CELCIS Centre for excellence
for Children's Care and Protection

Supporting Families

A review of the implementation of Part 12: Children at risk of becoming looked after as set out in the Children and Young People (Scotland) Act 2014

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Introduction

The Scottish Government states that Scotland should be the best place for children to grow up. Over the last ten years, the Scottish Government has developed, *Getting it Right for Every Child* (GIRFEC), a national approach to improve the wellbeing of children and young people in Scotland. This builds on a growing body of evidence demonstrating the value of supporting children and families at the earliest opportunity, rather than waiting until families reach crisis point to provide support. Building on the assets within families and communities to prevent children from becoming looked after is identified as a key principle in the Scottish Government's (2015) Getting it Right for Looked after Children and Young People Strategy.

The Children and Young People (Scotland) Act 2014 was passed by the Scottish Parliament on 19 February 2014, and received Royal Assent on 27 March 2014. Part 12: Services in relation to children at risk of becoming looked after, etc. of the Children and Young People (Scotland) Act 2014 (the 2014 Act) and the Relevant services in relation to children at risk of becoming looked after etc. (Scotland) Order 2016 (the 2016 Order) came into force on 31 August 2016. Relevant services are specified as: Family group decision-making services and support services in relation to parenting. Non-statutory National Guidance on Part 12 was issued by the Scottish Government on 14 December 2016 to support the implementation of legislation. The services provided to families whose children are at risk of becoming looked after (as per the legal duties set out under Part 12 of the 2014 Act) represent a critical component of the preventative approach, addressing any risk factors at an earlier stage, and thereby preventing the need for more significant intervention in the child's life.

In the publication of A Nation with Ambition: The Government's Programme for Scotland 2017-18 there was a commitment to 'commission a progress review on the use of family support services to prevent children going into care' (pg. 85). This specifically relates to the implementation of Part 12 of the 2014 Act. The Scottish Government commissioned CELCIS to undertake this national review. The objective of the review was to explore the progress and journeys across thirty-two local authorities in supporting families where children are at risk of becoming looked after. The review included: an online survey of local authorities, health services, third sector and independent providers of support for families; focus groups with providers of relevant services; analysis of strategic Children's Services Plans, and; a review of all published information by local authorities relating to relevant services as defined under Part 12 of the 2014 Act.

This report is divided into four sections: 'What matters to families' and background; methodology; findings; key learning points and conclusions. The background section outlines the evidence about support for families and in particular in relation to 'relevant services' defined as support for parenting and family group decision-making services. The

methodology section provides information on who participated in the study and how. The findings are divided into three parts: engagement, exploration and implementation. Engagement with the new legislation is considered through participants' observations, strategic planning documents and information published on support services. Exploration stage which considers the diversity of families and issues they face where a child is at risk of becoming looked after and the final findings section considers the opportunities and challenges with implementation. Drawing from the findings, key learning points are identified and conclusions provided.

Background

All families can experience times of difficulty. For some families, these times can be overcome by the support of friends and wider family and access to universal services (e.g. GP, Health visitors, and teachers) (Parenting Across Scotland, 2010). The Scottish Government is committed that all parents and carers have access to information, advice and support as set out in the National Parenting Strategy (Scottish Government, 2012). Furthermore, there are specific aims to strengthen the support on offer to parents/carers and make it easier to access that support. In research undertaken to inform the National Parenting Strategy, parents, carers and practitioners reported issues in relation to family support being: the need for help at an earlier stage, stigma of asking for help and fear of losing parental control that results in children being taken away from them. A scoping review undertaken by Weston and Scott (2018) on effective strengths-based family support services identified common principles of trust and openness; non-judgmental person-centred support; workers as humans and consistency; collaboration between families and workers; and the value of peer support.

One of the aims in legislating for relevant support services for families where children are 'at risk' of becoming looked after is to provide early and effective support services to prevent children unnecessarily entering the formal care system. Tackling both the prevalence and persistence of child neglect, and working to alleviate its damaging long-term effects, by improving the responses of professionals across the spectrum of universal and children's services, is a cornerstone of the Scottish Government Child Protection Improvement Programme. The Addressing Neglect and Enhancing Wellbeing programme, as part of the Child Protection Improvement Programme, has been informed by the neglect and early intervention research and evidence base. Work has been undertaken in collaboration with Community Planning Partners in three areas of Scotland to improve the identification of, and response to, early signs of neglect.

What matters to families

The 12 organisations from the Coalition of Care and Support Providers in Scotland (CCPS) children's committee came together to agree how they could address a gap in evidence about 'what works' in family support services. Five semi-structured group interviews were conducted with twenty-five participants accessing family support services. Here are the **four key themes** from young people and families in describing the impact and what, for them, are the important features of their engagement with family support services.

Supportive Relationships
Young people and parents/carers articulated the critical importance of building trust through positive relationships with workers over time. The significance of the need for supportive relationships for improved outcomes cannot be overstated with all group discussions referring to respectful engagement and connection with others. The benefits of sustainable, consistent (sometimes persistent) relationships were identified by all as something they collectively both valued and viewed as essential to the effective delivery of services.

> "Having somebody you can come to and talk to no matter what it is. There is always somebody you can go and see and they'll help you as much as they can."

Flexibility and responsiveness
Young people and parents/carers stated the need for services which were consistent but also flexible and responsive in times of difficulty and crisis. The participating services were described by respondents as being structured around the needs of the people using them and this was felt to reduce many of the barriers experienced in accessing help. Responsive services which can adapt and be available in times of crisis were viewed as essential. This included things like access to out of hours phone support, home visits on days when leaving the house was incredibly difficult, staff staying on after hours with people to see something through rather than referring people on to someone else.

> "They worked round us, they knew we had wee babies and sometimes it's a struggle if you're a single mum or if you have no family. If it's an appointment and it's at 9am then they'll say I tell you what I'll pick you up and take you there. There's always something going on."

Non-judgmental approach
Young people and parents/carers valued support which is attentive and attuned, allowing people to feel listened to in a safe space without judgement

> "Definitely the workers, their approach, not being so formal… they dinnae seem like, I know that they are professionals, but they dinnae seem like they are there to look down their noses at you or judging you. You can see that they are genuinely, genuinely wanting to help and support you and I think that's a quality that all professionals should have."

Practical support to enable participation
Young people and parents/carers identified the importance of hands on help in overcoming the financial, emotional and practical barriers they face.

> "Right there's parenting groups, craft classes, every four weeks there's a reiki session, there's two 'play togethers' per week where we go into the playroom and we can play activities with the kids, there's been cooking groups, there's been groups where people come from outside and give talks and stuff, parenting classes, we've signed up to the incredible years… child development and child behaviour. There's always something on."

There is a growing evidence base on the interaction between poverty and child welfare intervention in the UK and internationally. A new study, funded by the Nuffield Foundation (2015-2017), explored how unequal children's chances are of being a looked after child or on a Child Protection Register across the four UK countries and what factors underpin these inequalities. The study found children in the most deprived 10% of small neighbourhoods in Scotland are nearly 20 times more likely to be 'looked after' or on the child protection register than children in the least deprived neighbourhoods in Scotland (Bywaters, et al., 2017).

Understanding how many families require support when a child is at risk of becoming looked after is difficult to quantify. Around two percent of children in Scotland are either looked after by local authorities or on a child protection register as of 31 July 2018 (Scottish Government, 2019). This equates to 14,738 children who were looked after and 2,668 children on the child protection register at the end of July 2018 (Scottish Government, 2019). In 2017/18 there were 13,240 children referred to the Scottish Children's Reporters Administration of which 85% of referrals are on 'care and protection' (non-offence) grounds (SCRA, 2018). The numbers of children who are 'at risk' of becoming looked after is almost impossible to know, due to the lack of a clear definition of 'edges of care' or recording of such a status. In Scotland, we do not record the number of children 'in need' or systematically collate enquiries to local child and family welfare services. What we do know, is that counting those children and young people looked after at home, those on a child protection register, and families receiving voluntary support, encompassed over 10,000 children in 2017/18 (Scottish Government, 2019).

Relevant services: Support services in relation to parenting

The National Parenting Strategy *'recognises the responsibility of a wide range of public agencies to support parenting to achieve the common goal of improving the life chances of all Scotland's children'* (Scottish Government, 2012). There is a clear focus in the National Parenting Strategy and the Part 12 guidance on the wide range of persons in a caregiving role who may require support services in relation to parenting. The provision of support services should be from conception up to adulthood. There is specific recognition of the needs of parents of adolescents where 'many parents said they not only found the teenage years especially hard, but also more difficult to get help with, and we recognise this is an area in which we need to do more' (Scottish Government, 2012 pg.39).

There is increasing evidence for the impact of support for parenting for children who are at risk of removal from parental care. The research by Ward *et al* (2014) remains the leading review of evidence in this field, with the key finding that 'interventions designed to increase parenting skills can be effective and can have a positive knock on impact, reducing other parental problems by increasing self-efficacy and self-esteem' (Ward *et* al, 2014, pg.12). Parental drug and alcohol problems, mental health issues, domestic abuse

and parental learning disabilities can impact on a parent's ability to care for their children; however, as Ward and colleagues (2014) highlight:

> 'Experiencing any one of these problems does not preclude loving and effective parenting. The research suggests it is where multiple problems interlock and interact that there is a substantially increased risk that children will be exposed to maltreatment and suffer significant harm.'

An evaluation of an integrated health and social care service for parents with mental health difficulties where children were at risk of becoming looked after, found that 85% of families were able to remain together or reunite, compared to an estimated 50% of edges of care cases nationally (McPherson *et al*., 2018).

Attachment based work to support parents has a long history (Suchman, et al., 2008), and there have been a number of programmes of intervention formulated to enable children to remain cared for by their parents; for example, Triple P (Sanders, 1999); Incredible Years (Webster-Stratton & Reid, 2003), and Family Nurse Partnership (Olds, 2006).The Ward *et al.* (2014) review found that the Family Partnership Model, Motivational Interviewing and Family Group Decision-Making are possible methods for engaging parents who are 'ambivalent about change, mistrustful of social workers, or not fully ready for change' (Ward *et al*, 2014, p12). Subsequent research has reinforced their findings and presented new challenges. Percy-Smith and Dalrymple (2018) highlight that providing support for parenting has been seen by practitioners as core to social work practice for some time, and that flexibility and a lack of target pressures are the key elements they value as facilitating their work with parents. This chimes with recommendations of the Munro Review (2011).

Support for parenting has also been demonstrated to be effective in supporting parents with learning disabilities (IRISS, 2017; Wilson, McKenzie, Quayle & Murray, 2012). International research has identified that children are more likely to be removed from parents with learning disabilities. In 2015, the Scottish Consortium on Learning Disabilities refreshed the Scottish Good Practice Guidelines for supporting parents with a learning disability (SCLD, 2015). The guidance was developed to increase the chances of the children of parents with a learning disability continuing to live with them in a positive and supportive environment that meets the children's needs and prevents family breakdown. Where parents have learning difficulties, it is likely that long-term support is required to be tailored throughout the different stages of childhood (Tarleton et al., 2006). However, there is evidence indicating that current practice in supporting parents with learning disabilities to care for their children is influenced by value-based assumptions on parents and limited access to appropriate services (see for example, People First Highland, 2018).

Relevant services: Family group decision-making services

There are a variety of family group decision-making service models. Family decision-making services (FDMS) is a term more commonly used in the USA. This encapsulates and widens the most commonly known Family Group Conference model (FGC). Family group decision-making (FGDM) has an international evidence base stretching back more than twenty years supporting the efficacy of FGDM as an intervention in child welfare proceedings (Berridge, 1998; Berzin, Cohen, Thomas, & Dawson, 2008; Lambert, Johnson, & Wang, 2017). While individual practices may vary, there are common values which underpin FGDM services, and these are clearly highlighted in the national guidance for Part 12 of the Children and Young People (Scotland) Act 2014, and reflected across the literature relating to FGDM (Barn & Das, 2016; Berridge, 1998; Berzin et al., 2008). These values include '*principles of collaboration, participation and dignity, involvement and informed choice*' (Scottish Government, 2016, p. 9). The guidance goes on to indicate that these principles are founded on a strengths-based approach which allows the family to be a part of the solution.

In Frost *et al.*'s (2014) review of literature relating to family group decision-making services, it is highlighted that the process of participating in family group meetings is overwhelming positive and 'participants feel listened to and valued' (Frost et al., 2014, p. 506). Furthermore,

> 'Studies of the experience of children and families using the FGC model suggest that FGC is a family-centred and strengths-based approach that promotes partnership between family and State, and can consequently act as an empowering process.' (Frost et al., 2014, pg.506)

An evaluation of Leeds Family Valued found that of families participating in Family Group Conferencing: '*100% felt involved in the process, 100% felt their values had been respected, 99% felt their FGC had helped address their problems, 91% felt the services they were offed [sic] were appropriate to their needs*' (Mason, et.al., 2017, p. 11). Mason *et al* conclude that:

> 'FGCs are an effective rights-based process for empowering families with a range of needs, which can increase the likelihood of children remaining in the care of birth family networks. They form a central part of a culture of practice which seeks to support families to take control of issues within the family network. Their use can lead to the development of more trusting relationships between professionals and families, more co-operative management of child protection issues and reduction in children's social care involvement in families' lives.'(Mason et al., 2017, p. 73)

However, they go on to highlight that in relation to domestic violence, while Family group conferences may form one part of the approach, a '*multi-agency approach, with wide and ongoing stakeholder engagement, is required*' (Mason et al., 2017, p. 74). Family group decision-making services have also been further supported in the context of children at risk of being removed from parental care. Lambert et al. (2017) found strong evidence in one service supporting FGDM service's impact, stating that:

> 'After controlling for demographic variables, Family Team meetings reduced the odds of removal by 51.4%...the impact was even stronger for cases with high risk than for cases with low risk' (Lambert et al., 2017, p. 92)

A Scottish study exploring the experiences of families and professionals in Family Group Conferencing (FGC) found that families reported increased empowerment in decision-making in their lives; improved relationships within families and changing relationships with social work services based more on partnership (Mitchell, 2017). The power dynamic between families and social workers was a key finding throughout the study:

> *'The rebalancing of power was experienced iteratively throughout the FGC process and, as such, aided family members to trust the process and continue to engage in it. Family members and professionals in the study considered the FGC decision-making process to be different from other social work interventions: as the stages of the process aided a more equitable power balance between professionals and service users' (Mitchell, 2017, pg. 270).*

The importance of time and space to develop relationships, the role of the independent co-ordinator in creating safe spaces, the value of the review process and the under-utilisation of advocacy in the FGC process were highlighted (Mitchell, 2017).

Methodology

Implementation is the process of putting a plan (or legislation in this case) into effect. A growing body of evidence provides insight into effective approaches to the implementation of policy and practices (see Fixsen, Naoom, Blase, Friedman and Wallace, 2005, for a synthesis of the research literature). A variety of activities reflect best practice in guiding and supporting implementation, including adaptive leadership, stakeholder engagement, gaining buy-in, establishing implementation teams, preparing plans, and establishing organisational support and enabling cultures. Effective implementation occurs in stages, moving from exploratory and planning activities, to introducing new actions/activities into practice (described as 'installation' in the application of Active Implementation frameworks; Fixsen et al., 2005), concluding with full integration of once new activities into routine day-to-day practice across a whole organisation (moving from initial implementation to full implementation; Fixsen et al., 2005). These stages are cyclical, rather than linear; and should be accompanied by evaluation, critical reflection and continuous improvement. Effective implementation takes time, with literature suggesting a minimum of two to four years is required to implement a clearly defined plan into day-to-day practice.

The purpose of this research was to gather opinions on, and experiences of, implementation of Part 12 of the Children and Young People (Scotland) Act 2014. The

research methodology used an implementation lens in the construction of research questions and in the analytical framework. The review used a mixed method approach for primary data collection, including:

a) An online survey for 32 local authorities, third sector and independent providers to ascertain the extent of provision of 'relevant services', their type, and the enablers/barriers experienced in implementation of Part 12;

b) A series of focus groups with local authority, third sector and independent providers of 'relevant services';

c) A review of Children's Services Plans (prepared under Part 3 of the 2014 Act);

d) A review of information published by local authorities about the provision of relevant services, as required under article 4 of the 2016 Order.

The survey was created specifically for this study. It was designed to gather a combination of quantitative responses (primarily on Likert scales) and qualitative text responses in response to general questions about the roles and services in which respondents worked, the knowledge among respondents of Part 12 of the 2014 Act, and the factors that support implementation of relevant services under Part 12 of the 2014 Act. All participants had at least two weeks in which they were able to complete the survey in November 2018. The surveys were administered online using the survey platform, Qualtrics. This enables individuals to complete the questionnaire anonymously in a secure online environment while enabling only one response from each IP address, thus helping to protect the research from multiple responses from individuals. The study was approved by the School of Social Work and Social Policy Ethics Committee, University of Strathclyde.

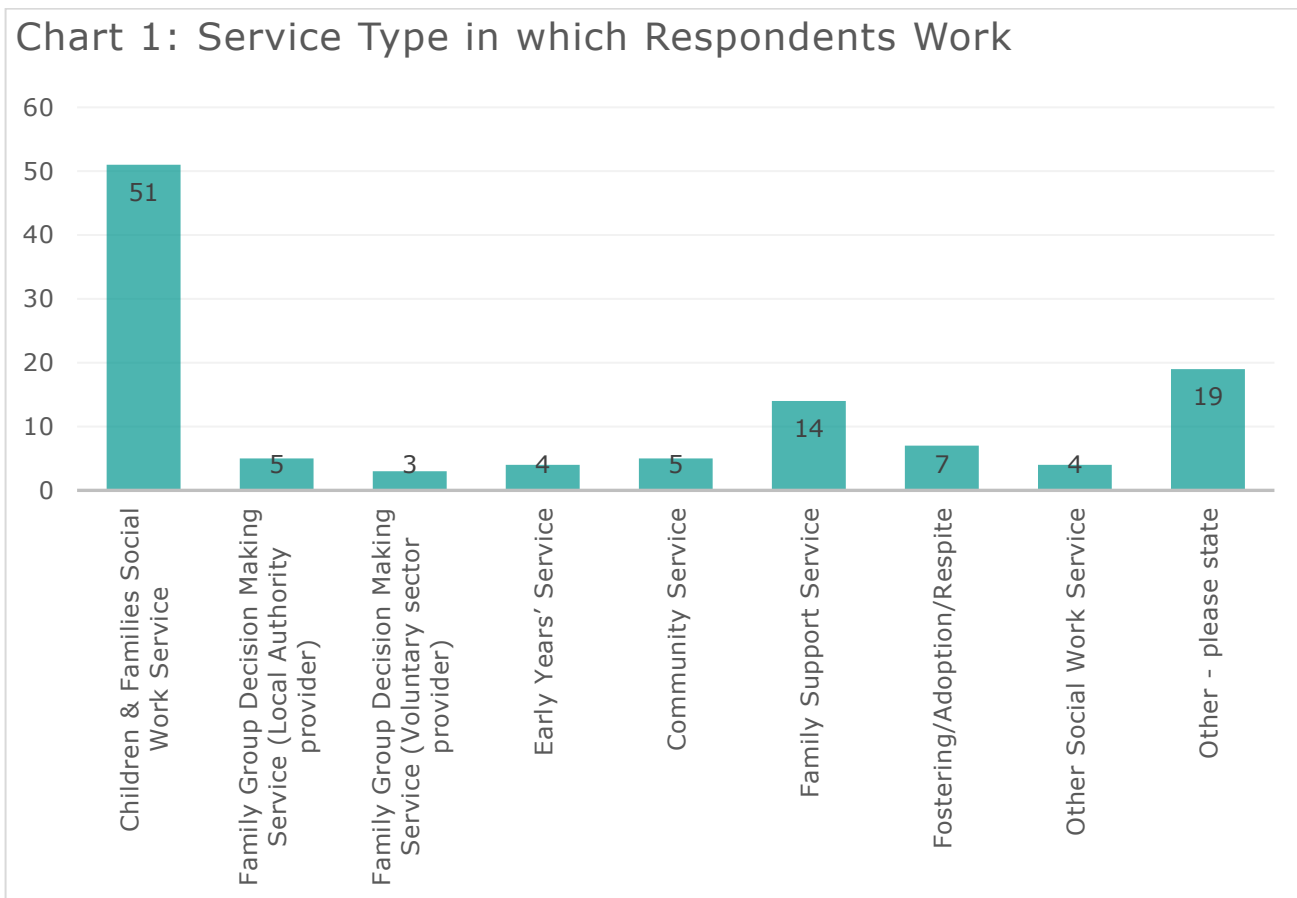## Questionnaire Participants

The online questionnaire was completed by 138 people with excellent geographical representation from across Scotland. Responses were received from individuals working in all except three local authorities (East Dunbartonshire, East Renfrewshire, and Shetland), as well as seven individuals working in roles which had a national remit. A particularly high number of individual responses were received from Angus and Glasgow.

Responses were gathered from a wide range of professionals involved in supporting families experiencing difficulties. Social workers were the most common respondents to the questionnaire (43%, N=49 of responses), followed by family support workers (12%, N=14). The roles outlined in the 'other' responses included managers of services (3%, N=3), foster carers (2%, N=2) and residential workers (2%, N=2).

Responses were gathered from people working within a wide range of services supporting families (Chart 1, N=112). The most common service was generic children and families social work services (46%, N=51), followed by family support services (13%, N=14). The

'other' responses included education agencies (2%, N=2), and health services (2%, N=2).

Chart 1: Service Type in which Respondents Work

Respondents were employed in a wide range of services. Direct work with children and young people, carrying out assessments, and practical support for parenting were the most common job roles. Twenty five respondents worked in services that provided Family group decision-making services, while 16 worked in services providing structured parenting programmes. The most common program were Incredible Years (six respondents), Triple P (six respondents), and strengthening families (four respondents). Forty four respondents worked in services which provided advocacy for children or parents.

Focus Group Participants

Focus groups with professionals involved in the strategic, operational and front-line delivery of services for families provided critical qualitative data on the enablers and barriers to implementing new legislation. A total of 84 individuals participated in ten focus groups conducted across Scotland. Participants included social workers, advocates, family group coordinators, family support workers, learning disability nurses and community workers. Five focus groups were conducted with statutory children & families' social work teams; one with community health practitioners; one advocacy organisation and one voluntary family support service. Two focus groups involved individuals with

national or strategic roles in voluntary organisations and local authorities. Focus groups were held in different urban and rural localities to ensure variability in the geographical regions.

Review of Children's Services Plans

National Guidance on Part 12: Children at risk of becoming looked after (Scottish Government, 2016) recommends that local authorities and their children's services planning partners (including NHS Health Boards, Integrated Joint Boards, the Police, etc.) should consider setting out explicitly, within their local Children's Services Plan, how they will: engage and consult with families whose children are at risk of becoming looked after; make available relevant services to meet their needs, and; monitor the effectiveness of services. The Children's Services planning duties (Part 3: Children's Service Plans of the 2014 Act) are designed to facilitate this practice, encouraging and enabling local authorities and health boards to take a strategic approach to the design and delivery of all services used by children and families.

In total, 30 Children's Services Plans representing all 32 Scottish local authorities were analysed. All local authorities produced a single Children's Services Plan for their area, aside from Angus, Perth and Kinross, and Dundee, who collaborated on *The Tayside Plan for Children, Young People and Families*. All Children's Services Plans are publically available, and were identified via the local authority websites or by contacting the local authority via email.

Undertaking policy analysis of Children's Service Plans, primarily triennial documents, provided important data on the strategic intentions of providing relevant services for families where a child is at risk of becoming looked after. Local authorities have duties to publish information about these relevant services for families and a systematic approach was undertaken to ascertain whether this duty was being implemented.

Limitations

One of the limitations of the study has been the recruitment of families. It was initially intended to include parents and young people through interviews and/or focus groups to provide an insight into some of their experiences of accessing and using family support services when a child was 'at risk' of becoming looked after. Good relationships with gatekeeping services were developed; however, due to the challenging timescales, current pressures on service staff and sensitivities surrounding the topic for families, no parents or young people participated. Key themes from research conducted by the Coalition of Care and Support Providers in Scotland with five family support services are invaluable (see page two) (CCPS, 2018) alongside the evidence from the family support scoping review (Weston & Scott, 2018).

Findings

Engagement: Awareness of new legislation

Knowledge about Part 12 of the Children and Young People (Scotland) Act 2014

There was limited knowledge about the details of the legislation relating to children at risk of becoming looked after and the associated national guidance. Just 14% of questionnaire respondents indicated that they 'knew a lot' about Part 12 of the Children and Young People (Scotland) Act 2014; while 10% indicated that they knew nothing about it. However, more than 80% of respondents indicated that they think that it is either 'important' or 'very important' to have legislation on both family group decision-making and support for parenting as relevant services for families where there is a risk of children becoming looked after.

A range of views were shared on the need for legislation from respondents. Generally, there was a view that legislation was helpful, especially for family group decision-making services because: 'It gives a bit more weight to the service', had a human rights approach and was useful at a strategic level when in statute. There was a commonly expressed view that this legislation should be empowering and promote family involvement in decision-making where children were at risk. As one focus group respondent reflected,

> I think if I was in a family and the children in my family were going to be considered to go into care, I would think that there absolutely should be a process in which the local authority liaises with us as a wider family. It seems extraordinary for there to be a system in which that doesn't happen – but of course, there has been. [Focus group, statutory social worker and family group coordinator]

Prior to family group decision-making services, some practitioners identified that wider families were often not involved and may not even know that there was this level of crisis in another part of the family. For respondents directly involved in family group decision-making services, the legislation was strongly welcomed and many felt required for a culture change to happen in Scotland. Some participants felt that the legislation did not go far enough; for example,

> I would have liked a right to a meeting for families, rather than a duty for local authority to provide a service. [Focus group, statutory social worker and family group coordinator]

There was an expectation by some respondents that legislation would be a critical factor in ensuring fair and equitable service provision for families across Scotland. However, as the respondents below reflects, there were concerns raised that legislative duties for local authorities came without the necessary resources and the infrastructure required:

> It ensures a consistency of service across Scotland, driving cultural change to maximise the role of families to drive the plans for their children. We know that it maximises the best outcomes for children in terms of identity, consistency of kin relationships, and potentially those relating to mental wellbeing, inclusion, reduction of addiction and mental health difficulties. It is a concern that the legislative duties, though, are imposed without an infrastructure in place, and without a governmental cash injection to support the development of the services which are resource intensive. [Questionnaire respondent]

> I think for me it's the whole legislating I'm ok with, as long as it comes with some kind of financial support as well. Because what you tend to find in social work over the years is that there is a lot of legislation passed and a lot of duties placed on a local authority but they are not always given the financial support to do so. [Focus group, statutory social worker]

There was also a view in statutory social work practice that other legal duties to work in partnership with parents and support children in need were already in child welfare legislation (for example, the use of section 22 of the Children (Scotland) Act 1995). A minority of participants raised a query about a duty being placed on local authorities, rather than with health boards and this was highly pertinent in areas with health and social care integration that included children's services.

There was less clarity about the need for 'support for parenting' as a relevant service. Many questionnaire respondents were unclear about what could be defined as a support for parenting service and requested clear guidance; for example, '*Many things can be defined as a 'parenting support service' - and not all services are equal or for that matter effective, strengths based or capable of achieving the outcomes'.*

There was some frustration in local authority areas where practitioners had very little knowledge of the 2014 legislation and did not feel it had been implemented to any extent. There was generally a focus group view in these areas that there was not the strategic leadership and commitment to invest in family group decision-making and/or support for parenting when a child is at risk of becoming looked after. Furthermore, in questionnaire responses to how the local authority communicated information, ten of the 19 respondents to select 'other' indicated that they were not aware of any communication regarding family group decision-making or support for parenting within their local authority.

Strategic planning for children at risk of becoming looked after

Only three Children's Services Plans identified Part 12: Children at risk of becoming looked after, of the Children and Young People (Scotland) Act 2014 as being relevant in local planning (Aberdeenshire, East Renfrewshire and South Lanarkshire). This finding is unusual as 52% of questionnaire respondents indicated that local authorities had communicated information about family group decision-making services and support

services for parenting in the local Children's Services Plan; this may suggest that there was an expectation that these services would be included in a Children's Services Plan.

All Children's Services Plans outlined commitments to early intervention and preventative practice. There was evidence in plans to link early intervention to keeping families together, delivering targeted interventions and improving outcomes for children and young people. For example,

> This early intervention and prevention enables children and young people to remain with their families and relatives, in their local communities, attending local schools and participating in community activities, keeping connections and supports active (East Lothian, 2017: 35).

While the primary role of the Children's Services Plans is to '"tell a story" so that communities can clearly see how people's wellbeing will be improved in that local area' (Scottish Government, 2016: 9), many plans also highlight the challenges and barriers that are faced in the delivery of local services. There was an indication that austerity and reductions in financial resources, coupled with increasing demands for support and some geographical factors, put pressure on local authorities in their attempts to provide services for children, young people and their families.

Publication of information about relevant services

There was limited communication about the provision of relevant services directly to families and communities. Under article 4 of the 2016 Order, local authorities must publish, in such a manner as they consider appropriate, information about the provision of relevant services; the ways in which persons can contact the local authority about the provision of those relevant services, and; others matters about the provision of relevant services that the local authority considers appropriate. A review of published information on local authority websites found little information specifically on family group decision-making services/support for parenting when a child is at risk of becoming looked after.

There was wide variation in the information available across local authority websites detailing any family support services available. A total of seven local authorities had detailed and direct information available regarding specific services, including but not limited to: Triple P, Raising Children with Confidence, PEEP and Home-Start. A further five local authorities provided a list of generic parenting services available in their area, such as parent and toddler groups or childminders, as well as specific parenting support services. These were packaged together in a searchable format for parents and carers to work their way through. Additionally, five local authorities made use of the Scotland-wide service www.families.scot. This website allows a person to search for their local area and any parenting or family services available in that area.

As well as those authorities which provided specific support information, 12 local authorities made statements committed to supporting families on their websites and

provided a contact telephone number and/or email address for those seeking support, rather than specific service information. These contact details were typically for the local social work service. Furthermore, three local authorities provided direct links to support organisations, such as Barnardo's, ChildLine, NSPCC and Aberlour, but did not name the services that these organisations offered. Finally, only two local authorities did not provide any specific family support information or contact details. Further information may have been provided (via information leaflets, posters, word-of-mouth, local press) about services to support families in communities.

Exploration: Identifying Families

The diversity of families

The range of families for whom children may be at risk of becoming looked after was evident across focus groups and questionnaire respondents. As one statutory social worker explained when asked: which children might come into the care, 'All of them could. Children in need (section 22) can be the most vulnerable and the hardest to monitor'; another explained, 'we're locality based, so whatever comes through the door'. There was a broad consensus that families could experience challenges from pregnancy up to young people reaching adulthood at eighteen years old. From the online questionnaire, two thirds of the services that respondents worked for (66%) predominantly worked with children and young people of all ages. Otherwise, services were evenly split through other age groups, but with only one respondent working for a service that predominantly worked with pre-birth cases.

There was concern about teenagers being at risk of becoming looked after. Often this was related to breakdown in family relationships, including for children who had been adopted. One focus group with practitioners who supported families where young people were involved in offending behaviour and were aggressive. For some of these families, parents contacted social work departments directly asking for help and in some cases, asking for the young person to be accommodated as 'they can't cope with it anymore'. The remit of the service was 'to keep children at home and prevent them being accommodated' and was achieved through using multi-systematic therapy with the family over a six month period. There was also acknowledgement that some of the families had been known for a long time and families were identified again at this time,

> I think there are also a lot of young people that maybe we have known historically and have not had the greatest start in life, maybe there has been [parental] substance misuse or domestic violence, and then what do you find is that when they hit that adolescence that is hard enough, but when you are also influenced by your early years, that's when things get really out of control and that's when we become back involved again at that age, by which point it is really quite difficult to reverse the situation. And

Another concern raised about teenagers was the interaction between school and family life; for example, one family support worker described scenarios where young people had been excluded from school or on part-time timetables and this was 'causing immense pressure on families and causing havoc'.
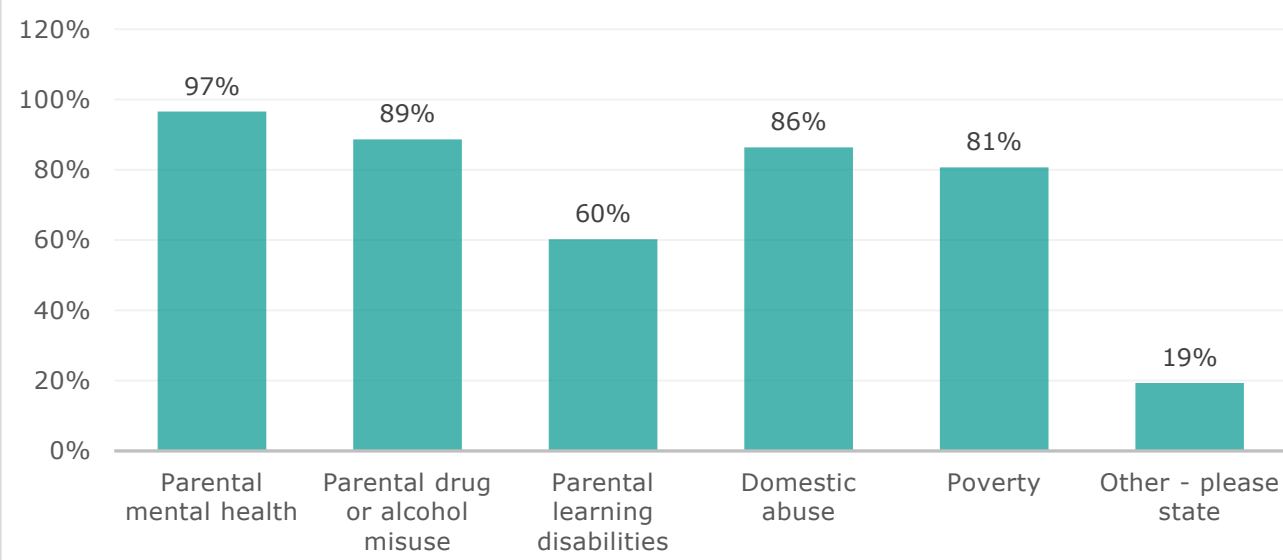
Another area of particular consideration was providing intensive services for pregnant women and their partners. Working with 'pre-birth' families was identified as a specific focus for providing family group meetings/or conferences. In Part 12 of the 2014 Act states that eligible pregnant women should be able to access family group decision-making services and support for parenting. As a focus group with family group coordinators highlighted, there can be incredibly high levels of engagement from the wider family when a baby is expected: 'they're around the baby and wanting to help' and 'we have the strongest plans from them as well, they all want to be involved'. In questionnaire responses, 57 people were involved in services working with pregnant mums, dads and unborn babies.

In the vast majority of responses, there was an explicit reference to a child being 'at risk of being accommodated' (i.e. no longer living with birth parents). There were rare discussions about relevant services being used to prevent a child being looked after at home with a compulsory supervision order (looked after at home) and no references to children who are looked after for short breaks due to complex disability.

A wide range of issues

Questionnaire respondents represented services that worked with a wide range of children at risk of becoming looked after with children living with abuse, neglect or in poverty most commonly identified. Children involved in offending and children with complex disabilities were also highlighted as a key area. Eighty eight respondents gave indications of the key issues impacting on family life that their service aims to impact upon. More than 80% indicated that each of parental mental health, parental drug or alcohol misuse, domestic abuse and poverty were key issues impacting on family life. 60% indicated that parental learning disabilities were a key issue. Responses given within the 'other' category included emotional, physical or sexual abuse (4), and trauma, ACEs, or attachment issues (4) (see Chart 2).

Chart 2: What are the key issues impacting on family life that your service aims to impact upon (N=88)

Across focus groups there were a wide range of issues impacting on family life, most commonly identified was poverty, parental mental health, parental drug and alcohol misuse, domestic abuse and to a slightly lesser extent, parental learning disabilities. There was frequent emphasis that these issues were often inter-connected and not in isolation. Neglect was repeatedly highlighted as a 'huge issue' and there were general observations that this was often due to a lack of understanding or knowledge (for example, due to their own experiences of being parented). There were insights into the interaction of many factors impacting on family life; however, there was a critical reflection that families are highly individualised and can have 'the same issues' yet interact in a completely different way. For example, as one family group coordinator explained in a focus group:

> I think you've got, you might have two families where there are similar issues – the big headline, domestic abuse, etc., etc., covering all the same range of problems but people are in a different place and that's often about their disposition. You can have lots of history of drug and alcohol misuse, estrangement from families, but they are at a point in their life where they are wanting to change things so I suppose it can come down to personality and there are others whose problems are so entrenched and at a point where they are not ready to change and you need to want to be involved.

There was a critical reflection shared in focus groups about the dynamics and change within families that meant that issues could arise requiring support at key transition times (e.g. new babies, children starting school, starting secondary school). There were a

range of time-limited support for parenting programmes relevant for families where a child or young person may become looked after (e.g. Multi-systemic therapy, Family Nurse Partnership). However, there was a strong emphasis on families being able to access support services at times of need and the value of an open door policy. The importance of flexible and responsive services was a key finding for family support services more generally (see CCPS, 2018; Weston & Scott, 2018). This was very clearly demonstrated by family support workers working alongside parents with learning disabilities:

> We remain involved with families, gradually decreasing support, but we will always be available for advice, encouraging them to come to parties and outings that we have. It means that we can 'sniff out' the potential for a crisis and prevent it occurring [Focus group, family support worker]

There was a recognition that working with families in this way meant that early intervention could happen in practice. This contrasted with a shared concern in some local authorities that families had to be 'in crisis' to receive a service; for example, one advocate for parents with learning disabilities shared 'I've had a couple going to ask for help, but social work saying they don't meet the criteria, but then there will be a crisis in a couple of months' time and then they'll [the children] be removed'. This was reflected across different family issues that often 'a crisis' needed to happen for support services to be made available.

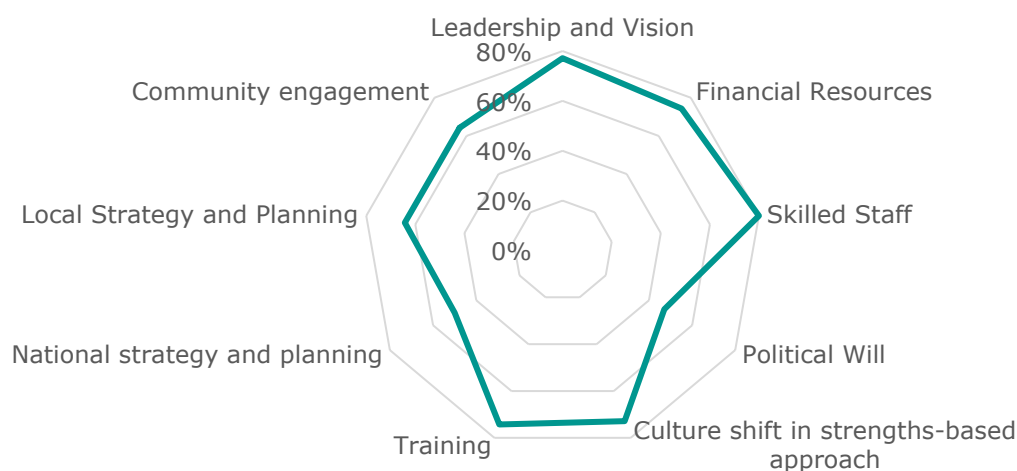# Implementation: Supporting Families

Culture change

Overwhelming there was a view that the cultures of social work practice, and importantly how families in need were perceived, was critical in implementing Part 12 of the 2014 legislation. There was a strong value base shared from professionals about having 'hope' and 'belief in families that change was possible'. There was an underpinning ethos that 'the best place for children is with their family'. Many of the services described had an aim to 'keep families together' or 'prevent children being accommodated'. In focus groups with family group coordinators there was a starting point to engage families and referring social workers reflecting a value base: 'everybody's come with the view that they hope that the children remain in the family'. There is a strong belief that families have strengths and in working together can develop a plan via a family meeting that can keep children safe and happy in families.

There were many comments that a belief in families and their abilities to find solutions to keep children safe required a 'culture shift' for many local authorities.

There has been a culture shift in practice as well – unsure when it started, but we became very harsh and critical of families. Currently looking at austerity and welfare and poverty and considering how they will work with families, with FGDM viewed as a 'kinder approach' with families than others currently undertaken. It's a softer approach, but relies on values as a social worker. [Focus group participant, statutory social worker]

There were links made to a shift in practice when social workers became 'case managers'. For some social workers, there were recollections that this approach to working with families was how they were originally trained; one social worker felt family group decision-making services 'reminded me why I became a social worker' and another 'felt over the years that we have lost sight of this approach' in working with families. As one questionnaire respondent shared: 'I think family group decision-making is a wonderful tool - I am just saddened that legislation is required to ensure families receive this. I was practicing this way 25 years ago'. As one social worker commented, 'it sounds old fashioned but it's important to be kind'. In these reflections, there was also a view for some that support for parenting and to some extent, Family group decision-making services were simply 'good social work practice'. The culture shift for a number of experienced social workers felt a cyclical return to how they were able to work with families at the start of their careers.

Chart 3: Percentage of respondents indicating that the following factors are needed for Family group decision-making services/Support for Parenting

Leadership and vision were identified as being a critical element of cultures at a strategic, operational and front-line service level (see Chart 3). Leadership is one of the three key elements for enabling change within the drivers framework, along with competency (selection, training and coaching) and organizational drivers (decision support data system, facilitative administration and systems intervention) (Fixsen et al., 2005). As one experienced social worker explained:

> I think what also helped was the buy in from senior management down. I think {Head of service} got it right just in terms of the planning and preparation in bringing FGDM into the {area}. He did his research. We have good relationships with the {other local authority} team who were very gracious and came out and gave briefings to staff. The buy in very quickly was there. Initially when the notes of interest went out, a lot of staff put a note of interest in to join the team. A lot of that came from the briefings that the {local authority} team had given to us. Just in terms of my colleagues team leaders in the area team, certainly have been very supportive and what helped was Signs of Safety being piloted in {area}, the transformational change agenda. {Director} had been doing his roadshow. People really bought into that and really understood what the department's vision was. And certainly that had been a change because the Children's Services Plan would be published and you know, it would come out in an email and not really everybody would pay much attention to it but {Director} took that forward and it was a bit of a reality check for services in {area} – just in terms of the finances and the money, the poor outcomes and all of that so all of that came together.

Therefore, there a perception that belief in families and belief in relationship-based social work practice had to be demonstrated at all levels within a local authority. The culture shift for some statutory social works teams appeared to develop from direct experience of different outcomes for families due to their involvement in Family group decision-making services or a family support service. For example, one local authority family group decision-making service built strong relationships with area teams:

> I had a family meeting just on Friday and afterwards the area team worker said, "If this hadn't happen this wee baby would have been accommodated" and it was the strength of the family. You're not seeing the parent in isolation, you're seeing that family operate through their family plan because the real richness is in there and how they will function and protect their children.

In another example, a voluntary service manager described a family where three children had been removed from a Mum and Dad with learning disabilities; when they received a referral when mum was expecting her fourth baby, the family support workers worked intensely with the parents and Mum and Dad continued to care for their baby one year on (accessing support from the service when required). It was critical that there was sustainability for the family in being able to care for the baby in the eyes of the referring social worker; the positive relationship with this local authority department flourished after this point.

One of the factors raised was the power relations between social workers and families. There were views shared across focus groups that there was still a perception from

families and communities, that social workers 'wanted to remove children' and 'there is a very big fear about losing your children'. These findings resonate with the public understanding surrounding children being taken into care and associated stigma for children and their families (Pineau, et al., 2018). There was a view put forward by advocates that the parents they worked with felt that 'asking for help puts them (the children) at risk of being removed'; therefore, families were often facing a high level of crisis when social work were involved. This perpetuates the vicious circle of a view that social work involvement would only be when crisis occurs and would then more likely result in children being looked after and accommodated. In some local authorities, there was a very clear agenda in changing this narrative and working alongside families:

> Even just the set-up of the family meeting in itself, there is a big shift in power difference. Normally in our statutory meetings it's heavily weighted towards professionals, the family are in the minority, you notice a big shift when it is their space and the family when it's the larger minority and you see that they feel more comfortable and more empowered to give a view and plan [Focus group participant, statutory social worker and family group coordinator]

In relation to family group decision-making, recognising the power dynamics in social work-family relations and taking a restorative view were considered to be useful. There were some challenges highlighted in reconnecting with families who had experienced 'trauma' by the system.

Although legislation was considered to be a useful catalyst in some areas, it is revealing in questionnaire responses that 'National strategy' and 'political will' were rated as lowest factors required for the implementation of Family group decision-making and support for parenting services. This may be because legislation, national policy and guidance exist and there is now a need to embed this into practice across Scotland.
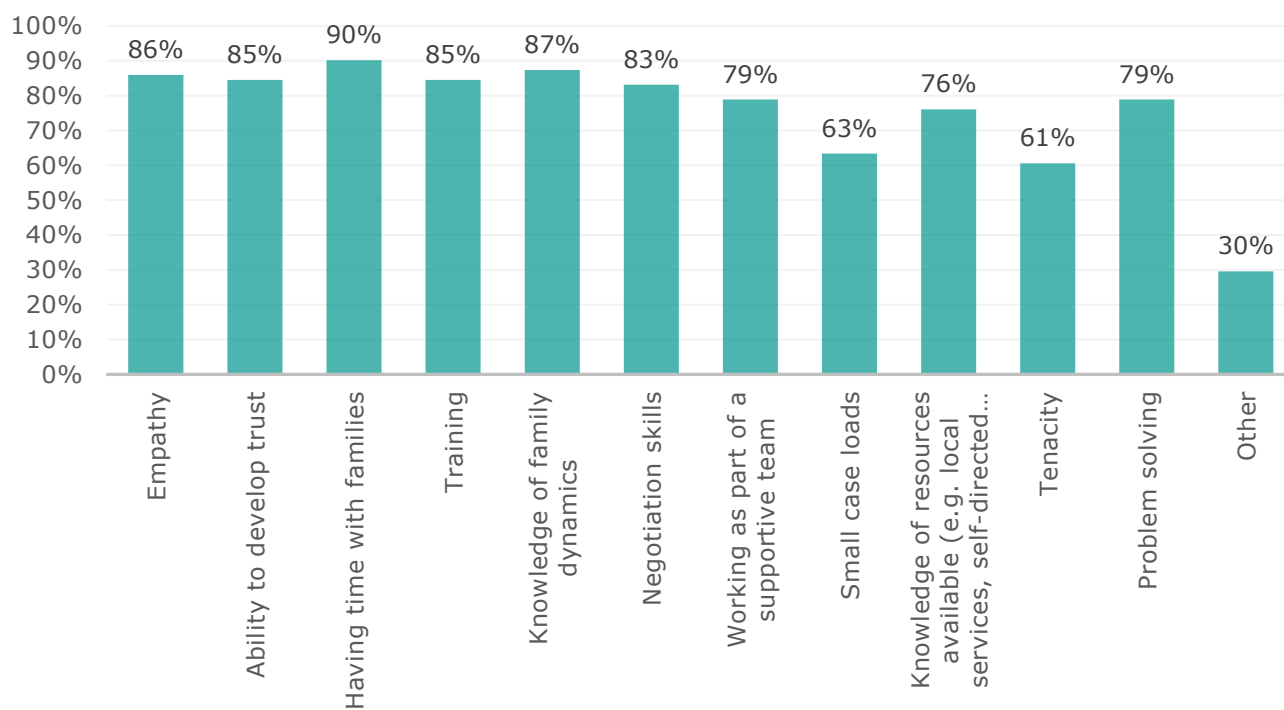
Relationships & skillsets

Relationships are fundamental in improving family lives for everybody involved. In questionnaire responses, 80% of respondents considered 'skilled' staff to be an essential component needed for family group decision-making services or support for parenting. An ability to develop trusting and emphatic relationships with families was essential at times of difficulty. The passion and skills from family support workers shared in focus groups was evident:

> There is nothing like family work. Going back to basics. Listening to them, let them tell their stories, just try and support them and listen to them, not making judgements.

There was a very high value placed on spending time with families and letting them 'tell their stories' (see Chart 4). For those services providing intensive family support, there

was a sense of privilege in doing this work and regret that many social workers were unable to practice this way. Local knowledge of communities and often different families was considered to be important. On a practical level, this meant that family support workers often knew about accessible services for families and had good relationships with other advice and support providers. There was also a sense of them belonging to the community too and being part of their lives. For some services, there was a clear emphasis on being there for families '24/7' as required. There was a particular value on having a strong relationship with families so they could ask for help in the future. This strongly correlates to an early intervention approach and recognises that families can experience periods of higher need.

Chart 4: Percentage of respondents indicating the following skills are required for Family group decision-making services/Support for Parenting (N=71)

In relation to Family group decision-making services, there was evidence of improved relationships between families and professionals developed via the process that had positive consequences for any engagement with services. For example, this conversation with family group coordinators in three different local authorities highlights:

> Improved relationship between families and professionals is huge, but in other formal arenas, it can unravel again. Something special about the family meeting which makes the relationship really human, and the other professional arenas can remain difficult.

…….But we've found that families will start to engage more with those processes, rather than leaving the mother alone at times in other forums. The family will come to those professional meetings, and that can be really empowering for families…...

…..One of the things is empowerment and recognition of the process, where these things are embedded, so it's an experience that happens and at the other end of the experience is a capacity or skill that wasn't there before. As far as outcomes are concerned, that process is very important. Often we talk about empowering and it's not embedded in a process, and it needs to be – they're important in understanding how 'this' works. It's an emotional process that families talk about emotionally.

Views shared by practitioners on what mattered to families showed: feeling listened to, being part of the solution, understanding what needs to change, and having the right help. All elements listed were scored over a mean of four by respondents (indicating that they were important or very important) (see Chart 5).

Chart 5: Important elements in Support for Parenting
(1=Not at all important, 5 = Very important)

Resources

There were many examples of excellent family support provision where children were at risk of becoming looked after. On many occasions these approaches reflected the kind of practical help and assistance families needed to address the stress factors that had impacted on their parenting. Opportunities to teach good loving parenting practices (such, as using routines and boundaries) were highlighted. Often there was an ethos of working alongside families, 'where they are at'; one family support worker explained that with one young mum she helped her clean the flat as nobody had ever shown her how to
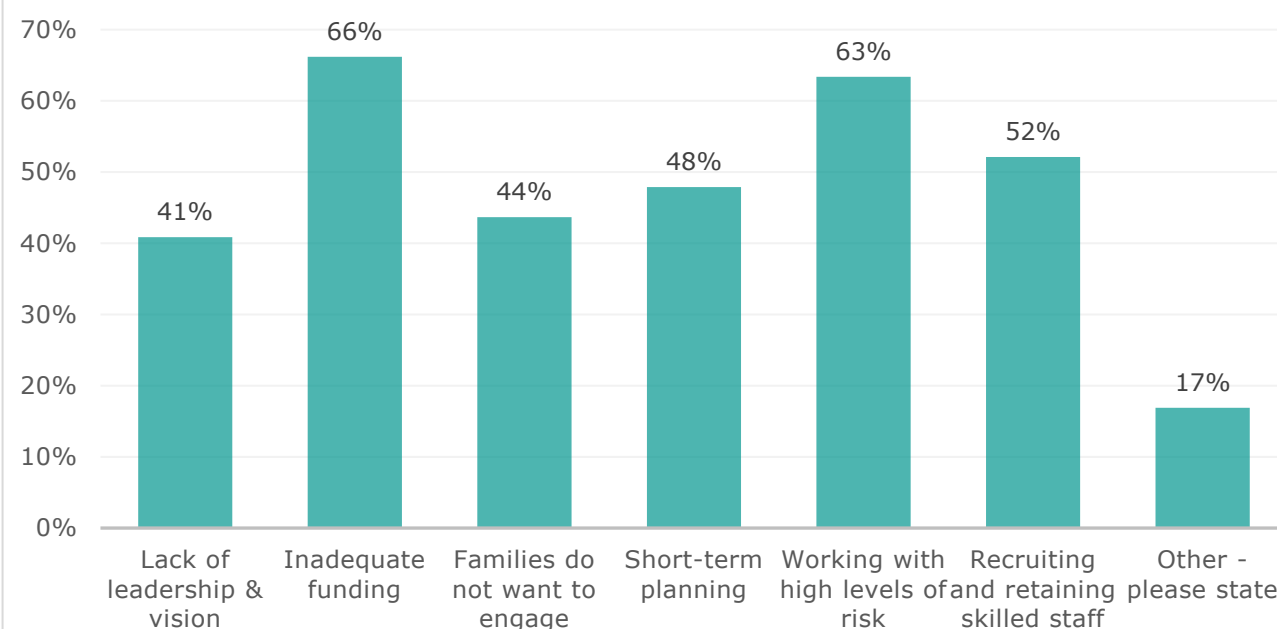
do this. Having access to flexible, person-centred and responsive services appeared to be very important.

We're using them just now, and they're really good because they're so flexible, because they can go in every day, they can go in first thing in the morning to get young people to go to school which they're doing, they can go in last thing at night to help children get to bed and establish routines. They can do, it's a bespoke package that we can organise. [Focus group, statutory social worker]

The family nurse partnership actually, that's, I would say that's been a really good service overall, in terms of preventing, in terms of parenting working, when the kid's coming into care, well babies, I would say they are crucial at the moment. [Focus group, statutory social worker]

The challenges to supporting families most frequently cited by respondents were 'inadequate funding' and 'working with high levels of risk', with approximately two thirds of questionnaire respondents indicating that these were challenges. The 'other' category included high case-loads, lack of early-intervention services, and professionals not trusting families or feeling that 'they know best' (see Chart 6).

Chart 6: Percentage of respondents who consider the following as challenges in supporting families where children are at risk of becoming looked after (N=71)

There has been a recognition of the benefits of early intervention and investment in children's services, rather than focusing on risk. Many of these discussions related to escalating costs for children placed 'out with' local authorities, for example:

> So there was a decision taken, because what happened was our spend for external provision was just going through the roof, but actually these kids were wanting to come back here, we were paying for their education externally, I mean the outcomes generally were just not that great, so a decision was taken by the council that we would get rid of our residential, and use our monies around that with additional funds to focus on putting support in at home.
> [Focus group, statutory social worker]

This was not the picture across all local authorities. However, it is worth recognising that investment into Family group decision-making services and support for parenting in some local authority areas had a very specific reference to reducing costs for local authorities and being part of a 'culture shift' in recognising the strengths within families, rather than deficits. There was a perception shared in some focus groups that this combination of factors was leading to change in front line social work practice in some areas. There was a strong view that investment in family support was hugely advantageous for everyone. Many examples demonstrated that, with the right supports in place, children were loved, safe and happy in the care of their parents and there was not a requirement for children to be removed from parental care. It was recognised that for some families, this would be long term support as children grow and develop and this was particularly pertinent for working alongside parents with learning disabilities.

Key learning points

1. Working with families using a strengths-based approach can lead to children and young people being loved, cared for and happy with the right support in place.
2. Legislation can play a strategic role in supporting service development for families; however, in isolation legislation does not lead to culture change. There was limited knowledge about Part 12: Children at risk of becoming looked after in the Children and Young People (Scotland) Act 2014.
3. Poverty, parental drug and alcohol misuse, parental mental health, domestic abuse and parental learning disability are key factors that may contribute to children being taken into care in Scotland.
4. Children can be at risk of becoming looked after at all stages of childhood. The importance of relevant services for families with teenagers deserves greater attention.
5. Family group decision-making (FGDM) services are flourishing in a small number of local authority areas in Scotland but require embedding into local systems to be effective across Scotland.
6. There is a lack of clarity in support for parenting as a relevant service.
7. Children's Service Plans could be further utilised strategically to develop services to support families where children may be at risk of becoming looked after.
8. Access to information about support services for families is limited despite the legislative duty to publish information about relevant services.

Conclusion

This progress review provides valuable insights into the range of services who work alongside families to prevent children becoming looked after.

The research highlights that family support can be required for children and their parents at all stages of childhood, from conception through to adulthood. There were a wide range of issues impacting on family life, most commonly identified as poverty, parental mental health, parental drug and alcohol misuse, domestic abuse and parental learning disabilities. In some cases, support may be short term; but in many instances, family support services are open and responsive to families' needs and an 'open door' approach over time was key. Values emerged at the heart of supporting families where identifying strengths in families and communities could be used to harness support through difficult times. This was demonstrated clearly in family group decision-making services where power was shared between social work services and families.

Legislating for relevant services is one part of the jigsaw in supporting families where children are 'at risk' of becoming looked after. However, the power of legislation is in the *implementation* to make a meaningful difference to the lives of families. This review has highlighted the key drivers of culture change, relationships and skillsets, and resources that together can start to make a difference in supporting families at times of difficulty.

Acknowledgements

References

Austin, A. E., Shanahan, M. E., Barrios, Y. V., & Macy, R. J. (2017). A Systematic Review of Interventions for Women Parenting in the Context of Intimate Partner Violence. *Trauma, Violence, & Abuse*, 1524838017719233. https://doi.org/10.1177/1524838017719233

Barn, R., & Das, C. (2016). Family group conferences and cultural competence in social work. *British Journal of Social Work*, *46*(4), 942–959

Berridge, D. (1998). Review of Family Group Conferences in Child Welfare. *Child & Family Social Work*, *3*(3), 213–214. http://dx.doi.org/10.1046/j.1365-2206.1998.0084a.x

Berridge, D. (1998). Family Group Conferences in Child Welfare. *Child and Family Social Work*, *3*(3), 213–214

Berzin, S. C., Cohen, E., Thomas, K., & Dawson, W. C. (2008). Does Family Group Decision Making Affect Child Welfare Outcomes? Findings from a Randomized Control Study. *Child Welfare*, *87*(4), 35–54

Bywaters, P. et al. (2017) Identifying and Understanding Inequalities in Child Welfare Intervention Rates: comparative studies in four UK countries. Briefing Paper 4: Scotland

CCPS Family Support Research Project – Part 1 (2018) What families think about support services, Edinburgh: CCPS.

Fixsen, D., Naoom, S., Blase, K., Friedman, R. & Wallace, F. (2005) Implementation research: a synthesis of the literature, Tampa: University of Florida.

Frost, N., Abram, F., & Burgess, H. (2014). Family group conferences: evidence, outcomes and future research. *Child & Family Social Work*, *19*(4), 501–507. https://doi.org/10.1111/cfs.1204

Lambert, M. C., Johnson, L. E., & Wang, E. W. (2017). The impact of family group decision-making on preventing removals. *Children and Youth Services Review*, *78*, 89–92. https://doi.org/10.1016/j.childyouth.2017.05.00

Mason, P., Ferguson, H., Morris, K., Munton, T., & Sen, R. (2017). *Leeds Family Valued: Evaluation Report*. London: Department for Education

McPherson, S., Andrews, L., Taggart, D., Cox, P., Pratt, R., Smith, V., & Thandi, J. (2018). Evaluating integrative services in edge-of-care work. *Journal of Social Welfare and Family Law*, *40*(3), 299–320. https://doi.org/10.1080/09649069.2018.149365

Mitchell, M. (2017). *Re-imagining Family Group Conferencing Outcomes*, PhD Thesis, University of Edinburgh.

Munro, E. (2011). *The Munro review of child protection*. London: Department for Education

Pineau, M., Kendall-Taylor, N, L'Hote, E. & Brusso, D. (2018) Seeing and shifting the roots of opinion: Mapping the gaps between expert and public understanding of care experience and the care system in Scotland, Washington, DC: Frameworks Institute.

Parenting Across Scotland (2010) What Scottish parents tell us, Edinburgh: PAS.

Olds, D. L. (2006). The nurse–family partnership: An evidence-based preventive intervention. *Infant Mental Health Journal*, *27*(1), 5–25. https://doi.org/10.1002/imhj.2007

Parents with learning disabilities. (2017, April 25). Retrieved December 12, 2018, from https://www.iriss.org.uk/resources/insights/parents-learning-disabilities

Percy-Smith, B., & Dalrymple, J. (2018). Stories from journeys to the edge of care. *Children and Youth Services Review*, *94*, 216–224. https://doi.org/10.1016/j.childyouth.2018.09.012

People First Highland (2018) Loving, Caring, Nurturing: How parents with a learning disability are being supported in Highland, Inverness: People First Highland

Sanders, M. R. (1999). Triple P-Positive Parenting Program: Towards an Empirically Validated Multilevel Parenting and Family Support Strategy for the Prevention of Behavior and Emotional Problems in Children. *Clinical Child and Family Psychology Review*, *2*(2), 71–90. https://doi.org/10.1023/A:102184361384

Scottish Children's Reporters Administration (2018) *Statistical Analysis 2017/18.* Edinburgh

Scottish Consortium of Learning Disabilities (2015) Supported parenting: Refreshed Scottish Good Practice Guidelines for Supporting parents with a Learning Disability, Glasgow: SCLD

Scottish Government. (2012). *National parenting strategy: making a positive difference to children and young people through parenting.* Edinburgh.

Scottish Government. (2016). *Children and Young People (Scotland) Act 2014 - National Guidance on Part 12: Services in relation to children at risk of becoming looked after, etc*. Edinburgh.

Scottish Government. (2017). A Nation with Ambition: The Government's Programme for Scotland 2017-18 Edinburgh.

Scottish Government (2019) Children's Social Work Statistics Scotland 2017-18. Edinburgh.

Social Care (Self-directed Support) (Scotland) Act 2013 (2013). Retrieved from https://www.legislation.gov.uk/asp/2013/1/enacted

Suchman, N., DeCoste, C., Castiglioni, N., Legow, N., & Mayes, L. (2008). The Mothers and Toddlers Program: Preliminary findings from an attachment-based parenting intervention for substance-abusing mothers. *Psychoanalytic Psychology*, *25*(3), 499–517. https://doi.org/10.1037/0736-9735.25.3.49

Tarleton, B, Ward, L. & Howard, J. (2006). *Finding the right support: A review of issues and positive practice in supporting parents with learning difficulties and their children*, Bristol: University of Bristol.

Ward, H., Brown, R., & Hyde-Dryden, R. (2014). *Assessing Parental Capacity to Change when Children are on the Edge of Care: an overview of current research evidence* (p. 193). London: Department for Education.

Webster-Stratton, C., & Reid, M. J. (2003). The incredible years parents, teachers and children training series: A multifaceted treatment approach for young children with conduct problems. In *Evidence-based psychotherapies for children and adolescents* (pp. 224–240). New York, NY, US: Guilford Press.

Weston, R & Scott, J (2018) CCPS Family Support Research Project Part 2 - What does existing research identify as effective strengths-based family support? Scoping review, Edinburgh: Coalition of Care and Support Providers (CCPS).

Wilson, S., McKenzie, K., Quayle, E., & Murray, G. (2012). A systematic review of interventions to promote social support and parenting skills in parents with an intellectual disability. *Child: Care, Health and Development*, *40*(1), 7–19

Appendix One

Under Part 12, section 68(1) of the Children and Young People (Scotland) Act 2014, a local authority must make arrangements to secure that relevant services of such description as the Scottish Ministers may by order specify are made available for the following persons:

    a) Each eligible child residing in its area

    b) A qualifying person in relation to such child

    c) Each eligible pregnant woman residing in its areas

    d) A qualifying person in relation to such a woman.

Under article 2 of the 2016 Order, relevant services for the purpose of section 68 (1) of the Act are specified as:

    a) Family group decision-making services which means a service which is designed to facilitate decision-making by a child's family in relation to the services and support required for the child; and

    b) Support services in relation to parenting which means a service which is designed to increase parenting skills.

Under section 68(3) of the 2014 Act, an eligible child is defined as 'a child who the local authority considers to be at risk of becoming looked after' or, who falls within such other description as the Scottish Ministers may by order specify. The local authority has a responsibility to determine whether or not a child is at risk of becoming looked after. Under article 4 of the 2016 Order, local authorities must publish, in such a manner as they consider appropriate, information about the provision of relevant services; the ways in which persons can contact the local authority about the provision of those relevant services, and; others matters about the provision of relevant services that the local authority considers appropriate.

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