organisations.
- Fostering Wellbeing should consider alternative, more accessible models of delivery to improve attendance.
- Attendance and engagement could be improved by linking this to Continuing Professional Development programmes.
- Fostering Wellbeing should be linked with Child Looked After Friendly Schools and other initiatives in the area to ensure synergy and a shared language across programmes.
- The Pioneer role had not been fully implemented at the time of this evaluation. This innovative feature of the programme may have the potential to be rolled out to other areas of Wales and should be evaluated further.
- The Pioneer role will need to be well supported.
- More clarification of the Pioneer role with regard to education or wellbeing.
- Recruitment of a kinship carer, so that kinship carers can be more readily included in masterclasses and be provided with Pioneer support.

The Fostering Wellbeing Programme

Fostering Wellbeing is a 2-year pilot programme delivered by The Fostering Network in Cwm Taf, which aims to improve the wellbeing and educational outcomes for children in care based on learning from Fostering Network's Head, Heart, Hands project (2016), and London Fostering Achievement Programmes (2016). The programme offers social pedagogical learning in the context of foster care aimed at developing and embedding a consistent and coherent approach across the region which will benefit the lives of children who are looked after.

Fostering Wellbeing brings together foster carers with other professionals to share best practice across service boundaries.

Aims

Specifically, the programme aims to:

- 1. Identify and share the core values and principles which will help children and young people who are looked after to thrive;
- 2. Develop skills and competencies in common which will help equip children and young people who are looked after to fulfil their potential;
- 3. Become confident in a shared and consistent approach to meeting the needs of children and young people who are looked after which, in turn, will fire ambition and help them to find success;
- 4. Be active advocates for the children and young people for whom they have a responsibility, be it individual or corporate.

Cardiff University were commissioned by the Fostering Network to evaluate the Fostering Wellbeing Programme between October 2017 and March 2019. In order to evaluate the programme a mixed method approach was adopted including a survey, observations, baseline and follow-up interviews with a range of stakeholders, creative methods with children and an in-depth case study of a team around the child.

Background

The Fostering Wellbeing Programme was based on learning from two pilot projects. The first was the Fostering Network's Head, Heart, Hands programme which was carried out over a period of 4 years (2012-2016). The Head, Heart, Hands programme involved both foster carers and staff in fostering services and agencies. Its overall aim was to develop a social pedagogic approach within UK foster care, 'thereby increasing the numbers of young people in foster care who achieve their potential and a make a positive contribution to society' (McDermid et al., 2016 p.3). Adopting a social pedagogic approach required discussions beyond that of relationships, but around the role social work and education plays and could play in the space between children and young people and society (Coussée et al., 2010). The notion was that foster carers and social workers would work with their "Head – putting theory and critical reflection into practice, Heart – using empathy and utilising their own experiences and personality, and Hands – making the most of time spent together in practical every day activities" (The Fostering Network, n,d., p.1).

The Head, Heart, Hands programme was delivered in seven sites across England and Scotland and consisted of the employment of social pedagogues, the training for up to 40 foster carers per site, regular meetings to share practice and adopting a social pedagogic lens to review the current policies and procedures of foster services (McDermid et al., 2015). Evaluation findings showed that the programme gave foster carers confidence in their own practice, which was enhanced by being offered the chance to acknowledge and reflect on the importance of 'self' in developing relationships. Further, foster carers were enthusiastic about the programme stating that they felt it gave them permission to care for children in a way that felt natural to them (McDermid et al., 2015). Social care staff spoke of the positive impact the programme had on their relationship with foster carers, and both groups of respondents believed this was down to simultaneously completing the training, which offered the chance for foster carers to get to know social care staff and feel part of the team around the child (McDermid et al., 2016). However, a third of foster carers that were interviewed reported that the awareness and practice of social pedagogy among some children's social care staff was patchy, concerned with a lack of engagement and support for the approaches. McDermid et al., (2016) suggest this is may be as result of the limited number of places available for training and workload and time constraints meant that attendance was not always possible.

The Fostering Wellbeing Programme was also based on the London Fostering Achievement programme (Sebba et al., 2016) which was piloted between 2014-2015 in 29 London Boroughs which aimed to improve educational outcomes for children looked after. The

programme included generic foster carer training on education, the provision of four half day masterclasses for foster carers, teachers and social workers involved with children looked after, direct work with school and the creation of an educational foster care champion role.

It was found that the 'mix' of participants was perceived as the most valuable aspect of the masterclasses as it allowed better understanding each other's roles. However, the training was deemed too basic for some participants, and its relationship to existing training was unclear. Regarding the impact of the direct work in schools, findings were mixed. Structured meetings between foster carer, teacher and child were perceived positively and the education champions had a significant impact providing foster carers with information, direct support and increased confidence. Being seen as 'one of us' by other foster carers, plus their educational and foster care experience to bring to the role, was thought to be a significant part of their success (Sebba et al., 2016). The recommendations included employing education champions in every local authority and increasing the status of designated teachers.

Fostering Wellbeing was based on the successful aspects of the two pilot programmes, creating a hybrid model. From Head, Heart, Hands the embedding of social pedagogy and its principles across foster care practice, helping foster carers to feel more valued and endorsing their practice (McDermid et al., 2015). Fostering Wellbeing attempts to address some of the resistance found in the wider system by the Head, Heart, Hands study by sharing best practice across service boundaries and enabling all involved to be active advocates on behalf of the child. From London Fostering Achievement, the Fostering Wellbeing training takes the 'masterclasses'. One of the key objectives, and the rationale behind developing the masterclasses is to ensure continuity of support for wellbeing and learning between home and school. Fostering Wellbeing also employs foster carer Pioneers (known as champions in London Fostering Achievement model). The Fostering Wellbeing model is based on joint training which was found to be successful in both studies.

The focus of Fostering Wellbeing is on social pedagogy, and well-being more generally, with less of a focus on education than London Fostering Achievement. However, it is remains within the Pioneers' remit to provide one-to-one support to foster carers around education and wellbeing. Additionally, increasing wellbeing should in principle improve outcomes for children looked after, across all domains, one of which is education. Box one summarises the programme's ten principles.

Fostering Wellbeing Programme: Ten Principles

- 1. All the child's needs have to be met i.e. understand and respond to the **whole child**/young person to improve his/her wellbeing;
- 2. Each person's **view of life** and the wider world will differ, arising from their background, experiences and own mindset;
- 3. Good relationships are at the centre of a person's wellbeing;
- 4. What has happened cannot be undone but can be understood and provide lessons for the future;
- 5. Encouraging **aspiration** and ambition is essential in developing positive attitudes;
- 6. All those involved with a child/young person being looked after, including the foster carers and the children/young person, have **equality of status** in the relationship;
- 7. The **values and attitudes** of all those involved with a child/young person being looked after need to be made explicit;
- 8. Positive values and attitudes are best nurtured through **practical activities** shared between child/young person and foster carer;
- 9. Learning to **help oneself** is as important as learning to build relationships;
- 10. Those working with a child/young person being looked after need to know the difference between the behaviours of the professional self, personal self and private self and in what situations the **appropriate behaviour** applies.

Source: internal report from the Fostering Wellbeing design and implementation team

Figure 1 Ten Principles

The Fostering Wellbeing Programme

The Fostering Wellbeing programme is made up of three main elements.

i. A series of five themed masterclasses.

Masterclasses are attended by a range of practitioners and managers from the multidisciplinary team around the child looked after (including foster carers, education, social work, health). The focus of the Masterclasses is social pedagogy with the aim of educating and improving the skills of all parties involved. The Masterclasses involve presentations from experts by experience as well as experts in practice. Box two provides an outline of the content of each masterclass.

To date, four series of five masterclasses have been run across Cwm Taf. The Fostering Network is now developing a masterclass resource pack to enable continuation of the learning following completion of the trial.

Fostering Wellbeing Programme: Masterclasses			
Masterclass 1:	Knowing and meeting needs (all the child's needs have to be met and recognising that each person's view of life and the wider world will differ);		
Masterclass 2:	Living and growing (lessons for the future and encouraging aspiration and ambition);		
Masterclass 3:	Me, you, us and them (building good relationships and appropriate behaviour);		
Masterclass 4:	Hands on (positive values and attitudes are best nurtured through practical activities and learn to help oneself);		
Masterclass 5:	Working as one (shared values and attitudes and equality of status of all those involved with a child/young person being looked after).		

Figure 2 Masterclasses

ii. Fostering Wellbeing Pioneers

Fostering Wellbeing Pioneers are experienced foster carers who cascade learning from the programme to foster cares. Pioneers receive bespoke training developed by The Fostering Network in order to:

- Raise awareness of wellbeing and education through support groups and fostering events;
- Work in partnership with co-professionals to deliver local plans and initiatives.
- Provide one-to-one support to foster carers around education and wellbeing and acting as the first point of contact for education and wellbeing enquiries;
- Co-facilitate training for foster carers and other professionals, including cascading learning from regional masterclasses.

The Fostering Network are recruiting young, 'Fostering Wellbeing Champions' who have previously been looked after in the region who will bring further experience and skills to the programme team.

iii. Service support

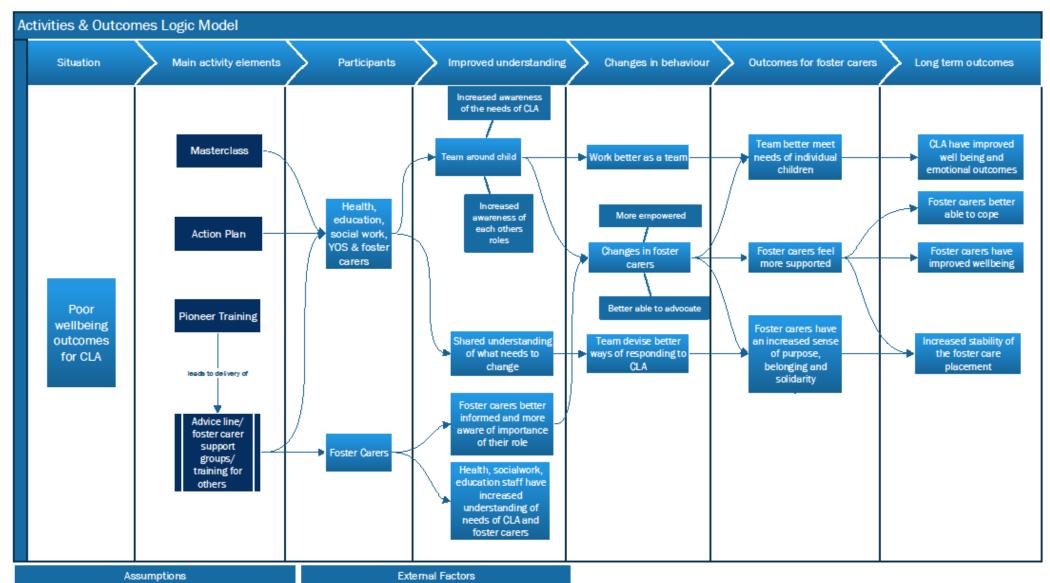
The Fostering Network is working with Cwm Taf Social Services and Wellbeing Partnership to develop an action plan for service-level activities to cascade learning and enhance service delivery.

Fostering Wellbeing Evaluation

The evaluation was undertaken during the pilot phase of the programme during 2017-2019. The evaluation adopted a mixed methods approach in order to address three main objectives:

- 1. Examine the Fostering Wellbeing programme to assess whether the key elements (masterclasses, Pioneers and service support) are being delivered to a satisfactory standard.
- 2. Determine whether Fostering Wellbeing has led to greater engagement between foster carers, education and social care.
- 3. Assess the levels of service engagement with the programme and future sustainability of the approach.

Based on the review of the three delivery elements, the following logic model was been devised in order to identify the theory of change, that is anticipated and operationalised through the Fostering Wellbeing programme. This will be further discussed in the final conclusion.



- Foster carers are an important part of the professional team supporting CLA
- Foster carers have most contact with and knowledge of CLA
- Foster carers expertise and knowledge needs to be respected and acknowledged

- · Ability to retain pioneers
- Funding
- · Ability to access full team

Figure 3 Logic Model

Method

The evaluation of Fostering Wellbeing consisted of the following work streams:

Review of existing literature

A literature review was conducted. The review focused upon:

- Needs of children looked after
- Children looked after and subjective wellbeing
- Children looked after and education
- Training and support needs of foster carers
- Foster carer perspective

Observational data

The evaluation team observed each themed Masterclasses across cohorts 1 and 2 to identify the distinctive elements of the training. Following refinement to programme content, a further five Masterclasses were observed for cohort three. A total of ten observations were undertaken. Where possible, opportunistic, informal discussions were conducted with participants during coffee and lunch breaks to gauge reactions to the training. The initial observations involved researchers moving around the tables and observing what was going on. In the final series of observations for cohort three, some researchers took part in activities in the groups, to gain more of a sense of the experience of participants and thus became more participant observers. Some of the difficulties emerging from the earlier Masterclasses had been addressed by cohort three. The final Masterclass series in 2019 were reduced from five full days to five morning sessions, this allowed foster carers more time to return to pick up children and child care was less problematic. Additionally, staff from education were able to return to schools after the morning masterclasses, albeit just for an hour or two. However, this reduced the time available to cover masterclass content.

Survey data

Surveys were devised for the first two cohorts (N = 117). Surveys included demographic information including previous training, role, relationships with professionals, and relationships with the child, perceptions of practice and perceptions of masterclass content.

Participants across both groups were invited to indicate their willingness to participate in a semi-structured interview one month after Masterclass five by adding their email address to the end of the survey. Hence 13 number of participants indicated they were willing to participate.

Foster carers

Fifty-three foster carers completed a questionnaire at the beginning of the first two series of the master class programmes. Most foster carers were female with experience of foster care ranged from less than a year to up to 30 years. Ages ranged between 30 years to over 60 years of age. Educational status ranged from no formal qualifications to post-graduate status. Over 62% identified themselves as Caucasian Welsh. None of the foster carers identified as BAME (Appendix 3).

Over 88% described their main role as a foster carer. The number of children cared for ranged from one to ten. The majority (over 90%) provided care through the local authority, with only 5 (just over 9%) provided kinship or family care. Most foster carers (57%) did not provide respite care. Foster carers were caring for between one to four children at the time of completing the survey. Eighty nine percent had completed a foster carer training programme in the past three years.

Other professionals

Sixty-four co-professionals across the three cohorts completed a questionnaire at the beginning of the first masterclass. Just over half of delegates were from social work with a further quarter from education (Appendix 4). Of the remainder, delegates were from youth justice, childcare or parenting careers and two were from health. Over half had a higher education qualification.

Overall, delegates ranged from those who had been in their current role from one to 30 years, with over half having been in role five years or less. Hence, delegates had an age range of between 25 and over 60 years. Just under 70% identified themselves as Welsh.

Semi-structured telephone interviews

All participants who had consented to be contacted in the survey were contacted for a telephone interview around 1 month after completing the training. In total only 13 people who completed the survey agreed to be interviewed. It may be that this was not given sufficient prominence in the first masterclass of each cohort of training; this was certainly the case in the very first masterclass. Of those 15 interviewed, eight were 'coprofessionals', four were social work managers or team leaders, two were involved in education (one special education officer and one head teacher), one was a manager of a children's home and one was a training officer.

Follow-up interviews were undertaken 12 months later with 7 of the 15 participants who were contacted and were willing to be interviewed. The aim was of the interview was to ascertain self-reported learning recall and implementation of Masterclass techniques and strategies.

Children's perspective

Participative techniques were used to determine what young people valued about their foster care, and what factors they feel impact on their wellbeing. It is vital that children's subjective wellbeing is considered as well as those who establish wellbeing from the outside (Wood & Selwyn, 2017). To do this, four young people, whose foster carers were participating in the programme were invited to take part in creative and fun activities (Mannay 2016) to contribute their views to the research.

It was envisaged that this would be facilitated by Youth Champions/Pioneers but they had not been appointed at the time of data collection. The activities took place in the homes of the young people to help put them at ease, creating less pressure than an interview in a more formal, public space and the researcher was able to get a sense of the lived experience in the foster home (Winter & Cree, 2016).

Children were interviewed in their homes so that they were in a relaxed and familiar setting (Winter & Cress, 2016). In order to engage with children and young people, sandboxes and

drawing materials were provided to help them convey their thoughts and feelings about the people and things they valued in their lives and played an important part in contributing to their wellbeing. The children were asked to draw an eco-map of the people that were important to them and asked to create a tableau with the sand boxes of their experiences and how they feel about school (Mannay et al. 2016). They were also asked if they had a magic wand what three things they would change about school. In analysing the drawings and sandbox tableaus, we used their explanations and words to make sense of them. The visual materials, which were photographed at the point of data production, acted as tools of elicitation, rather than objects of analysis per se, they were however drawn upon to illuminate and extend the relevant interview transcripts and have been used to contextualise the analysis of the transcripts.

Case study

Having worked with the children, a case study was developed around one child who had been interviewed, to see if the messages about shared core values and principles, working together, communication between the team around the child were being operationalised. The unit was selected as the foster carer and child wanted to be involved and thought the other team members would be happy to take part. The 'unit' included the young person, foster carer, foster carers' social worker, educational representative, fostering social worker and health representative. We emailed and made numerous telephone calls to children's social worker but were unable to speak to them. In addition, the children's social worker changed role over the research period. The aim was to determine each individual's knowledge of Fostering Wellbeing, their experience of working together, their interrelationships, and the improvements which have been made and/or were yet to be achieved.

Focus group

A focus group was held with Fostering Wellbeing Pioneers (N = 3) - to explore their activities in relation to raising awareness of wellbeing and education through support groups and events, the provision of one-to-one support to foster carers and co-facilitating training for foster carers and other professionals. These foster carers had all attended the Fostering Wellbeing masterclasses and had been asked, or had volunteered, to take on roles as 'Pioneers' under the Fostering Wellbeing Programme. All of the Pioneers were married or partnered and had, now adult, children of their own. Some of the Pioneers had professional careers in public services prior to becoming foster carers. The foster carers had been involved in caring for between seven and 18 years.

Key stakeholder interviews

In each local authority, a range of key stakeholders were interviewed, including senior management, social workers, Fostering Wellbeing Pioneers, Education CLA co-ordinators and teachers. In total 16 interviews were held, either face to face (10) or telephone interviews (6). The content of these interviews has been based on any emerging themes and issues encountered during the programme. One of the aims was that interviews would explore sustainability of the programme following the end of this project. Interviews were conducted at the end of 2018 and in early 2019.

Role	Authority	Masterclass Attendance
Pioneer 1	RCT	Yes
Pioneer 2	Merthyr	Yes
Fostering Social Worker 1	RCT	Yes
Fostering Social Worker 2	Merthyr	Yes.
Fostering Social Worker 3	RCT	Yes
Education 1	RCT	Yes.
Education 2	Merthyr	Yes.
Education 3	Merthyr	Yes (also presented)
Leadership 1	RCT	None
Leadership 2	RCT	Presenter
Leadership 3	Cwm Taf	Presenter
Leadership 4	Merthyr	None
Leadership 5	Cwm Taf	Observer
Leadership 6	Welsh University	Presenter
Leadership 7	Cwm Taf	None
Leadership 8	RCT	Yes

Figure 4 Table of interview participants

Analysis

All of the interviews were digitally recorded, transcribed and analysed. Analysis has been guided by the transcripts of the interviews and focus groups in constructing a coding frame with which to analyse the data (Walliman, 2011). Braun and Clark's five phase model of thematic analysis (2006) has been followed, using inductive, qualitative, thematic analysis (Seale, 2012). Themes have been cross checked between researchers undertaking the analysis. Codes, categories and themes used in analysis and written-up have been 'grounded in the data' (Bryman, 2012). The visual materials, which were photographed at the point of data production, acted as tools of elicitation, rather than objects of analysis per se, they were however drawn upon to illuminate and extend the relevant interview transcripts and have been used to contextualise the analysis of the transcripts. In total, we have interviewed 43 people and reviewed surveys from a further 117.

Limitations of the study

The limitations of the study are that we were not able to access many foster carers who were not pioneers; 53 foster carers completed the survey and five were interviewed three months after the master classes, one after 12 months. Difficulties were encountered accessing foster carers who had attended the masterclasses; we therefore relied on Pioneers, although their experiences may not be 'typical' as Pioneers are chosen for their level of experience and dynamic approach to fostering.

All contacts of key stakeholders were names given to us by The Fostering Network. In doing so there is a risk of bias as the research included participants who were engaging with the Fostering Network and who may have been favourable to the programme. Nevertheless, people felt able to make both critical and positive comments about Fostering Wellbeing. The Pioneers were interviewed in the focus group and two of the same Pioneers were interviewed as key stakeholders. We were not able to access any educational data for children in foster care, although realistically it would be unlikely that any improvements would be realised in the short time frame of the study. We initially attempted to utilise a control group, but locating sufficient foster carers for any form of matching meant this was not possible.

Literature Review

Needs of children looked after

The Care Inquiry of 2013 published the results of an extensive investigation on how best to provide stable and permanent homes for vulnerable children. The report into the Inquiry's findings, *Making not Breaking* (https://www.adoptionuk.org/the-care-inquiry-report) presents evidence from a wide range of contributors, including parents, relatives, adopters, special guardians, foster carers, residential workers, academics, managers and practitioners at all levels. Children and young people provided evidence via focus groups, online surveys and presented their views via film and in person to the Inquiry.

The main conclusion was that 'permanence' for children means 'security, stability, love and a strong sense of identity and belonging'. The strong message to the Inquiry was that,

it is the relationships with people who care for and about children that are the golden threads in children's lives, and that the quality of a child's relationships is the lens through which all in the sector should view what we do and plan to do (Boddy 2013:2).

Children looked after children and their subjective wellbeing

According to Wood and Selwyn (2017), wellbeing can be measured by two broad approaches. The first is based upon objective measures such as educational achievement whilst the second focuses on how people feel about the different aspects of their lives. It is the second approach, that of subjective wellbeing that has been embraced by policy in order to increase the quality of people's lives. Findings from the Bright Sparks survey of 3,000 children looked after in England (Selwyn et al. 2017) highlighted that the most important practice areas for professionals to focus on to improve the wellbeing of children looked after include ensuring every child has a trusted adult in their lives, that children's concerns and worries are heard, asking about and supporting friendships and relationships with siblings, and intervening if sibling bullying is an issue or if bullying is making a child fearful of going to school. In addition, professionals must be aware that children and young people do not like to be perceived as different by friends and so must avoid any actions where the young person could feel stigmatised as a child looked after (Selwyn et al., 2017).

Focus groups were also undertaken with children looked after which highlighted the importance they placed upon relationships with family, friends, foster carers and trusted adults (Wood and Selwyn, 2017). Children also identified access to the natural world, play, activities and hobbies as vital to the building of resilience (2017).

Children looked after and education

The educational attainment and future life opportunities of children in state care is of continuing concern (Berridge, 2012; Sebba et al. 2015). Within the UK nations, children in care achieve less well educationally than the general population (children not in care and not in need) (see Conelly & Furnivall, 2013; Jackson, 2010). Across all key stages and into higher education this gap only widens (Stein, 2012). Whilst education is not the only predictor of success, the scarcity of employment opportunities (often gate-kept by increasing educational requirements) keeps it firmly on the agenda (Berridge, 2012). Jackson and Cameron's (2014) study across five European countries found that young people in state care were around five times less likely to attend further or higher education. Mannisto and Pirttimaa (2018:277) undertook a rapid review of studies relating to children looked after and education and concluded that,

From a global perspective, children and adolescents in foster care are at risk of academic under-achievement, thus the need to... find effective solutions to support their educational achievement.

Since devolution in 1999, the Welsh Government has developed its own policies and guidance for local authorities, which aim to tackle the issue of the 'underachievement' or a lack of opportunity to thrive for children in care. Several educational interventions have been developed for those who are looked after and in compulsory education: the establishment of the local authority education coordinator to track progress; an education support worker to provide remedial support; a designated teacher and the Personal Education Plan (Welsh Government, 2007; Welsh Government, 2016). Whilst some modest improvements have been noted, the overall educational attainment of children and young people in care remains significantly below that of the general population (Welsh Audit Office, 2012).

A study of educational experiences of 67 children looked after in Wales by Mannay et al. (2015; 2019) found that targeted interventions could inadvertently lead to labelling and stigmatisation, with children experiencing high visibility in review meetings held during the school day, and a dampening of expectations and aspirations of both teacher and pupils once a child was labelled as looked after. Evans et al. (2016) undertook a meta-analysis of

11 interventions including The Letterbox Club, Multi-dimensional Treatment Foster Care and Fostering Healthy Futures and found that existing interventions failed to address structural disadvantage, including placement instability, lack of skills of foster carers and minimal resources. Many studies conclude the need to consult with children more comprehensively to develop effective interventions to improve their educational outcomes and experiences (Manny et al. 2019; Evans et al. 2016)

Training and support of foster carers

There has been a range of research into the impact of training on foster carers. Much training has focused on helping to manage challenging behavior. Briskman (2012) found positive results from their Fostering Changes programme and noted that experienced foster carers should play a far greater role in training their peers. Based on the Briskman study, the Fostering Changes programme is currently being piloted in Wales via a randomized control study entitled 'Confidence in Care' (Robling et al. forthcoming). This is a training programme for foster carers to help them manage and cope with identified child behaviours. It has been noted that there is a marked difference in the training foster carers receive in differing agencies and across Wales, suggesting there is no consistent approach (Pithouse and Hill-Tout, 2004).

Foster carers often feel unsupported and face a range of stressors and challenges (Pithouse and Rees, 2014). The demanding nature of fostering, dealing with highly complex situations can lead to compassion fatigue and burn out if foster carers are not fully supported (Cocker and Joss, 2016, Ottaway and Selwyn, 2016). Many foster carers experience allegations which have a devastating impact on carers even when the allegations are unfounded or disproved (Plummridge and Sebba 2016; Sinclair et al. 2004). Job satisfaction is often related to the amount of control that one has over one's work (Ross and Reskin 1992). When foster carers are undervalued and not consulted about decisions regarding the children placed with them, this is very undermining and will greatly reduce their job satisfaction, leading to loss of morale and sometimes leaving their role (Sinclair et al. 2004). The importance of good matching between a foster family and a child has been highlighted (Schofield and Beek (2014) with foster carers more likely to remain in the role when they feel part of the team around the family, they have a close link with family social workers, have access to an out of hours support system, and there is clear and consistent communication between social workers and foster carers.

Feeling valued is closely aligned to status and to communication with other professionals which contribute to the arguments for the professionalisation of foster care (Nutt, 2006:

Wilson and Evetts, 2006). However, foster carers feel they are treated unprofessionally, often ignored and their emotional wellbeing rarely considered by social workers (Maclay et al., 2006). Further, Maclay et al. (2006:172) note that foster carers,

occupy a space which is neither a colleague, nor client, professional or parent, and their experience of parenting children is often extensive and undervalued.

They argue that there needs to be general recognition that the roles of social workers and foster carers are different but equally as important for the care of vulnerable children. According to results from the State of the Nation Foster Care survey (2019), foster carers did not feel listened to and felt unable to challenge the decisions of other professionals. Just over a quarter of foster carers (26%) reported that it is unclear what day-to-day decisions they have the authority to make. The survey identified and that there is no defined learning and development framework for foster carers. The most common training gaps identified by carers are therapeutic parenting, behaviour management, mental health, specialised first aid and attachment (State of the Nation, 2019). If foster carers are not recognised and supported in their role caring for a child looked after, this will impact on retention of foster carers and in turn on the stability of foster placements (Pithouse and Rees, 2014).

Findings

Current context

Perceptions from the team around the child and the child's perspective

This section begins by reporting findings from baseline surveys with 117 masterclass participants before providing detailed case study accounts from four children. In doing so the current context of foster care is provided from the perspective of Fostering Wellbeing participants and children who are currently looked after.

Motivations and expectations of the masterclasses

Attendance at the master classes was largely driven by social workers advising or inviting foster carers to attend or a desire to improve knowledge and skills. One person reported hearing 'good things' about the masterclasses and another foster carer had previously attended an educational masterclass which had prompted a decision to attend the Fostering Wellbeing masterclasses.

For foster carers (Appendix 3), the opportunity to meet other professionals, draw on other people's experiences and knowledge and to gain a better understanding of the emotional side of caring were put forward as most valuable expectation of attending the master classes. Other aspects of value included gaining a better understanding of the child and social pedagogy. Foster carers valued the opportunity of sharing information through discussion and to find out what help was available to the children they cared for.

For co-professionals (Appendix 4), the vast majority indicated that having all members of the team around the child attend the masterclasses together would be beneficial. Further, the opportunity to meet colleagues from other teams was rated highly.

When asked the motivations for attending the masterclasses, education staff noted the increasing numbers of children looked after in their setting had prompted a decision to attend. Several noted that they were interested in learning about social pedagogy, whilst others wanted to get more of an insight into the roles of other professionals they were working with. Numerous people noted they had received extremely positive feedback from others who had attended previous courses which had stimulated their interest. Others however purely noted that their manager suggested it or their name had been put forward.

Which aspects of the masterclasses do you think will be most valuable?

Communication and multi-disciplinary working was seen to be the most valuable aspect of the masterclasses. Numerous co-professionals including foster carers noted that meeting other professionals and learning about other roles would be valuable to them. Mixing with carers and other professionals was highlighted as important learning for co-professionals. Listening to other people's stories and 'listening to real life experiences' was also seen to be a valuable opportunity. Some professionals hoped to learn more about foster carers and care leavers. One or two professionals had specific aspects they wished to learn about including PACE and social pedagogy but the clearest benefit was mixing with others working in the team around the child.

What do you hope to do differently on completion of the masterclasses?

Most identified that working differently would be to have more awareness of all of the roles of the stakeholders, working together, and therefore know who to ask for help. The ambition was to work better with partners and to have created 'a different way of working to enhance children's outcomes'. Again, relationships with colleagues was the focus for improvement, highlighting that professionals appreciate that this is an area where they could improve their practice. One person noted 'I hope to change my views on professional relationships for the better'. Some professionals wanted to be able to support foster carers better and to have a better understanding of how the fostering system works. Others just wanted to do their job to the best of their ability. Professionals also hoped to gain greater insight into the lives of children and young people in foster care, as well as implementing the learning from the programme.

Role responsibilities

Role responsibilities (Appendix 3) varied with the majority believing that the main purpose of the foster carer role was to provide young people with a nurturing home (51%) and advocating on their behalf (49%). Just over 32% of foster carers believed that the main purpose of the role was to provide structure, 34% believed that keeping young people safe and providing them with a nurturing home environment was important. Ensuring a routine for young people was also considered important by 28% of foster carers, together with behaviour modification (25%), and providing emotional support (21%). Fewer foster carers felt their role consisted of helping the young person to become independent (just over 9%).

Most foster carers reported that they would 'go that extra mile' to encourage foster child(ren) with their education. With the majority indicating confidence in their ability to approach the school with any concerns they had about the child(ren)'s educational needs.

For co-professionals, the vast majority reported having regularly attended meetings about the child, contributed to care plans for the child, and were able to present their views about the child at multi-agency meetings. In regards to their role with foster children, most stated their role required either a moderate or great degree of direct work with the child. This included regularly meeting the child, advocacy, listening, and providing emotional support.

When asked about their work with foster carers, fewer co-professionals reported having a role to assist carers. This included ensuring the foster carer met the needs of the child, assisting foster carers to provide a nurturing environment, listening and providing them with emotional support, helping them to access services and keeping them informed about the child's progress. Sixteen per cent of respondents reported no role in attending meetings or contributing to such meetings, working with foster children or supporting foster carers.

Relationships with foster children

Foster children's ages ranged from 4 months to 18 years of age, with the duration of current placements being from 1 month to up 18 years. Most children had only one placement prior to their current foster home. However, one child had six prior placements. Most did not have special education needs, nor specific health problems and were not receiving support from agencies such as CAMHS. The plan for the majority of the children was for them to move to longer term foster care placements.

The majority of foster carers reported that it was difficult communicating with foster children at times. Just over half felt able to manage the challenges presented by the child currently in their care and that they had a good relationship with the child. Half of foster carers reported that they felt the role was rewarding.

Professional Relationships

Foster carers

This section is about the team around the child and how far foster carers felt part of the team and whether they felt their voice is heard. Forty per cent of foster carers felt valued and part of the team around the foster child and were included in meetings. Around half felt that their social worker treated them as an equal member of the team, whereas only 26% felt this was the case with the foster child's social worker. Foster carers felt more accepted as an equal part of the team by education 40%, but less by health at 25%. Thirty-two

percent received peer support from other foster carers in the area prior to participating in the Fostering Wellbeing Programme.

Co-professionals

The following sections provide results relating to delegates perceptions of the team around the child – by which we mean the child's social worker, foster carer's social worker, education representatives, and health staff, involved with the foster child(ren). A word of caution is necessary as these results represent delegates' beliefs about the roles and practice of professionals around the child prior to intervention. From such a small group of respondents, they cannot be taken as representative of professional beliefs, but rather an indication of what professionals perceived the roles and practice of other professionals prior to taking part in the masterclasses. Further, the high level of neutral responses may be indicative of delegates who are not in a position to comment, or who simply do not agree or disagree with the statement provided.

When asked about professional relationships, the vast majority of co-professionals reported that the team met regularly, were sensitive to the child's needs and worked together to meet the child's needs (Appendix 4). The greatest difference reported was in the extent to which all professionals worked in a similar way with the child; differences would be expected from professionals with different roles and responsibilities. When results are considered in light of the number of neutral responses it is interesting to note that relatively high numbers remained neutral in regard to the level of trust within the team around the family and the extent to which they all have the same ethos. Whilst we would expect differences in ethos between departments, the level of trust across professionals is something Fostering Wellbeing aimed to address and may be something to review in future research.

When asked about perceptions of the foster carer, most deemed the foster carer to be a valued member of the professional team around the child. Slightly fewer indicated that foster carers views were included in planning. Around half disagreed with the statement that it would be difficult to share information if the foster carer was included in all decision making. Less than half felt that it was easier for foster carers to build relationships with foster children if they are not a member of the professional team.

Children's perspectives

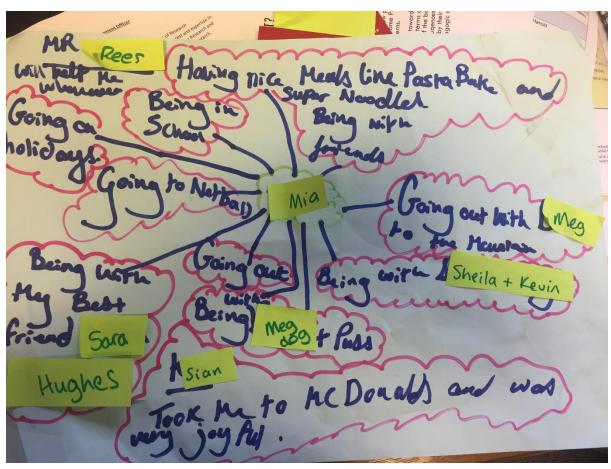
The following section introduces the four young people who were interviewed. We place the children's perspective early in the findings to ensure the voice of the child and subjective wellbeing is foregrounded. Mia and Marcus were interviewed together.

Mia

Mia is eleven years of age. She lives with her two foster carers and Marcus.

Mia created an eco-map of people and things that were important to her wellbeing and she placed her foster carers and her best friends on it. She also included a previous social worker, Sian, who worked with her several years ago. When asked why this social worker was included she said that this was the only social worker that 'did not focus only on filling out forms or completing reviews' and had taken her to MacDonald's and asked her about herself; she describes this as 'joyful'. Sian was the only social worker mentioned by a child as a significant figure in their lives.

Mia also placed teachers on the eco-map and noted that one of the teachers, Mr Rees, was really supportive 'He will help me with anything whenever'. She also valued playing netball, being outside, walking in the mountains. The dog Meg, and the family cat were also placed on the map.



Mia's eco-map

Mia talked about attending youth club and included friends on her eco-map and on her sand box tableau of school. In the sand box she placed herself and her friends within a nest in school, noting them as 'My friends', and included 3 teachers outside of the nest who she liked, two males and a female. 'Like Mr Smith, Mr Jones and Miss King.....'

Mia also included a house within the school and when asked about this said: 'It's just like school feels like home sometimes maybe'.

When asked what makes the school feel homely she said: 'Things with teachers and teachers being like very kind and helping out'.

These comments seem particularly significant when thinking about considering the whole child and the holistic experience of school and learning. Mia felt she had good relationships with her teachers. Having a significant adult to talk to is highlighted in Children Looked After

Friendly Schools approach (Higgins et al. nd). It was also very important for Mia that she had a strong friendship network (Higgins et al., nd). Mia talked about the award she had been given at the end of primary school and she rushed to get it to show the researcher. Clearly the award meant a lot to her and gave her feelings of achievement.



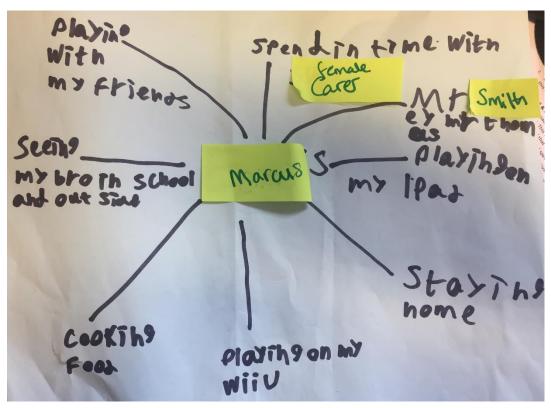
Mia's sandbox

When asked if she had a magic wand what three things she would change about school and she stated the following:

- 1. The price of food (in school) would be cheaper.
- 2. I would have technology lessons every week instead of every two weeks, and
- 3. I would have more cookery lessons

Marcus

Marcus is 12 years of age and mentions that he has a learning disability. He lives with his foster carers and another child.



Marcus' eco-map

Marcus drew an eco-map and included three teachers, the foster carers and his brother. He did not have any friends situated on his diagram. Marcus was very keen to include his brother (who was placed to live elsewhere).

Marcus noted he liked three specific teachers but he is clear 'I don't like them all.. I like Mr Peters, Mr Lewis and Miss-I can't remember her name now'. When asked what he liked about them, Marcus said 'Mr Peters is funny, Mr Lewis is tidy' when asked what this mean he goes on to explain, Kind, yeah not nasty. Marcus said....I don't worry about teachers these days'. It seemed that there had been a shift for Marcus in this respect.

Generally, he enjoyed staying at home, cooking, playing on the Wii. The family as a whole liked to climb the mountains and walk the dog together.

Marcus recalls the night that he was brought to his foster carers, some five years ago, saying that it was 'the best day of his life'. When discussing his sandbox tableau Marcus noted that 'sometimes it (school) feels like a jail... Well sometimes when I am angry. And when asked about how it felt when he was not angry he said:

'Then it just feels like a nice place. Even though the school is abandoned and tearing apart'.

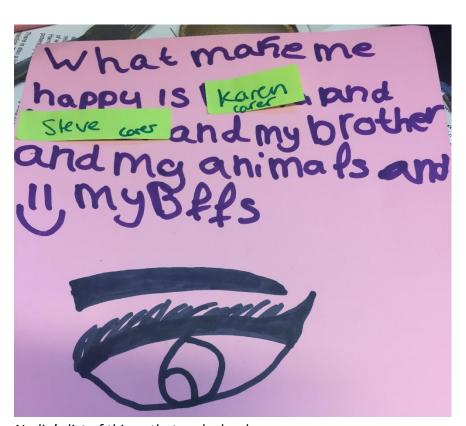
The poor fabric of the school building seemed to concern Marcus. When asked if he had a magic wand what three things he would change about school he noted the following:

- 1. I would stop all insults and name calling by the other children.
- 2. There would be no double lessons
- 3. Breaks would be longer.

Nadia

Nadia is 11 years of age. Nadia and Peter were interviewed together. Nadia was very keen to mention the importance of her friendship group and her BFF's (best friends for life). She is a confident young girl who is close to her foster carers. When asked what things make her happy the first thing she says is 'Karen' (the female foster carer) and the importance of a significant adult '. And I like Karen because I love her. She's nice.'

Relationships seemed to be the things that make Nadia the most happy . Nadia lists these, including those with her pets:



Nadia's list of things that make her happy

In the sandbox she placed herself surrounded by two friends and included her brother in the tableau. She also placed the three dogs in the scene as being very important to her. She tells me that she would like an iPhone.

When asked if she had a magic wand what three things she would change about school and she stated the following:

- 1. More holidays,
- 2. More fun
- Less rules.

Peter

Peter is 14 years old and has moved to Wales. Peter is also the focus of the case study. He is quiet and struggles with the English language - his shyness makes it difficult for him to ask for help in case people become aware of his difficulty with language. Peter has been held back a year in school to help him improve his English language skills; his foster carer has advocated on his behalf so that he does not have to attend Welsh lessons. Peter notes that he does not dislike his social worker but does not include him on the diagram as 'he is not significant enough' as 'he is not with me all of the time'.

Peter immediately notes that football is important to him and he would love to be in the school team. Peter says he 'likes school'; he likes the subjects more than the people. Peter likes 'sport, construction and physics'. Peter would like to get some work experience in construction. He is going to work with the foster carer to some get experience of plumbing. He has a close relationship with the male carer.

Peter also values his tablet and puts this on his eco-map. Peter is asked to create a tableau in a sand box of his experiences in school and he places the male foster carer as waiting at the school gate for him (with brief case and cap), and describes him as his 'personal chauffeur.' Peter placed several trees in the sandbox as he loves nature. He puts two figures (in the bottom of the photograph) which are the teachers he likes, Mrs Hughes and Mrs Lewis. There are no friends in Peter's tableau.

When asked if he had a magic wand what three things he would change about school Peter noted the following:

- 1. More time in school
- 2. More relaxed
- 3. Fun atmosphere

Summary of child's perspectives

What was clear from the interviews with children was how different their interests and priorities were. Each child is clearly unique and values different things. The relationship with the foster carer was of essential importance, as was doing activities with the foster carers (going on holiday, walking, being in the countryside, as well as the choosing, preparing and partaking in family meals). Friendship networks were seen as vital, especially for girls, the boys both struggled more with this aspect and one young man felt picked on and bullied in school, an issue picked up in other research (Woods and Selwyn, 2017). Extra-curricular activities would seem to be important for building self-esteem and more vitally resilience, improving skills and broadening social networks; this might be given more consideration, especially covering the cost, and accessing such activities potentially through a link up to youth services (Gilligan, 2009; Woods and Selwyn, 2017). Tuition outside of school for Peter, for example, in language, might be less stigmatising than the public arena of the classroom (Mannay et al. 2016; Berridge 2016).

Some of the children placed their siblings on the eco-maps as being significant, even when they were not living together; regular contact with siblings would seem to be vital. Teachers were particularly important in how children felt about school and individual teachers had the ability to make a significant impact on a child by their interactions and relationship with them and by being 'kind' and 'helpful'. There was a sense that teachers were taking this on board and considering the needs of the children more holistically. The children often wished that school could be more relaxed and more fun, although some felt 'at home' in school-this was especially the case where they had a good friendship group. Strengthening friendship groups is part of the Children Looked After school friendly policy (Higgins et al. n.d.); and in the Fostering Wellbeing programme, this needs to be considered in both a home and school environment. Notably, pets featured in all of the children's interviews as enhancing their wellbeing (Woods and Selwyn, 2017), as did the importance of food and cooking (Rees, 2019). Children's perspectives were reflected in the ten principles of Fostering Wellbeing; friendship groups, food and cooking were discussed in masterclasses three and four.

Social workers were not significant in children's lives and young people noted that much of their involvement was to complete paperwork and assessments rather than spending time getting to know and building relationships with children.

Question One - Examine the Fostering Wellbeing programme to assess whether the key elements are being delivered to a satisfactory standard

Masterclass organisation

The Pioneer focus group felt that the masterclasses were organised and managed well. They found the five days of training over five weeks, with a diverse range of presenters and skills training, intensive but enjoyable. The Pioneers felt that the speakers and sessions were carefully selected and relevant to issues faced by foster carers. The mix of speakers helped to maintain levels of interest in the course throughout the training days. Pioneer 3 felt that the course facilitator played an important role in ensuring the smooth running and cohesiveness of the training days,

The most intense and deliberate set of courses that I have attended as a foster carer and I found them exceptionally rewarding ... we normally get one days training or sometimes two days training. We had five weeks of this training, it was well thought out, it was comprehensive, thorough, and more to the point, fun (Pioneer 3)

The observers noted the enjoyable nature of the masterclasses, especially the later ones, where more time was factored in for discussion. However, some delegates noted the amount of content meant that some of it became rushed,

I think it was Day 2 or Day 3, it was a lot of content and it seemed a little bit rushed (Co-professional 1)

The only negative was that some people said that there was so much content that sometimes they felt like it skipped a little bit and they wanted to go back and go oh let me think about that, and then it was onto the next task or something (Leadership 1)

This view was supported by observation data which identified there was not always time to discuss or reflect on content in the early masterclasses (one and two) before moving on to the next task.

This could also limit the benefits of multi-disciplinary discussion. It was thought that the programme was perhaps a little too ambitious attempting to cover so much material in the allotted time,

It was, there was an awful lot to cover and being sort of hyper critical about it, maybe there was too much which meant that some of the stuff that was really, really good there wasn't time to explore (Co-professional 5)

The final cohort of masterclasses was reduced from full day attendance to a half day to accommodate some of the difficulties of full day attendance, however this further compressed the material to be covered as noted by the observers as it further reduced the time available for discussion.

Masterclass delivery

The involvement of 'experts by experience' (both foster carers and care experienced young people) in masterclass delivery emerged as a valued aspect of the programme; 'all the live speakers addressed the question of what needs to change for CLA' (observer, cohort four).

I like the fact there were service users involved and the fact that we got to hear from them because I think that's what makes it real sometimes. (Co-professional 4)

I thought the fact that young people were brought in was invaluable. (Co-professional 2)

This was reiterated by the Fostering Wellbeing Pioneers. The Pioneers felt that this lived experience re-focused their attention on the child and the importance of understanding their perspective, particularly when young people spoke about being misunderstood or undervalued by their foster carers,

When [foster carers] got up and they spoke and they told their stories, without realising they were showing what attachment is all about and where it goes wrong [...] but you got us then, everybody gets emotional about it. You've got well-educated psychologists who are understanding exactly what they're saying...[and]...the theories are being lived by these people. That's why everybody sharing their roles is crucial. (Pioneer 2: Focus group)

He was amazing. He talked about being brought up in a foster home that wasn't good and what it did to his self-esteem and he said ... he wasn't taken to anything in the community. He didn't have a good fostering experience and that shows us that can't be allowed ... Oh he's marvellous. He said to me you need a hug don't you? Because I was overwhelmed and he came around the table and he hugged me. (Pioneer 1: Focus group)

The emotional content was extremely powerful and memorable for all that attended. Hence when interviewed twelve-months after training, some professionals, particularly those from education reported the value of hearing from experts by experience. This may be because staff in education are less aware of the day to day trauma and machinations of foster care. One respondent thought that the masterclasses helped teachers get a better perspective of what issues are faced by both children looked after and foster carers,

I think just being more mindful really of what these young people have to go through, and the support of the families' needs. Because I know that during the course they said you know that you've got a lot of turmoil, maybe they've been moved the night before and then they're just expected to be in school the following day. So from an educational point of view for me, it's being more aware that that support is in place and that there's that understanding and it's person-centred really (Co-professional 2: 12 month follow up)

Staff from the leadership group reported on the diversity of the methods used and calibre of speakers,

There was lots of different methods so at one stage they'd have a video and they'd be listening to something and the next minute they'd be doing an exercise in a group. They [participants] said that the standard of contributors was really good, they brought in really good people, experts in their field and people liked that. (Leadership 1)

However, presenters also reported that they would have benefited from more information about the aims and objectives of the masterclasses, so they could have had a better understanding of how their session fitted into the overall aim of the Fostering Wellbeing programme,

We never all met together, we weren't the holders of the programme, other people were. So, we were just asked and commissioned to do our bits and therefore you never got a feeling of where, you trusted that your bit fitted in, but you weren't sure about it (Leadership 7)

It was noted that programme was refined and developed across each cohort in order to enhance the training content and relevance to participants,

A continuity in presenters across the different cohorts meant that presenters could adapt and modify their presentations to better suit the multiagency audience over the cohorts (Leadership 1)

Benefits of joint training

Interview findings highlighted that in order to have an effective team around the child there must be some element of joint training among professionals. This would aid better understandings of the roles of other professionals, and the challenges or constraints they face. Further participants perceived a need for shared knowledge and language around wellbeing in order to create more proactive and appropriate interventions and plans that support educational attainment and placement stability.

Having the opportunity to engage in group discussions with a diverse range of professionals emerged as the key aspect of the masterclasses that set it apart from other training courses. Pioneers reported they felt they were treated as 'equal' and valued participants, able to voice their views and opinions whilst learning from the insights and perspectives of other professionals,

I think you get more out of training talking to people on your table, we were all encouraged to engage and we all took part and we all fed back and we all gave our opinion, you feel like your worth then, you're part of the class you know. I think the main core of it was bringing people from different walks of life together, discussing issues and then understanding each other because I think the whole concept of this wellbeing is a change of mindset (Pioneer 2).

This was reiterated by co-professionals. Having the entire team around the child engage in training together meant that received the same messages and were able to discuss the implications from different perspectives which served to strengthen the multiagency

approach. For leadership staff, there was symbolic and practical significance in the same messages being delivered to all (or many) of the professionals in the team around the child,

So if we're working and giving the same messages to foster carers and if there is joint care in between foster carers and schools and different agencies who are working with looked after children I felt it made the whole thing more powerful. I felt this was needed and so I was very pleased to be involved and I felt it was very successful (Leadership 6)

Attendance at the training created a shared language with regard to the skills and values of multiagency working around a child, this facilitated dialogue during (and indeed, after) the masterclasses, as the excerpt from the following interview demonstrates (albeit some power differential remains embedded within the language used),

And I've had a few other carers go on it and again they understood it and I think they just need reminding of it sometimes as time goes by. Some of the other carers you know need reminding, remember this, remember that, and they say oh yeah, and we'll throw it back for them to understand how important they are in that relationship. We're speaking the same language then aren't we? (Fostering Social Worker 1)

The leadership interviewees felt that this shared knowledge and language would help to facilitate progress towards more effective multiagency working over time. However, interview findings highlighted the difficulties inherent in attending five full days of training. This was significant for foster carers who had caring commitments and for co-professionals who had caseloads to manage and other work commitments. The lack of children's social workers attending the training was of particular significance for participants,

And there was a serious shortage of child care social workers [on the training] there and I felt like that was you know a bit of a let-down because the whole principle of this is to bring people together for you know, and one of the principles of it is you know that you know people are brought together and that we all kind of work towards a similar goal (Co-professional 3)

Hence, the lack of children's social workers was a key omission from the training,

They are the ones that we battle with day-to-day, our family support worker supports us, they do they support us brilliant. But the social workers we've got to say something to, they don't always agree. If they had come and heard those foster children speak and the whole training, you know we want to all work together as a team but all the team wasn't there (Pioneer 1)

The Pioneers thought that third sector agencies such as Barnardos and also contact centre staff and the police would have benefitted from attending, as well as greater representation of staff from health and schools, including senior leadership. Overall, the Pioneers observed that there were a lot of absent members, Pioneer 1 mentioned that 'almost half the name badges were not claimed' at the masterclasses she attended.

Perceptions of the Masterclasses

Overall, the findings from the three-month interviews were positive. Most reported having enjoyed the learning. There was widespread consensus amongst participants and leadership that the content of the masterclasses was appropriate for the audience. It was felt that the content of the masterclasses was not 'radical'. Instead, it 'reinforced', and 'reiterated' the values and attitudes held by the attendees prior to the masterclasses. Participants perceived the key messages to have been the importance of adopting a holistic view of child wellbeing and placing greater value on the contribution of foster carers to both wellbeing and multiagency working. In addition, participants indicated the importance of effective multiagency working in the team around the child.

The attendees indicated that they were working towards these wider values and found the masterclasses a valuable opportunity to reflect upon and enhance their practice,

I think the key thing for myself and my colleagues was a reaffirmation and a reminder of the range of experiences that these children have had, even the impact on their physiological development at an early stage and how that translates into their long-term opportunities and how we can best help support them (Key stakeholder, Education 2)

The main message was an appreciation that collaborative multiagency working in the team around the child is 'crucial' to the wellbeing of children looked after,

I think the ethos is about making every effort to make sure that we're all working together and that we're not working in silos, we all have a part to play in the wellbeing of the children that are looked after. And that we should make every effort to ensure that that work is joined up and that we're using each other as resources to ensure that the experience of the child that's looked after is a more positive one. And they see the team around them as equal partners in their wellbeing. (Leadership 5)

Sessions that included practical skills training were valued. These features of the course helped the participants to remain engaged in what was described as an 'intensive' course in terms of the volume of content in the masterclasses.

The sessions that were highlighted as particularly useful and most regularly mentioned were: PACE; Common Third, techniques for dealing with stress, emotional literacy; and empathic practice in relation to children and other professionals within the team around the child. Many professionals talked about beginning to use these in practice,

I've used the hidden third several times since then with different foster carers. (Helen, fostering social worker, case study)

Learning from the Masterclasses

Many participants had difficulties recalling what occurred in each masterclass. One foster carer noted that it was difficult to retain and remember such large amounts of information, especially as some aspects had been skimmed over and had not been put into practice:

We talked about something, we went away, we forgot, then we came back the following week and then it's like as soon as you got in there we have to recall everything that we had done in the last masterclass well you know because we weren't applying it maybe we really just spoke about it and literally you know bypassed it and just waited until the next one (Foster Carer 4)

Leadership interviewees were most familiar with the social pedagogy concept and valued the theoretical underpinnings of the Fostering Wellbeing programme, it was less useful to frontline practitioners. It was also queried whether masterclass content had been too theoretical rendering it difficult to retain and put into practice,

I know a couple of foster carers struggled with it (Foster Carer 2)

Participants were more familiar with the ten principles of the Fostering Wellbeing model, using them to remember key messages from the masterclasses and to consider how learning from the courses had impacted, or might impact, on their practice.

The amount of time that had elapsed between the course and some of the interviews (up to 12 months) may have made it difficult to recall some of the detail of the masterclasses. When asked, most respondents found it difficult to identify specific classes that had been more or less useful. The 'overabundance' (foster carer1) of material covered over the five days of training may also have contributed to this. In addition, not everyone had been able to attend all masterclasses due to work commitments and weather related issues (one set of masterclasses was badly effected by snow in early 2018).

At twelve-month follow up, commitment to the Fostering Wellbeing model was still very strong and for some even more so than in the first interview. This might have been because they had opportunities to put some of the skills into practice, or it may be that those who were willing to be interviewed already had a strong commitment to this way of working. The learning and messages from the masterclasses were still clear for those interviewed again after 12 months.

Networking

After 12 months participants still valued the opportunity to have attended training with other professionals, as this had given them opportunities to network and develop more personal relationships with colleagues,

Just the main bit for me was to get multi-agencies in the same room talking about children looked after and fostering as well, because I think very rarely that you get the chance to do that so that was the main thing that came out of everything for me, was getting everyone in the same room (Co-professional 1: 12 months).

This was especially the case when a group of professionals from the same team around the family- had all attended the same training,

Definitely the young people speaking and the foster carers themselves. I think that was the most powerful message. And also because I'm in an educational role, the Ed Psych and the teacher in [school] who specifically is attached to looked after children [all attended] (Co-professional 2: 12 months)

Connections had been made during the masterclasses that led to closer working, although this may have relied on individual commitment to take these forward,

I have attended a meeting in the [CLA friendly] school actually with the teacher that spoke on the course based with looked after and the young person themselves that's looked after, so that was good to be able to pull all that together and to be on it, it was an amazing outcome. We all got together, multiagency, and we put a plan in place, and it worked and that was it, it was resolved. So that was really successful, and I think that highlights the need of having somebody like that in a school, the importance of having that person (Coprofessional 2: 12 months)

There was a recognition by social work and education of the need to work more closely with foster carers and families more generally when children are struggling,

And that's something I was talking to a school about last week, not in relation to looked after children actually, just in relation to young people who are struggling and disengaging. You know including families in that and copying that kind of model (Co-professional 2: 12 months)

Changes to practice

There was a sense form the interviews that the learning had begun to impact on practice and on outcomes for children. Pioneer 1 felt that her attendance at the masterclasses improved her practice as a foster carer and benefited all of the adults and children in her household,

My fostering experience is better, we are definitely a little bit, it's towards us all being equal it's definitely, in my case now it's getting there. Whereas in the past I was not an equal with the professionals who made decisions. So for me you know the masterclasses and everyone meeting together it's been far better for us as a family. (Pioneer 1)

The Pioneers expressed that they benefitted from better knowledge and understanding of the rights of the child which has contributed to their motivation to persist in ensuring that those rights are attained and appropriate measures are put in place to support the wellbeing of the children in their care.

The Pioneers felt that the masterclasses gave them tools to communicate better with the children in their care in order to understand their needs and to advocate and represent their perspectives in meetings with other professionals. Some of the skills mentioned by Pioneers included 'emotional literacy' and the ability to develop an 'empathetic relationship' with a child.

Education

One Pioneer referred to a school exclusion being prevented through multi-agency consultation (including school, foster carer, young person and the voice of the birth family). Others mentioned that an action plan had been developed for a child looked after incorporating the elements from Fostering Wellbeing.

The explicit focus on children looked after had (in some schools) had an impact on educational outcomes,

And obviously you can see that with the outcomes the pupils are achieving then because if it's right here historically CLA pupils don't achieve the same sort of outcomes as their other peers, but we have managed to narrow that gap here (Co-professional 6: 12 months)

It is difficult to know how much this can be attributed to Fostering Wellbeing, as the school to which the professional refers is already rated as 'CLA friendly', however the focus on social pedagogy and children looked after certainly galvanized and helped to develop their approach,

So it's just exciting to see the changes you know with the friendly schools award that's brilliant because it's getting schools that maybe weren't thinking about it to think about it (Co-professional 1: 12 months)

Perceptions of other professionals brought about by masterclasses

There were differing views of whether professionals' perception of foster carers had changed. Most of the co-professionals thought they had, although the foster carers were less sure,

Yes definitely [view foster carers as professional]. I mean I think they're pivotal, they need to be involved and I can't believe that they're not really in some situations (Co-professional 2: 12 months)

There was some recognition that such a change required systemic change beyond that of a training programme,

Oh... do you know changing perceptions doesn't happen with a course, I think it needs to be a change in culture. And I guess that can only start within social services and out because I guess if the people we work closely with don't always view it as a profession then we can't really be expecting health, education or other organization to, do you see where I'm coming from? (Pioneer 3: 12 months)

It was also acknowledged that whilst there were limitations on what a five-week training programme can achieve, the inclusion of foster carers as professionals in the team around the child was a powerful message. One foster carer stated that foster carers themselves needed to accept their position and reiterate this to the professionals they work with,

I think that's also the responsibility of the foster carer to project a professional image and ensure that we are raising awareness and being, you know, saying to education, you know, I'm a foster carer but that's a professional role. Pioneer 3 (12 months)

Whilst foster carers were beginning to feel part of the team around the child, some evident barriers still existed. Foster carers still felt scrutinised by other professionals, and examples were cited where they still had been questioned about why they had not taken action, for example, when a child had a cold. There was a feeling that similar questions would not be asked of fellow colleagues.

Summary

- The most powerful impact of the masterclasses was the delivery of individual stories by a range of 'experts by experience'. The personal narratives of care experienced young people and foster carers impacted on professionals and remained imprinted on people's memories over a year later. In particular, it led to staff in education having a better understanding of some of the difficulties young people face.
- The range of experts who presented were also well received.
- The masterclasses were handled sensitively, good relationships were built up with the audience, and the facilitators' open and responsive style worked well.
- The mixed training was successful and universally well received, with foster carers, health, education and social workers attending together.
- It was difficult to achieve attendance across all disciplines (health and children's social workers in particular).
- Multi-disciplinary training requires an organisation-wide representation (e.g. whole school approach) rather than preaching to the converted. To extend further into education and children's social work teams, and some representation of senior leadership (people who have authority to make changes and decisions) would be helpful.
- The messages and techniques from the masterclasses were used in on-going practice and in supervision between fostering social workers and foster carers and this had the potential for a levelling effect.
- Some of the earlier masterclasses should cover less material and ensure time for multi-agency discussion.
- Some modification may be required to make the masterclasses more accessible to a wider range of professionals.
- Joint planning sessions for all presenters on a particular day of masterclasses or across the cohort, including some information about other presentations, the range of the audience and the overall aims of Fostering Wellbeing would be helpful. This will enable better planning of sessions.
- The use of local/regional presenters should continue because it means that speakers are available for further consultation, co-working or training to interested participants or departments.

Fostering Wellbeing Pioneers

At the point of the focus group the role of Pioneer had not been fully embedded. Much of the evidence for consideration of whether the element of the Pioneer is being delivered satisfactorily comes from the Pioneers themselves, rather than from foster carers who have been helped or supported by them.

Context and Background of Pioneers

The Fostering Wellbeing aims to recruit nine Pioneers across Cwm Taf. There were seven Pioneers at the time the focus group took place with three Pioneers taking part in a focus group. All of the Pioneers were experienced foster carers who regularly attended training and had links with other foster carers prior to becoming Pioneers. Pioneers indicated that the training they have received as part of the Fostering Wellbeing programme reinforced and strengthened their existing approach to foster care, rather than being a result of the programme.

Pioneers are expected to work approximately four hours a week at £15 per hour, although the system of payment is flexible to account for the various activities they undertake. They have 'zero-hour' contracts and can work fewer or more hours every week.

Motivation to support other foster carers

All of the Pioneers were motivated to improve the opportunities and experiences of looked after children. They all expressed a desire to raise the status of foster carers in professional settings and to provide support and share experiences with their peers. Two of three Pioneers stated that their primary motivation to become Pioneers was to improve the educational experiences of looked after children and to enable foster carers to influence decisions around education,

I came aboard to make a child's life better. I am now aboard this to make a foster carers life better, quite frankly if I can. And to improve systems through schools if at all possible and I think we could do that (Pioneer 3)

All three Pioneers stated that payment was not their primary motivation. Whilst one Pioneer has volunteered unaware of the payment involved, another stated that they had

not submitted any timesheets in the time they had been involved in the programme. The final Pioneer reported difficulties in accepting payment alongside their part-time employment as it alters the amount of taxable income they earn. This led to the Pioneer withdrawing from the Programme. Nevertheless, they stated that the Pioneer role is one which deserves payment once it is fully operational. All the Pioneers were satisfied with the arrangements for pay and working hours.

Training

In addition to attending the Masterclasses, Pioneers have also undertaken a bespoke training programme (Appendix 5). In addition, Pioneers had received training on operating the Pioneer helpline. They were given guidance on how to handle difficult calls and how to signpost foster carers appropriately. Their training had focused on providing a 'sounding board' based on the premise that by being given the opportunity to talk through the problem foster carers would,

normally come up with their own resolution themselves, they just need to offload (FC2).

Pioneers reported a wariness about presenting themselves as social work professionals to other foster carers. Rather they appeared keen to provide peer support on the basis of their own experiences of foster care.

Pioneer Role

At the time of the focus group the Pioneer role had yet to fully begin. This was in part due to delays in the production of a booklet advertising the Pioneer service to local foster carers and the creation of Helpline Guidance Booklet to support their role answering foster carer queries via a dedicated helpline. One Pioneer had taken one call at this point. Whilst Pioneers reported feeling reassured that social workers will be close by to offer guidance, they also indicated reported feeling that social workers were cautious about their ability to offer a professional service,

I think they are finding it a little bit difficult within the office to accept the situation, they're not being aggressive towards it because there is still that thought in some minds that we are not professionals, we could put our foot in it

and we are working within the confines of a local authority and we have to be very careful dealing with members of the public per se (Pioneer 3)

Pioneers felt that the Helpline Handbook may alleviate some of this tension as it is expected to include frequently asked questions and suggestions for signposting. Indeed, the delay in publication was due to the variety of different questions that might be asked. Pioneer 1 thought that the handbook would make them feel more confident in offering advice and support to other foster carers.

Pioneers indicated a range of roles once their work begins including the provision of training and guidance to education staff on promoting the wellbeing of looked after children; working with foster carers; co-facilitating courses on wellbeing run by social services for new and existing social workers and prospective and existing foster carers; and presenting at future Masterclasses. In addition, Pioneers expected to run regular coffee mornings for foster carers. These coffee mornings had been organised by one of the Pioneers before the Fostering Wellbeing programme, along with occasional events such as summer picnics for foster carers and children.

Whilst one Pioneer was enthusiastic about the role and the potential to develop this further, another expressed reservation about foster families welcoming another set of professionals or support workers into their homes because of the amount of people already involved in the lives of looked after children. Nevertheless, it was noted that the telephone helpline could be expanded to include home visits.

When asked what was needed to improve the wellbeing for children looked after, Pioneers noted the significance of matching the child to the right home and need for money to recruit foster carers and social workers,

It just needs more finance to have more people on the ground to alleviate the stress...more social workers. The workload is ridiculous and that's where you get underperformance and you don't get consistency (Pioneer 2)

Summary

- The Pioneers embraced the Fostering Wellbeing Programme.
- The Pioneers felt confident in the training they had received for their new role and looked forward to staffing the foster line.
- The Pioneers recognised the difficulties of communication and respect when working with different groups of professionals, but in the main these difficulties were receding.
- Some of the improvements in professionals' understanding of their role were
 directly attributable to the masterclasses, but others had already been set in motion
 before the Fostering Wellbeing initiative, for example, the CLA friendly school
 scheme. It is therefore difficult to isolate the impact of Fostering Wellbeing,
 especially as the role of Pioneer had not been fully embedded.
- The co-location of foster carers with social workers to provide help and support is an innovative measure and future evaluations should explore this further.
- The role of Pioneer did not have a clear focus on education, but encompassed wellbeing more generally.
- None of the Pioneers were kinship carers and it will be important to give consideration to the needs of kinship carers when recruiting future Pioneers.

Structural and Cultural Change

Findings suggested that local authority leadership of Fostering Services have a strong commitment to embedding the principles of Fostering Wellbeing into professional practice. Hence one leadership professional indicted a commitment to the model by including the wellbeing principles into the statement of purpose for Fostering Services,

I want it to be part of the ethos so I'm going to write it into my statement of purpose to say these are our aims, these are our objectives and this is the message, this is what we've trained our foster carers on and this is the model that we're using. So I'm going to write it into our structure. And I know that sounds like a simple thing but actually if you start doing that then it's everywhere then isn't it? It's in all of your publicity and your paperwork and it's on your website and it's what you give people (Leadership 1)

Joint attendance at the masterclasses and the introduction of Pioneer foster carers were viewed as a symbolic acceptance of the foster carers as valued partners, helping to raise their status among other professionals in the team around the child. However, cultural change, and structural shifts were also in evidence prior to the Fostering Wellbeing programme. In this regard, the support of senior staff was seen as a paramount for structural change to occur,

It's a very, very simplistic model really and it's something that can be achieved but you know it's the goodwill to get that and the impetus to move it forward is needed really. But I think you know (we are) very fortunate that our local authority I think the divisional director is very keen on making a step change and therefore that's the impetus that we have, we've got that support from senior managers (Leadership 8)

There had been a number of changes to the structure of fostering teams in order to better support foster carers. In one of the local authorities, the fostering team was restructured to separate the assessment function from the support function so as to provide targeted support for foster carers. In the other local authority, the fostering team was divided to create dedicated teams to support kinship foster carers and mainstream foster carers. Funding was also obtained to employ a psychologist and related therapists to support the mental and emotional wellbeing of children looked after,

I've separated out the assessment function from the support function because that's what the foster carers need. If they can have their support and we can support them then they can support the young people, and then maintain their placements. So when there's problems we can go in and support (Leadership 1)

There have been two structural changes arising more directly from the Fostering Wellbeing programme: the introduction of Pioneers and changes to the regional training programme to embed Fostering Wellbeing principles. Many saw the first step is a 'shared language' and 'shared training', involving dialogue and learning from and about each other which many interviewees referred to.

The accommodation of the Pioneer role required a number of structural and cultural changes. It was decided at the planning stages of the programme that the helpline would be located within the social services offices, sharing office space with the Fostering Team. The physical accommodation of Pioneers was more complex than envisaged. Practical barriers included ensuring confidentiality, training, allowing Pioneers security clearance to access to the building and the provision of local authority email addresses. Alongside there were cultural barriers in the discomfort that social workers felt in working in such close proximity to foster carers. Their concerns included issues around maintaining confidentiality and trusting the foster carers to give the appropriate advice and signpost correctly were specific concerns,

The Fostering Network people underestimated perhaps, I think they thought it would be easier. And I suppose messages for future practice would be you know these projects are marvellous, they're great and we need the help but actually the people who are coming into our organisation they need to sort of understand how we work a little bit as well. Because it's a little bit of like it's not so simple, [...] I don't think anybody envisaged how hard it would be to bring all of this in to a local authority setting (Leadership 1)

The perseverance of those in leadership roles in overcoming these barriers and ensuring that the Pioneers felt comfortable and welcome signifies a high level of commitment to raising the status of foster carers and embedding the principles of the Fostering Wellbeing programme. Overall, they feel the effort has been worthwhile. Leadership were aware of the symbolic importance of the physical presence of foster carers among social work teams and hope that this will facilitate more mutually supportive working relationships, to move

away from the 'us and them' stance. The two local authorities have worked together, taking a regional and collaborative approach to the development of the Pioneer role.

Question two - Determine whether Fostering Wellbeing has led to greater engagement between foster carers, education and social care

Interview findings revealed perceptions as to how beneficial the multi-disciplinary approach to training had been. Most delegates saw this as a highlight of the Fostering Wellbeing programme. One limitation of the Fostering Wellbeing programme is the 'reach' that was achieved across the different disciplines and the high attrition rates. This was commented on by numerous participants, especially the lack of health and children's social workers in attendance. The draw-back of this is that not all professionals were engaged and it was not a whole team around the child approach. We can see from the tables below how few from health and social services attended. It is notable that 57 out of 131 co-professionals only attended between1-3 masterclasses; and 42 out of 94 foster carers only attended 1-3 sessions. In total 225 people attended one or more masterclass. The interview data suggested that time commitments were a particular difficulty for all professionals, and this would suggest the need to reduce the time commitment even further for any future iterations of the programme.

Table 1 Cohorts 1-4 co-professional attendance

	Numbers of masterclasses attended						
	5	4	3	2	1	Total	
Health	0	1	0	1	1	3	
Education	11	13	10	2	6	42	
Social Services	13	13	11	13	5	55	
Youth Offending	5	3	0	0	1	9	
Care leaver	1	0	1	0	0	2	
Other	4	10	4	2	0	20	
Total	34	40	26	18	13	131	

Table 2 Cohorts 1-4 foster carer attendance

	Numb	Numbers of masterclasses attended					
	5	4	3	2	1	Total	
IFCS	0	1	0	1	0		
Merthyr	5	9	4	6	6	30	
RCT	19	15	11	8	2	55	
No LA specified	0	0	1	0	1	2	
Community home staff	3	1	0	0	1	5	
Total	27	26	16	15	10	94	

This question will be further exemplified by drawing on the following case study.

Case Study

Peter formed the basis of a case study investigating the team around the child. The aim of creating a case study was to explore how the team around the child worked together and the impact of the Fostering Wellbeing Programme on each player in the child's life.

Background

Peter is 14 years of age and has been in his current foster home for 7 months where he has settled and is very happy. There are two children in the foster home and they get on well together. He attends mainstream school but struggles with communication and lacks confidence in his ability.

Team around the child

The foster carer

David and his wife have fostered for some years. David's narrative of family provided rich and detailed descriptions of the efforts these carers go to provide a settled and nurturing placement for the children in their care. David and his wife make efforts to integrate the children into the life of the family and the local community by encouraging them to participate in their activities and hobbies.

David notices small details about Peter's interactions with others and this demonstrates the level of attention and care he pays to his social development. In the interview he projected a real sense that he really knows the children, not just the practical aspects of their lives, such as their educational needs, but their temperaments, their likes and dislikes, their fears and hopes and personalities.

In terms of education, David noted that there is no member of staff working directly with Peter, other than the communication teacher who oversees a group of 30 children. David has spoken to the deputy head about the children's progress and attainment. The school, in agreement with the local authority, have arranged for Peter to be put back an academic year, to allow him more time to prepare for his examinations and to study fewer subjects. This had been discussed in a meeting with Helen the supervising social worker, to ensure

that Peter's educational needs are being met. As well as focusing on immediate needs by helping Peter with his school work, David has an eye towards the future and setting the best foundations for the children

See he needs one to one on his mathematics. I'm trying my hardest with my Carol Vorderman book but its years and years and it's such a technical thing isn't it? So we concentrated on geometry. Anyway, he had his five geometry questions right. So I said to him right we concentrated on that, we got it right I said next time we'll concentrate on something else because then it's like little building blocks you know.

David talks to Peter about his future aspirations, encouraging conversations about future plans and how to meet those aspirations. This includes conversations about part-time and voluntary work, planning ahead for when he is 16. David's supervising social worker is aware of these conversations and has had some input in terms of offering ideas about work experience and voluntary work.

David enjoyed the emotional content of the masterclasses and felt the sessions led by care-experienced young people were particularly impactful, he felt that they added the authentic voice of looked after children and helped to dispel misconceptions because hearing from someone who had 'walked the walk' brought their experiences of foster care to life. The masterclasses were a 'reminder that no matter how much formal training, you're dealing with human beings and their flaws, inconsistencies, in the case of children (looked after) their traumas'.

He felt that there was poor take-up of the masterclasses among child care social workers. Other professionals involved with the family are workers at the contact centre and David felt that it might have been useful for them to have attended. He described the support workers at the contact centre as 'invaluable' for Peter (he meets his mother at a contact centre). Overall, David did not feel that attendance at the Fostering Wellbeing masterclasses had impacted significantly on his foster care practise, instead he felt it reinforced his existing good practice.

The fostering social worker

Helen highlights that the children in foster care are her priority and that has not changed,

I mean for us, looked after children are our business do you know what I mean? And that's where my heart lies and always has done.

Helen demonstrates a holistic understanding of the needs of the children in the foster family. She has a good relationship with David the foster carer, recognising and placing value on his skills and approach to ensuring the wellbeing of the children in his care. Due to David's skills and experience, the main form of support Helen provides is to discuss strategies and ideas to meet the needs of the children. Helen is aware of the children's experience of school, the progress they have made, any areas of concern, and some of the adjustments made by the school to accommodate additional needs. She suggests that the school they attend is one which might benefit from Fostering Wellbeing training.

For Helen, there were three main benefits of attending the masterclasses: practical skills training; emotional content and shared reflections; and learning alongside foster carers. Helen was introduced to new skills on the practical aspects of working with children looked after, particularly in the areas of relationship building and understanding the needs of the child. She found the sessions on Emotion Coaching and PACE particularly helpful in this regard. She understands that the aim of these sessions was not to provide comprehensive training but to introduce new ideas and skills. Nevertheless, she does feel that more detailed training might be a useful follow-up,

I think that was the purpose of it wasn't it, it was about kind of opening your eyes to different ways of working. It would be good if there was follow-up courses that were more in-depth on certain parts of it, I think that would be useful.

She has since done independent reading and research and has used the 'hidden third' method in her interactions with some children and found it to be very useful,

I've used the hidden third several times since then with different foster carers...[]...It's when you pick an activity, child-led normally, and just enjoy doing that and having that time together and building that into you know your normal day or week so that you spend that one to one time with the child and really get to know them and what makes them tick and things.

Helen really appreciated the emotional content and the space to share reflections with a mix of professionals during the masterclasses. She felt that this aspect of the masterclasses

differentiated them from other training and reminded the professionals involved of the central importance of placing the child at the centre of interventions,

The level of having people with their own reflections, that was different. Most courses are a bit drier than that aren't they, they're more theory based whereas that kind of put meat on the bones in lots of cases and reminded I think lots of people why we are, what we were doing it for.

Helen thought that there was particular value in participating in the masterclasses alongside foster carers, particularly those she supervises. She feels that the Fostering Wellbeing approach allows foster carers 'to understand how important they are in that relationship. She has found that this has altered her relationship with foster carers in a positive way. In her interactions with them during supervisory meetings she now finds it useful to remind foster carers of what they learnt, together, on the courses, particularly with regard to strategies to communicate with children and advocating for them with other professionals – 'we're speaking the same language then aren't we?' She finds that she does not, however, need to do this with David because, 'David is very good and he's...[]...taken the whole wellbeing thought to heart and in everything that he does really you know.'

Fostering Wellbeing has been embedded into the work of the foster care team in RCT in terms of the training provided to foster carers and communication with foster carers in supervision. Helen notes that most of the team have attended Fostering Wellbeing training.

The majority of her good practice seems to have been an embedded part of her professional practice prior to attendance at the Fostering Wellbeing masterclasses. There was evidence though that her participation in the masterclasses gave her information on new skills and resources; prompted further research and reflection on her professional practice; improved and refocused communication with foster carers and children; renewed her commitment to child-centred practice and the equality of status of all professionals involved, including foster carers.

David was already recognised as a skilled foster carer. Nonetheless, Helen thinks that Fostering Wellbeing has helped him to feel empowered and confident to advocate for the children in his care with the school:

I think it empowered David to be able to have deeper discussions with the school whereas not just to take what they've said on face value. And to have the confidence

to know that you know he is the champion for that child and he'll go out and fight for whatever that you know either one of the children need you know? So I think it's given him the confidence and the language to be able to go and do that.

Helen feels that the involvement of foster carers, schools and child care social workers in the Fostering Wellbeing training was limited to the 'good ones'. In relation to school, Helen feels that the Fostering Wellbeing masterclasses have reached those already committed to developing more holistic and wellbeing-focused approaches to CLA and foster care,

There was some schools there but they tend to be the schools that we know are good, and they're good at all the looked after children stuff. Whereas with the schools that actually need some work often don't engage...[she hopes] as the reputation grows and the understanding grows where they will eventually come on board.

It will be difficult to ascertain the impact of Fostering Wellbeing on placement stability if, as Helen states, the foster carers who attended had 'stable placements' and 'good skills'. However, increased confidence of foster carers and feeling more valued may in the future impact positively on the retention of foster carers and therefore stability.

Helen sees the development of the Pioneer role and the peer-to-peer support they offer to foster carers as a positive step.

School

A telephone interview was conducted with Sophie, a teacher who works with Peter around developing his communication skills. Sophie noted that around fifty children in the school had similar difficulties.

Sophie was not aware of Fostering Wellbeing programme or masterclasses and had not attended. She noted the focus of her work with Peter was around helping him to settle in the school and his emotional welfare. She had, had contact with the foster carer; she experienced David as being confident in advocating on Peter's behalf, he has visited the school on numerous occasions for meetings. Sophie felt that Peter has struggled in school and so she has tried various initiatives to help him. Sophie was unsure whether others in the school had attended the Fostering Wellbeing programme and on checking with other colleagues, she confirmed via email that 'the CLA co-ordinator and SENCO (Special

educational needs coordinator) had not attended owing to time restrictions'...(and because) 'the measure of support (Peter) receives at present is very good and therefore did need to intercede'. Clearly, the messages from Fostering Wellbeing had not been received in the school and raises issues about the 'reach' of the Fostering Wellbeing programme. However, it is important to note that David's relationship and communication with the school was positive.

Children's Social Worker

Peter's social worker (Jo) changed during the time of the study. This is not unusual as staff turnover and churn within children's services is recognised as a major problem, not least for the fractured relationships between a child and their social worker. We tried on numerous occasions to contact the social worker who had been working with Peter but were unable to speak with Jo. They had not attended the Fostering Wellbeing masterclasses or been involved in the programme. David was nevertheless positive about Jo.

Health

We interviewed Carol, the senior community nurse for CLA who had, had contact with Peter. She had visited the family in the early stages of Peter being placed with David and his partner, this was just after the first cohort of masterclasses. Carol had presented at a masterclass for the first three cohorts. She observed the rest of the day of training, but did not attend on any others; two of her staff had attended a series of masterclasses. She felt the training had a real impact on understanding the difficulties and experiences of CLA and foster carers, and also of schools. Carol was disappointed about the lack of attendance by health in the masterclasses, and saw this as a 'missed opportunity' in particular for health visitors and school nurses. She noted that much of the training reiterated other training, but hearing it from the 'voices' of care experienced young people and foster carers was much more 'powerful'. She noted that there was some new learning, for example, the educational psychologist when discussing the PACE model, highlighted the difference between sympathy and empathy. Given that Carol had only met Peter and David on one occasion, it was difficult for her to comment on whether any changes had occurred in the team around the family. She noted David's exceptional care of Peter, in particular devising strategies to improve his communication skills. Carol noted that those foster carers who were already 'dynamic' attended the training and in her view this helped to further improve their practice, but that there were foster carers who are not as good and who did not attend. She felt development of the National Fostering Framework to be positive in developing standard requirements for training. Carol noted the impact of foster carer

Pioneers and referred to mentoring of new foster carers by more experienced carers, but was not sure whether this was part of Fostering Wellbeing or a prior initiative. She saw the importance of role-modelling by Pioneers. Carol noted that numbers at the masterclasses were dropping off by the third cohort of classes and could not see the model as sustainable in the long term as there would not be sufficient attendees in Cwm Taf. She saw Fostering Wellbeing moving forward in the future as a national, pan Wales initiative.

Conclusion

It was seen as helpful for the fostering social worker, foster carer and health to attend the same training; it helped to align understandings and to have a common frame of reference. Helen notes the need for follow up training for certain aspects in order to glean more indepth knowledge. David although already dynamic has gained more confidence in liaising with other professionals, notably the school, his belief in knowing he was doing the right thing has been reinforced. There was a sense of more equality in the relationship between Helen and David. Helen and David were having regular discussions about Peter's education and trying to ensure that his needs were met. David had a clear focus on Peter's education and aspirations (Mannay et al. 2015). David saw extra-curricular activities as vital for Peter's wellbeing, as was the need for him to develop more confidence and social skills: further engagement with community facilities would be one channel to help him improve and strengthen these.

The school and Peter's social worker had not attended the training, and the school were not aware of the programme, which questions the 'reach' of the masterclasses, and also whether Fostering Wellbeing is only accessing those who are already 'converted'. At present Fostering Wellbeing has not accessed the whole of the team around the child.

Question three - Assess levels of service engagement with the programme and future sustainability with the programme

There has been a key commitment from leadership and those in management roles to embed the principles from Fostering Wellbeing into fostering and the team around the child.

There are difficulties with the masterclasses getting the reach and the whole team around the child approach, and there is a risk of preaching to the converted. There has not been full buy in from health, education or from children's social work teams. Some of this has been about the time commitments of five full, or more latterly five half days. There may be ways of making the course more accessible. Suggestions included a change of format to 'twilight sessions' or a 'roadshow format', and shortening the course to focus on key messages. Certainly, a roadshow, for example, holding classes at schools, which all professionals could attend might be an interesting possibility. It was also suggested that an annual fostering 'conference' could be held where different aspects of training are offered and where the Fostering Wellbeing principles are further embedded. This latter approach may also enable a pan-Wales approach and the opportunity for Fostering Wellbeing to be rolled out nationally.

The Fostering Wellbeing programme team have made recordings of the masterclasses, so that the masterclasses can be replicated without continually drawing on the range of speakers. This would make future roll out less labour intensive, less costly which could be provided for smaller more localised teams around the child, and also opens up the possibility of on-line training. Smaller, localised team training would enable busy coprofessionals more flexibility in their learning, whereas the disadvantage of on-line training is that it would not render the benefits of multi-disciplinary attendance. On-line development would also hinder networking and opportunities to talk to presenters, ask questions for clarification and meet those with lived experience of foster care.

One participant, Carol (case study) noted that 'numbers at the masterclasses were dropping off' by the third cohort of classes and could not see the model as 'sustainable in the long term', as there would 'not be sufficient attendees in Cwm Taf'. Many noted other professionals who would benefit from attending, those being-leaving care teams, staff from adult teams in preparation for transitions, contact centre staff, police and those working in a Pupil Referral Unit. This would extend the potential audience and bring a wider team

together. However, it was noted that those co-professionals who were perceived as most in need of such training were notable by their absence. This highlights a central issue when offering training models, unless attendance is mandatory there can be a tendency for those more amenable to learning or strengthening methods of working are often those who are more likely to attend. Including accreditation for attendance across disciplines may serve to incentivise attendance in future cohorts.

There are discussions underway to significantly expand the roles of Pioneers as integral to sustaining the ethos of the Fostering Wellbeing programme. Pioneers are the main way that the leadership see the Fostering Wellbeing programme being sustained and advanced in the future. Consideration is needed of how to operationalise this given that Pioneers currently have zero-hour contracts and the potential difficulties in maintaining this role alongside part-time employment. More attention will be needed to ensure they receive on-going support should the role develop.

Summary

- Service engagement has been varied with certain professions in the team around the child not well represented.
- The masterclasses could reduce content and time taken to deliver
- Different models and modes of delivery should be considered.
- Incentivise attendance
- The role of the Pioneer will need to be well supported

Conclusion

Fostering Wellbeing is a programme of work based on two previous pilot projects, London Fostering Achievement (Sebba et al., 2016) and Head, Heart and Hands (McDermid et al., 2016). Fostering Wellbeing aims to improve the wellbeing and educational outcomes for children in care. The programme offers social pedagogical learning in the context of foster care aimed at developing and embedding a consistent and coherent approach across the region which will benefit the lives of children who are looked after.

Fostering Wellbeing is an ambitious programme which seeks to implement cultural and structural and change into the teams and systems that work with children looked after.

Drawing on evaluation findings, a logic model was devised (see page 17) to identify the theory of change underpinning Fostering Wellbeing (Wisconsin, 1991).

The assumptions made in the logic model are that (i) foster carers are an important part of the team supporting children looked after (ii) foster carers have the most contact with the child and probably have the most knowledge about the child (iii) foster carers' expertise and knowledge needs to be acknowledged and respected.

The external factors which might hinder the programme are (i) ability to retain Pioneer foster carers (ii) on-going funding (iii) ability of the masterclasses to access the full team around the child.

The mechanisms of change are understood as follows:

Masterclasses. As a result of the masterclasses which involved listening to the voices of foster carers and care experienced young people, the team around the child become more aware of the needs of the child looked after, the importance of the foster carer and of each team member's role. The team has a better understanding of what needs to change. The joint training of the professionals working with the child creates a shared agreement of underlying principles and values, a joint understanding of social pedagogy, viewing the child holistically in order to better respond to the needs of the child. This creates a shared language with models and techniques of working. In understanding each other's role and difficulties, the team could work together more effectively to support the child.

Action plan. In each of the first three masterclasses a change board was employed. This allowed all participants to use post-it notes to list the changes that they thought would assist in developing the team around the family to better meet the needs of children looked. These were collated by the Fostering Well-being team and transposed into an action plan of culture, system and service planning changes. This was a way to listen to a wide range of professionals to help devise a strategy for change. The subsequent action plan is divided in to themes of: assessment of needs; planning to meet needs; holistic experience for child and foster carer; access to support; communication; development of skills, knowledge and attitudes; practices and structures; systems and policies to create greater stability; and wellbeing and improve outcomes and is guiding future change (see appendix 2). The action plan also creates a shared understanding of what needs to change.

The Pioneer. One of the major mechanisms for change in this model is the foster carer and raising their status. The Pioneer role aims to increase the status of the foster carer and actively bring them into the team around the child. Historically this has not been the case and foster carers have not been treated as professionals (Maclay et al., 2006). The Pioneer supports foster carers by running support groups and an advice line. Pioneers help to train others. In empowering the foster carer as one of the people who knows the child best, and as a co-professional whose views are listened to, positions carers to more confidently advocate on the child's behalf. By listening to both the foster carer and the child, services can be better tailored to the needs of the child looked after. The increased support and recognition gives foster carers an increased sense of purpose, belonging and solidarity. Foster carers become more resilient and their wellbeing increases. This leads to less breakdown of foster placements, more stability for children in foster care and improved outcomes.

Evidence

Whilst the children that we interviewed identified some of the things that impacted on their wellbeing, we cannot say at this stage whether children looked after have or are experiencing increased stability, wellbeing or improved educational outcomes as result of the Fostering Wellbeing programme. Structural and cultural changes will take some time to take effect.

There is a wider context of an appetite for change within Cwm Taf leadership group as demonstrated in key stakeholder interviews. Leadership have negotiated many structural

barriers, for example, to enable the Pioneer advice line to be sited within the local authority fostering teams.

There is evidence in the findings that having foster carers speak at the masterclasses helped to change delegates' perspectives and understanding of the foster carer's role. The masterclasses foregrounded the voice of both the foster carer and the care experienced child and this was very powerful. There is evidence that listening to the voices of care experienced young people helped professionals better understand their needs.

The multi-disciplinary training created some shared understanding and language and there are examples of fostering social workers and foster carers using the techniques in practice and taking a joint approach to working with children looked after. Cultural change however will take some time to become embedded and ongoing work will need to be undertaken to reinforce these messages.

There is evidence of the beginning of a change in status for foster carers. Pioneers suggest that they feel this is happening, as do co-professionals. Some foster carers and Pioneers feel more able to advocate on behalf of the child. The additional support mechanisms being made available to foster carers via the Pioneer role of support groups and advice lines, based in local authority offices, symbolically and practically recognises their importance as key players. The Pioneer role is an exciting new development but is only at an inception stage. Pioneers will need to be fully supported in their role which will require an on-going investment of social worker time, and it will be essential to ensure Pioneers do not become overburdened. Evaluation of the Pioneer role would be helpful, to consider if it should be replicated in other local authorities.

Whilst we can see the start of some changes, the greatest difficulty has been around attendance and attrition at masterclasses. The masterclasses have struggled to engage all professionals. Feedback about the classes was positive, valuing the experts by experience and multi-disciplinary delivery. Criticisms related to the time commitment required and the over-abundance of content. Consideration is needed as to how to address this going forward. Multi-disciplinary training should continue with some consideration of incentivising attendance.

Future iterations of the masterclasses should explicitly be brought into closer alignment with the wider context in Cwm Taf in order to dovetail with the Children Looked After Friendly Schools agenda and National Fostering Framework. However, it will be important to

ensure that some of the distinctiveness of the Fostering Wellbeing model is maintained and not subsumed within the wider initiatives, particularly the focus on multiagency training, raising the status of foster carers and listening to the voices of experts by experience.

References

Berridge, D. (2016) Policy transfer, social pedagogy and children's residential care in England. *Child & Family Social Work*, 21: 76–84

Berridge, D. (2012) Reflections on child welfare research and the policy press: virtual heads and the education of looked after children, *British Journal of Social Work*, 42, 1, 26-41.

Berridge, D., Biehal, N., Lutman, E., Henry, L. and Palomares, M. (2011). *Raising the bar?* Evaluation of the Social Pedagogy Pilot Programme in residential children's homes. Research Report DFE-RR148.

Brady, E., & Gilligan, R. (2018). The life course perspective: An integrative research paradigm for examining the educational experiences of adult care leavers? Children and Youth Services Review. doi:10.1016/j.childyouth.2018.02.019

Briskman, J., Castel, J., Blackeby, K., Slack, K., Stenbbens, C. Leaver, W. and Scott, S. (2012) *Randomised controlled trial of fostering changes programme*, National Academy for Parenting Research, Kings College, London.

Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research iPsychology*, 3, 77-101.

Bryman, A. (2012). Social Research Methods. Oxford. Oxford University Press.

Cameron, C. (2013). Cross-National Understandings of the Purpose of Professional-Child Relationships: Towards a Social Pedagogical Approach, *International Journal of Social Pedagogy*, 2, p.3-16.

Cameron, C. (2016). Social Pedagogy in the UK Today: Findings from evaluations of training and development initiatives, *Pedagogia Social. Revista Interuniversitaria*, 27, p.199-223.

Cocker, F., & Joss, N. (2016). Compassion fatigue among healthcare, emergency and community service workers: A systematic review. *International journal of environmental research and public health*, 13(6), 618.

Connelly, M., Graham and Furnivall, J. (2013) Addressing low attainment of children in public care: the Scottish experience. *European Journal of Social Work*, 16 (1). pp. 88-104

Coussée, F., Bradt, L., Roose, R., and Bouverne-De Bie, M. (2010). The Emerging Social Pedagogical Paradigm in UK Child and Youth Care: Dues Ex Machina or Walking the Beaten Path? *British Journal of Social Work*, 40, p.789-805.

DfES. (2004). Every Child matters. London: DfES

DfES. (2007). Care matters: Time for change. London: DfES

Eichsteller, G. & Holthoff, S. (2010). *Social Pedagogy Training Pack*. Allithwaite: ThemPra Social Pedagogy Community Interest Company

Evans, R., Brown, R., Rees, G. and Smith, P. (2017), Systematic review of educational interventions for looked-after children and young people: Recommendations for intervention development and evaluation. *British Educational Research Journal*, 43: 68-94.

Ferguson, H., Harvey & Wolkow, K. (2012). Educating children and youth in care: A review of barriers to school progress and strategies for change. *Children and Youth Services Review*. 34. 10.1016/j.childyouth.2012.01.034.

Gharabaghi, K. and Groskelg, R. (2010). A Social Pedagogy Approach to Residential Care: Balancing Education and Placement in the Development of an Innovative Child Welfare Residential Program in Ontario, Canada, *Child Welfare*, 89, p.97-114.

Higgins, C., Jones, J., Bevan, H. and Beddoe, E. (n.d.) Rhondda Cynon Taf and Merthy Tydfil Local Authorities Children Looked After Friendly Schools, Cwm Taf

House of Commons (2009). Children, Schools and Families Committee Looked-after Children: Government Response to the Committee's Third Report of the Session 2008-09.

Jackson, S. (2010). "Reconnecting care and education: from the Children Act 1989 to Care Matters", *Journal of Children's Services*, Vol. 5 Issue: 3, pp.48-60

Jackson, S & Cameron, C. (2014). Improving Access to Further and Higher Education For Young People in Care: *European Policy and Practice*. London and Philadephia. Jessica Kingsley Publishers.

Jackson, Sonia & Höjer, Ingrid. (2013). Prioritising education for children looked after away from home. European Journal of Social Work. 16. 10.1080/13691457.2012.763108.

Her Majesty's Government (2004). Children Act 2004. London: Her Majesty's stationery office, pp.http://www.legislation.gov.uk/ukpga/2004/31.

Le Grand, J. (2008). Consistent Care Matters: Exploring the Potential of Social Work Practices. London, DfES.

Legislation.gov.uk. Children Act 1989. [online] Available at: http://www.legislation.gov.uk/ukpga/1989/41/section/17 [Accessed 17 Mar. 2019].

Legislation.gov.uk. Children and Young Persons Act 2008. [online] Available at: https://www.legislation.gov.uk/ukpga/2008/23/contents [Accessed 18 Mar. 2019].

Legislation.gov.uk. Social Services and Well-being (Wales) Act 2014. [online] Available at: https://www.legislation.gov.uk/anaw/2014/4/contents [Accessed 18 Mar. 2019]

Mannay, D. 2016. *Visual, narrative and creative research methods: application, reflection and ethics.* Abingdon: Routledge.

Mannay, D.et al. 2016. Exploring the educational experiences and aspirations of Looked After Children and Young People (LACYP) in Wales. Project Report. Cardiff: Children's Social Care and Research and Development Centre (CASCADE).

Mannay, D., Rees, A. and Roberts, L., eds. 2019. Children and young people 'looked after'? Education, intervention and the everyday culture of care in Wales. Cardiff: University of Wales Press

Mannay, D., Staples, E., Hallett, S., Roberts, L., Rees, A., Evans, R. & Andrews, D. (2015) Understanding the educational experiences and opinions, attainment, achievement and aspirations of looked after children in Wales (Cardiff, Welsh Government).

Männistö, I. I., & Pirttimaa, R. A. (2018). A review of interventions to support the educational attainments of children and adolescents in foster care. *Adoption & Fostering*, 42(3), 266–281.

McDermid, S., Holmes, L., Ghate, D., Trivedi, H., Blackmore, J. and Baker, C. (2016). *Evaluation of Head, Heart, Hands: Introducing social pedagogy into UK foster care. Final report*. Centre for Child and Family Research, Loughborough University and the Colebrooke Centre for Evidence and Implementation.

McDermid, S., Trivedi. H., Blackmore, J. and Holmes, L. (2015). Developing the art of social pedagogy: The views and experiences of foster carers and the children and young people of Head, Heart, Hands: The second year. Centre for Child and Family Research, Loughborough University.

Maclay, F., Bunce, M. and Purves, D. (2006) Surviving the system as a foster carer. *Adoption and Fostering*, 30, 1, 29-38.

Nutt, L. (2006) The Lives of Foster Carers: Private Sacrifices, Public Restrictions, Oxon: Routlege.

Ottaway, H. and Selwyn, J. (2016) 'No-one told us it was going to be like this': Compassion fatigue and foster carers. University of Bristol. Publisher's PDF.

Petrie, P., Boddy, J. and Cameron, C. (2002). 'All Round Friends', *Community Care*, 12th December, p.34-35.

Petrie, P., Boddy, J., Cameron, C., Wigfall, V. and Simon, A. (2006). *Working with Children in Care: European perspectives*. Buckingham: Open University Press.

Pithouse, A. and Rees, A. (2014) Creating Stable Foster Placements: Learning from children and the Families who Care for them, London: Jessica Kingsley.

Pithouse, A, Lowe, K, Tout, J Hill (2004). Foster carers who care for children with challenging behaviour: A total population study. Adoption & Fostering 28 (3), 20–30.

Pithouse A., Hill-Tout J., Lowe K. (2002). Training foster carers in challenging behaviour: A case study in disappointment? Child & Family Social Work, (7) 203-214

Plummridge, G. and Sebba, J. (2016) *The impact of unproven allegations on foster carers,* Oxford: Rees Centre publication.

Rees, A. The daily lived experience of foster care, In Mannay, D. Rees, A. and Roberts, L., eds. 2019. *Children and young people 'looked after'? Education, intervention and the everyday culture of care in Wales*. Cardiff: University of Wales Press, pp 85-99.

Ross, C. and Reskin B. (1992) Education, control at work and job satisfaction, *Social Science Research*, 21, 1, 134-148. https://doi.org/10.1016/0049-089X(92)90012-6

Schofield, J. and Beek, M. (2014) The Secure Base Model: promoting attachment in foster care and adoption, London BAAF.

Scottish Executive (2005). Getting it Right for Every Child. Available at: www.childrenshearingsscotland.gov.uk/pdf/review/2005/review.pdf

Sebba, J., Luke, N., Rees, A., Plumridge, G., Rodgers, L., Hafeji, K. and Rowsom-Smith, C. (2016) *Children in Care: Evaluation of the London Fostering Achievement Programme*, Oxford: Rees Centre.

Sebba J, Berridge D., Luke N., Fletcher J., Bell K., Strand S., Thomas S., Sinclair I. & O'Higgins A. (2015) *The educational progress of looked after children in England: Linking care and educational data* (Oxford, Rees Centre for Research in Fostering and Education and University of Bristol;).

Sinclair, I., Gibbs, I., & Wilson, K. (2004). *Foster Carers: Why they stay and why they leave*. Jessica Kingsley Publishers.

The Fostering Network (n,d.). *Head, Heart, Hands: Introducing social pedagogy into foster care.* Available from:

https://www.thefosteringnetwork.org.uk/sites/www.fostering.net/files/content/head hear t hands impact report.pdf

The Fostering Network (2019). State of the Nation's Foster Care Report. [online] Available at:

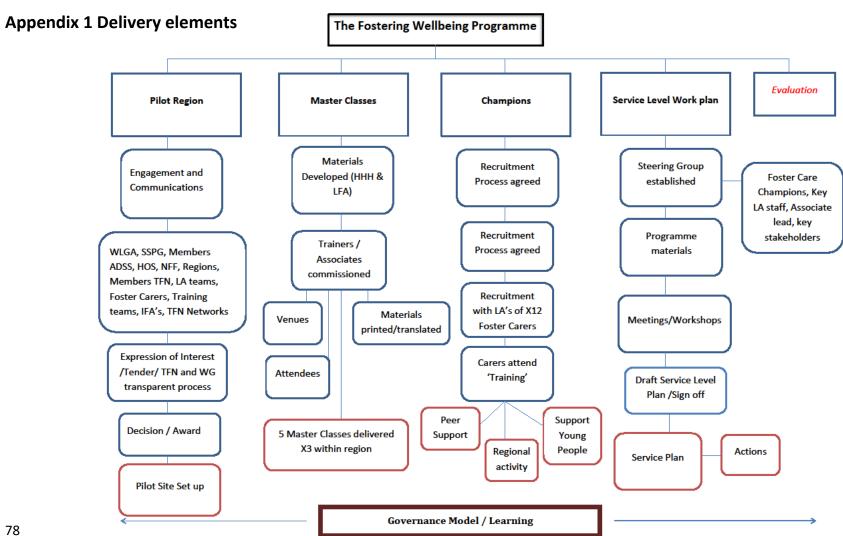
https://www.thefosteringnetwork.org.uk/sites/www.fostering.net/files/content/stateofthenationsfostercarefullreport.pdf [Accessed 20 Mar. 2019].

Walliman, N. (2011). Research Methods- The Basics. Abingdon: Routledge

Wilson, K. and Evetts, J. (2006) The professionalisation of foster care, *Adoption and Fostering*, 30, 1, 39-47.

Winter, K. & Cree, V. E. (2016). Social work home visits to children and families in the UK - a Foucauldian perspective. British Journal of Social Work. 46, 5, p. 1175-1190

Wood, M., & Selwyn, J. (2017). Looked after children and young people's views on what matters to their subjective well-being. *Adoption and Fostering*, 41(1), 20-34



Appendix 2 Action plan

Theme	Issues/Aspects/Questions from masterclasses	What is currently in place?	What is in development?
1. Assessment of needs	a. Holistic picture needed and		
	positively enforced		
	b. Comprehensive assessments		
	c. Quality/accuracy of		
	assessments		
	d. Access to specialist		
	assessments of need		
	e. Involvement of children and		
	young people and foster		
	carers in assessment		
	f. Sharing of assessment		
	findings		
2. Planning to meet needs	a. Child friendly care and		
	support plans		
	b. Pen pictures for both foster		
	carers and children		
	c. Plans need to be person		
	centred		

	d. Better planning is needed for
	school placements -
	Education is often an
	afterthought with residential
	changes being made
	e. Promote CLA/YP
	voices/wishes and feelings
3. The holistic experience for	a. One person, one story – not
child and foster carer	retold many times
ciliu aliu iostei carei	
	b. A common language used by
	co-professionals
	c. One team not teams around
	the child
	d. Continuity of carer
	e. Continuity of social worker
	f. Continuity of schooling
4. Access to support	a. Person centred practice
	informing all planning
	b. Availability of and access to
	tier 2 and 3
	intervention/support
	services

	c. First response support in the
	home and at school
	d. Help for carers – peer
	support
5. Communication	a. Listen to children and young
	people who are looked after
	b. Listen to foster carers
	c. Share information and in a
	timely manner
	d. Maintain relationships and
	contacts between relevant
	parties
	e. Single page profile for foster
	carers and children (and
	school staff, social workers
	and health?)
	f. Life story for all children and
	young people who are
	looked after
	g. Corporate parents need to
	provide better

		communication with each	
		other and young people	
6. Development of personal skills,	a.	Reflection skills	
knowledge and attitudes	b.	Nurture self-regulation	
	c.	Emotion coaching for all;	
		making it a priority	
	d.	Nurture empathy	
	e.	Trauma, loss and attachment	
		issues and their	
		consequences for behaviour	
	f.	Developmental Language	
		Disorder and consequences	
		for behaviour	
	g.	Self-care courses for foster	
		carers	
	h.	ELSA training for foster	
		carers, social workers and	
		residential staff	
	i.	Earlier and more	
		comprehensive training for	
		kinship carers	

7. Practices and structures	a.	Social workers need to get to	
		know each young person and	
		able to spend time with	
		them.	
	b.	Social services team	
		structures which give more	
		continuity of engagement	
		with a child or young person.	
	c.	Wider culture and practice	
		change e.g. Police, YOS,	
		Court judgements, school	
		placements, IFAs, kinship	
		carers?	
	d.	Services based close	
		together for better team	
		working	
	e.	Respite – in the interests of	
		both children and young	
		people who are looked after	
		and foster carers.	

f	. Inclusion of all professionals	
	in decision making, including	
	foster carers	
<u>ξ</u>	. Schools attending CLA	
	reviews; PEP reviews not in	
	lesson time.	
ŀ	. More structured quality	
	transition sessions	
i	CAMHS needs to change the	
	way it works e.g. home	
	appointments.	
j	Wider access to supportive	
	therapies to help with	
	meeting emotional and	
	social needs and regulating	
	behaviour e.g. VIG, play,	
	Thrive etc	
	. Exclusion policy to take	
	account of effects on	
	children and young people	
	who are looked after	

	I.	SaLT available/based in	
		schools	
	m.	Alternative learning e.g.	
		quiet space/time outs in	
		schools, not sin-bins.	
8. Systems and policies to create	a.	Dedicated school staff (to	
greater stability, improved		children and young people	
wellbeing and good outcomes		who are looked after)	
	b.	School behaviour policies	
		and non-exclusions	
	c.	Placement stability	
	d.	School stability	
	e.	What does TAC mean in	
		practice? Does partnership	
		working mean integration?	
	f.	Are services too protective	
		of their own professional	
		identity and practices?	
	g.	More 'joined up' services for	
		children - psychiatric,	
		psychological, other health	
		providers	

ŀ	n. Negative behaviour to be	
	addressed at school not	
	shipped out to PRU; make	
	allowances	
i.	. Shared training	
j	. Implications of NFF	

Appendix 3 Foster carer survey results

Demographic information for foster carers

Variable	Description	Number	%
Gender	Female	41	77.4
Gender	Male	12	22.6
	25-29	-	-
	30-34	2	3.8
	35-39	2	3.8
Λαο	40-44	5	9.4
Age	45-49	8	15.1
	50-54	16	30.2
	55-59	10	18.9
	60+	9	17.0
	White	17	32.1
	White- Welsh	33	62.3
	White British	3	5.7
Ethnicity	Black or Black British- African	-	-
	Other Asian background	-	-
	Mixed- White and Black Caribbean	-	-
	Mixed- White and Asian	-	-
	A first degree, like a BA or BSc	5	9.4
	A certificate or diploma in higher education	14	26.4
	O levels or GCSE grades A-C	12	22.6
Qualification	A higher degree, like a master's degree, or a PhD	4	7.5
	A professional qualification (please write in)	6	11.3
	A or AS or S levels	5	9.4
	None of these qualifications	5	9.4
	Less than 1 year	4	7.5
Longth of time	1-5 years	15	28.3
Length of time being a foster	6-10 years	14	26.4
carer	11-15 years	13	24.5
Carei	16-20 years	5	9.4
	26-30 years	2	3.8

Foster carer perceptions of role responsibilities

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
Even though I may not always				28	19
manage it, I know how to meet the	-	-	3 (5.7)	(52.8)	(35.8)
needs of my foster child(ren)				(32.0)	(55.0)
The things I do make a difference				23	27
to the well-being of foster children in	-	-	1 (1.9)	(43.4)	(50.9)
my care				(43.4)	(30.3)
I feel able to access the health	_	1 (1.9)	14	19	17
services my foster child(ren) needs.		1 (1.5)	(26.4)	(35.8)	(32.1)
I am often too tired or busy to do	23	24			
the things that would make a	(43.4)	(45.4)	2 (3.8)	2 (3.8)	-
difference to my foster child(ren)	(43.4)	(43.4)			
I can make an important difference	11		1 (1.9)	18	21
to my foster child(ren)	(20.8)	_	1 (1.9)	(34.0)	(39.6)
Whatever I do, foster children will	26	21	5 (9.4)		1 (1.9)
remain difficult	(49.1)	(39.6)	3 (3.4)	_	1 (1.9)
I feel confident about helping my			3 (5.7)	31	19
foster child(ren) with homework		_	3 (3.7)	(58.5)	(35.8)
I feel confident meeting with health				13	36
professionals about the health needs	-	1 (1.9)	3 (5.7)	(24.5)	(67.9)
of the foster child(ren) in my care				(24.3)	(07.3)
I spend time helping my foster	1 (1.9)		4 (7.5)	13	33
child(ren) with reading or homework	1 (1.9)	_	4 (7.5)	(24.5)	(62.3)
Being a foster carer has changed my			6 (11.3)	19	28
life for the better	_	_	0 (11.5)	(35.8)	(52.8)
I would feel confident about					46
contacting my foster child(ren)	1 (1.9)	-	1 (1.9)	5 (9.4)	(86.8)
school if I had concerns					(00.0)
I feel able to access the educational	1 (1.9)	2 (3.8)	5 (9.4)	17	25
support my foster child(ren) needs.	1 (1.9)	2 (3.0)	J (J.4)	(32.1)	(47.2)

How foster carers interact with children in their care

	Very Often	Often	Sometimes	Hardly Ever	Never
I spend time chatting to my foster child(ren)	42 (79.2)	5 (9.4)	-	-	4 (7.5)
My foster child(ren) talk to me about how they feel.	18 (34.0	15 (28.3)	14 (26.4)	-	3 (5.7)
It is impossible to change the attachment problems of foster child(ren).	1 (1.9)	6 (11.3)	26 (49.1)	12 (22.6)	-
If a foster child does not want to talk to me I tend to leave them alone.	3 (5.7)	8 (15.1)	29 (54.7)	10 (18.9)	-
I try to have fun with the foster children in my care	37 (69.5)	10 (18.9)	-	-	4 (7.5)
I always try to go that extra mile to encourage my foster child(ren) with their education.	37 (69.5)	7 (13.2)	2 (3.8)	-	4 (7.5)
I find it difficult being patient when I am being rejected.	-	1 (1.9)	14 (26.4)	31 (58.5)	4 (7.5)

Relationships with foster children

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
I feel confident that I can manage	_	_	3 (5.7)	17	28
the challenges this child presents			3 (3.7)	(32.1)	(52.8)
Most of the child's difficulties	1 (1.9)	3 (5.7)	4 (7.5)	20	18
relate to their early experiences?	1 (1.9)	3 (3.7)	4 (7.5)	(37.7)	(34.0)
I have a good understanding of the			1 (1.9)	25	21
child's strengths	_	_	1 (1.5)	(47.2)	(39.6)
I have a good relationship with the child	-	-	1 (1.9)	18 (34.0)	29 (54.7)

I find it difficult communicating	22	16	6 (11 2)	3 (5.7)	49
with the child	(41.5)	(30.2)	6 (11.3)		(92.5)
	9 (17)		7 (13.2)	17	13
The child feels able to talk to me	9 (17)	-	/ (13.2)	(32.1)	(24.5)
The child responds well at my	1 (1.9)	1 (1.9)	8 (15.1)	15	23
attempts to help them	1 (1.9)	1 (1.9)	8 (13.1)	(28.3)	(43.4)
I am finding it difficult to build a	30	15	3 (5.7)		_
relationship with the child	(56.6)	(28.3)	3 (3.7)	_	_
			1 (7 E)	17	27
I find this child very rewarding	-	_	4 (7.5)	(32.1)	(50.9)

Foster carer relationships with other members of the team around the child

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
I feel valued and part of the professional team around the foster child(ren)	1 (1.9)	2 (3.8)	3 (5.7)	28 (52.8)	21 (39.6)
I am included in meetings about the foster child(ren) in my care	-	-	1 (1.9)	29(54.7)	(39.6)
I feel supported by Children's Services	-	-	7 (13.2)	23 (43.4)	21 (39.6)
I contribute and am listened to in meetings about the foster children in my care	1 (1.9)	-	6 (11.3)	23 (43.4)	21 (39.6)
I receive peer support from other foster carers in my area	1 (1.9)	4 (7.5)	12 (22.6)	16 (30.2)	17 (32.1)
My social worker rreats me as an equal member of the professional team around the child	-	2 (3.8)	2 (3.8)	19 (35.8)	28 (52.8)
My social worker provides me with regular support	-	1 (1.9)	2 (3.8)	20 (37.7)	27 (50.9)
My social worker assists with accessing health services for the foster child(ren)	-	3 (5.7)	12 (22.6)	20 (37.7)	16 (30.2)

		24	13
3 (5.7)	9 (17.0)		(24.5)
		(43.3)	(24.3)
1 (1 0)	2 (2 9)	21	27
1 (1.9)	2 (3.8)	(39.6)	(50.9)
1 (1 0)	2 (2 0)	25	23
1 (1.9)	2 (3.6)	(47.2)	(43.4)
1 (1 0)	4 (7 5)	23	23
1 (1.9)	4 (7.5)	(43.4)	(43.4)
2 (2 0)	7 (42.2)	23	14
2 (3.8)	/ (13.2)	(43.4)	(26.4)
2 (5.7)	10	19	15
3 (5.7)	(18.9)	(35.8)	(28.3)
4 (7.5)	13	18	11
4 (7.5)	(24.5)	(34.0)	(20.8)
	12	10	10
5 (9.4)	(22.6)		(18.9)
		(55.6)	(10.9)
2 (2 0)	10	22	12
2 (3.6)	(18.9)	(41.5)	(22.6)
1 (1 0)	0 (15 1)	22	14
1 (1.9)	0 (13.1)	(41.5)	(26.4)
2 (3.8)	6 (11.3)	21	18
		(39.6)	(34.0)
	6 (11 2)	18	22
-	6 (11.3)	(34.0)	(41.5)
1 (1.9)	6 (11.3)	24	14
		(45.3)	(26.4)
2 (3.8)	3 (5.7)	15	25
		(28.3)	(47.2)
	1 (1.9) 1 (1.9) 1 (1.9) 2 (3.8) 3 (5.7) 4 (7.5) 5 (9.4) 2 (3.8) 1 (1.9) 2 (3.8) - 1 (1.9)	1 (1.9) 2 (3.8) 1 (1.9) 2 (3.8) 1 (1.9) 4 (7.5) 2 (3.8) 7 (13.2) 3 (5.7) 10 (18.9) 4 (7.5) 13 (24.5) 5 (9.4) 12 (22.6) 2 (3.8) 10 (18.9) 1 (1.9) 8 (15.1) 2 (3.8) 6 (11.3) - 6 (11.3) 1 (1.9) 6 (11.3)	1 (1.9) 2 (3.8) 21 (39.6) 1 (1.9) 2 (3.8) 25 (47.2) 1 (1.9) 4 (7.5) 23 (43.4) 2 (3.8) 7 (13.2) 23 (43.4) 3 (5.7) 10 (18.9) (35.8) 4 (7.5) 13 (34.0) 5 (9.4) 12 (9 (22.6) (35.8) 2 (3.8) 10 (18.9) (41.5) 1 (1.9) 8 (15.1) (22 (41.5) 2 (3.8) 6 (11.3) (39.6) - 6 (11.3) (39.6) 1 (1.9) 6 (11.3) (24 (45.3) 2 (3.8) 3 (5.7) (45.3)

Appendix 4 Co-professional survey results

Demographic information for co-professionals

Variable	Description	No.	%
Condor	Female	53	83
Gender	Male	11	17
	25-29	6	9
	30-34	8	13
	35-39	9	14
A 70	40-44	12	19
Age	45-49	11	17
	50-54	12	19
	55-59	3	5
	60+	3	5
	White	14	22
	White- Welsh	44	69
	White British	1	2
Ethnicity	Black or Black British- African	1	2
	Other Asian background	1	2
	Mixed- White and Black Caribbean	1	2
Mixed- White and Asian		2	3
	A first degree, like a BA or BSc	27	42
	A certificate or diploma in higher education	14	22
Qualification	O levels or GCSE grades A-C	9	14
Qualification	A higher degree, like a master's degree, or a PhD	8	13
	A professional qualification (please write in)	4	6
	A or AS or S levels	1	2
	Not stated	1	2
	Social work	35	55
Conton	Education	16	25
	Youth Justice	6	9
Sector	Childcare	3	5
	Health	2	3
	Parenting	1	2
	Under 1 year	1	2

Length in role	1-5 years	36	56
	6-10 years	11	17
	11-15 years	8	13
	16-20 years	5	8
	26-30 years	1	2

Co-professional perceptions of relationships in the team around the child

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
The team meet regularly to discuss the needs of the child	2 (3)	2 (3)	9 (14)	34 (55)	9 (14)
The team all have the same ethos	1 (2)	6 (9)	19 (30)	23 (36)	8 (13)
The team all work in a similar way with the foster child(ren)	1 (2)	12 (19)	15 (23)	20 (31)	7 (11)
The team has a high level of trust	1 (2)	2 (3)	16 (25)	26 (41)	11 (17)
The team works together confidently to meet the needs of the foster child(ren)	0	2 (3)	10 (16)	28 (44)	17 (27)
The team is sensitive to the individual needs of the foster child(ren)	0	3 (5)	9 (14)	25 (39)	21 (33)
The team works to develop the strengths and abilities of the foster child(ren)	0	4 (6)	12 (19)	22 (34)	16 (25)

Co-professionals perceptions of the foster carers role in the team around the child

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
The foster carer is a valued member of the professional team around the child	0	3 (5)	8 (12)	22 (34)	23 (36)
The foster carers views are included in planning for the child	0	5 (8)	13 (20)	24 (38)	14 (22)
It is easier for foster carers to build relationships with foster children if they are not a member of the professional team	7 (11)	20 (31)	19 (30)	7 (11)	3 (5)
It would be difficult to share information if the foster carer was included in all decision making	13 (20)	24 (38)	12 (19)	6 (9)	3 (5)

Appendix 5 Additional Pioneer training outline

Pioneer Training	
Team Around the Child	Communication
	Information sharing
	Professional boundaries
	Supporting each other
Recording and reporting	Use of I.T. to record digitally
	Legal framework
	Confidentiality
	Principles of recording
Counselling skills	Motivational Interviewing
	Reflective listening
	Solution focussed techniques
	Telephone counselling
Emotion Coaching	Taking care of yourself
	Taking care of each other
	Action learning sets
	Coaching skills
Peer mentoring and support	Setting up a scheme
	The mentor's role
	Key skills
	Foster-line input

Level 1 Pre-Approval Pre-approval training is not dealt with under this framework Level 2 **Entry** Child Development Developing a Secure Understanding Life Journey Work **Base and Promoting** Challenging Attachment Behaviour & Communication Safeguarding Supporting Education Safer care and Recording and Allegations information Sharing and Development Working with Birth Transitions for the Digital Safety and Fostering Sons and Families and Children and Young Daughters and the Social Media Contact People in your Care Involvement of **Awareness Extended Family** Level 3 Consolidation Attachment and Therapeutic Re-Advanced Safer **Promoting Positive** Trauma Caring and Risk Behaviour parenting Management Living with **Promoting Good** When I'm Ready Moving Children onto Health Teenagers Adoption Caring for Children Child Sexual Advocacy and **Promoting** and Young People Exploitation Children's Rights Independence with Additional Needs Level 4 Experienced Presenting **Peer Mentoring Peer Mentoring** Attachment/Re-Information parenting Therapeutic Play **Advanced Strategies** Understanding Taking care of yourself

children and young

people's mental

health

Mentor

and each other

to Deal with

Challenging Behaviour

Level 5

Managing your own learning	Train the Trainers	Presentation Skills	Involvement in Recruitment and Retention
Specialist training to	be accessed as required	t	
Child and Parent	Short Breaks/	Unaccompanied	Children with specific
Placements	Support Care	Asylum Seeking Children and Young People	support needs