Maintaining Significant Relationships Standards – VAA feedback

Note: We have used the term 'contact' throughout this document for consistency although we accept it is problematic and new language is needed.

1. **When there is the possibility that a child may become cared for by the local authority (LA), it is essential for all practitioners, managers, and leaders from all organisations involved in supporting the child and family to take active responsibility to ensure that a child's birth family and friends' network is identified, documented and considered in care planning decisions.**

CVAA supports this starting point but would suggest that we need greater specificity within the sub standards to draw out what is meant by statements such as 'considered in care planning decisions'. Experience and research show that often not enough proactive methods are implemented to find people in a child's network.

VAAs have advised that this starting point could be met if the child's social worker followed a similar approach to how adoption social workers explore prospective adopter networks. For example:

- Completing a genogram of the family
- Completing an eco-map of relationships to represent the quality of the relationship
- Offering a network meeting (if appropriate) to explore methods of staying in touch and if achievable, so that support is identified early
- Considering models of intensive searches to seek out and find family members who may be suitable to care for the child but have no knowledge of their being in care
- Inclusion of commentary about significant relationships (like Section 8 of a PAR) which references who each person is, the significance of the relationship for the child, the child's wishes and feelings about the relationship and how the promotion or non-promotion of the relationship would have an impact on the child. Usually CPRs reference what the LA is proposing and why this is, but with limited to no commentary about the impact of the proposal.

The more specificity about which organisation/professional is responsible for each of these actions and when they should be completed, the more robust the standards will be.

We are assuming that input from ADCS regarding this starting point and others below which relate to work carried out by LAs has been sought as support from Directors and senior LA managers will be essential in understanding the standards, and actually resourcing and implementing them.

2. **Where a child is cared for by the LA and a plan of permanence is still to be determined, preserving a child's connections to their birth family network is important and actively explored to support birth parents or provide care for a child as part of assessments completed. The quality of family time during proceedings will also assist in identifying the support needed for Staying in touch (SiT)/contact plans and indicate the potential for future meaningful relationships.**

All these points are valid and good but it should be clarified that they are in the context of a permanence plan being formed, as regular and ad hoc contact for all children in foster care in the norm, unless it is assesses as dangerous from the start (and even then it is usually managed somehow).

We would like this starting point to have a stronger emphasis on contact *as long as it is in the child's best interests and feels safe for children*. We know that contact, when it has been carefully assessed and is properly supported, can have many benefits for children's long-term sense of identity. Yet we also know that contact when children are in proceedings, in foster care or in the care of birth family members – whilst longer term decisions are made – can be confusing and even traumatising for them.

In order to stress these points, we recommend elaboration on the phrasing of 'actively explored' in the starting statement. We would like to see reference to a clear multidisciplinary assessment of the child's history, including presenting difficulties and strengths, in order to work out how contact is going to help the child make sense of their experiences and their life story and ultimately have a happy and fulfilled childhood. An assessment would need to take into consideration the events that led to a child being removed and the part all family members played or did not play in this and their stance on events, in order to assess (and risk assess) the way forward and recommendations for contact.

Contact also needs to be put into the framework of the child's developmental needs and how they change over time. The first step is placement stability, the second is attachment to the new family and thirdly identity formation. Contact at each stage has to support the developmental stage of the child in placement, and needs to be an integrated part of therapeutic life story work that is resourced.

In terms of supporting practitioners to meet this starting point, we would recommend inclusion of the following:

- More detail on the assessments that should be undertaken – e.g. assessing who the contact should be with, the quality of contact, and support required to ensure it is in the child's best interest and as positive as possible.
- Consideration within assessments of what feels safe for children, including their wishes and feelings.
- Consideration in contact plans of how decisions made will be communicated to children, how children and families should be prepared for contact, what supported is needed, and information on how children can stop family time. The Family Justice Young People's Board has done some great work on this, available **here**.
- Consideration of support for all parties (birth parent, child, adoptive parents) before, during and after so that it is not re-traumatising and harmful for the child.
- Consideration of how Family Group Conferences are used.
- Regarding assessing the quality of family time during proceedings, there should be note that alternatives to contact centres need to be considered as this can be a chaotic and unsupported process for all parties.
- Suggest reference to involvement of permanence professionals (adoption/kinship/fostering practitioners) at an earlier stage so that they can offer expertise around contact planning early on.

- Guidance for professionals undertaking observations of family time to support evidence-based decision making on the quality of relationships/support to be given.

3. **Where adoption is chosen as the preferred permanence option, all birth family members and significant individuals who have been part of the child's life need to be explored as potential relationships for supporting ongoing Staying in Touch (contact) plans for the child. Such plans must be tailored to each child, be meaningful, regularly/timely reviewed, and subject to open discussions involving everyone involved in care planning and including the voice of the child / their network i.e., older siblings. It is essential that these plans are not viewed as rigid templates but rather as customised, flexible approaches reflecting each child's unique circumstances.**

   The Cafcass guardian and Independent Reviewing Officer (IRO) play crucial roles in ensuring that plans for maintaining relationships are effectively communicated among professionals and caregivers or future adoptive parent/s. This communication is facilitated through tools like the guardian's report/outcome letter to the IRO and the guardian's later life letter to the child (this is NOT a replacement for the CSW later life letter and is in addition to). "

Again, we would like this starting point to emphasise the importance of assessing what is best for the child rather than the ambiguous language of 'exploring'. There needs to be an assessment framework to understand the contact decisions in the context of the child's early experiences (pre birth and post birth) and leading up to the decision to remove them from the care of their birth parents.

CVAA agrees that plans need to be tailored to each child but this must be done in a way that takes into account the child's developmental needs at different stages in their childhood, which goes beyond just listening to their wishes. For example, children may say they want contact because they are longing for their birth family member but at the same time as being frightened of them. They may say they want contact because they feel they must and their birth family member wants this or demands this. Hearing the voice of the child is vital and complex, and requires complex decision-making from professionals, sometimes involving adults making decisions in children's best interests without being swayed by the emotions and feelings that these decisions evoke. Some children need to feel safe and settled into their adoptive family and receive some therapeutic life story work before contact (that is supported and managed) can be positive. It is this complexity of needing an assessment of the child and their needs (as they develop during their childhood) that is key. It needs all the professionals to be working from this shared stance. There needs to be an emphasis on multi-disciplinary assessment of child's needs including a child's network.

Further considerations to address include:

- Elaboration on the term 'meaningful' – what does it mean to make contact meaningful? When is simply spending time with relatives meaningful vs. using time for defined activities such as talking about identity/family history?
- 'Timely review' - how often? By whom? It is vital that this is specified
- 'Everyone involved in care planning' – there may be benefits to spelling out who 'everyone' is intended to be e.g. would this include former foster carers?

- It will be important to ensure that standards apply to all, including children adopted via EPP, older children and children adopted intercountry for example.

Has this survey been sent to Cafcass and NAIRO for their views on aspects affecting their workforces?

4. **The Child Permanence Report (CPR) clearly defines the family members /significant people identified in the Staying-in-Touch (contact) plan, outlining the support provided and specifying how the person will maintain a connection with the child through different methods (such as using digital platforms or having face-to-face meetings). This will also be reviewed at the point of a match for a child with adopters and due consideration given to the implications of and of not Staying in Touch for that child. Possibly considering a presumption that the child will stay in touch and reasons not to fulfil this would need to be clear.**

We reiterate that the CPR needs to draw heavily on the multidisciplinary assessment already undertaken. In addition to defining the contact plans, it needs to provide appropriate information about how these decisions were made.

Further considerations:

- As noted in the Public Law Working Group report, there should be appropriate training for all staff in all organisations dealing with writing reports such as CPRs
- Also noted in the Public Law Working Group report, there needs to be firm understanding that CPRs are written for the court, adopters AND adopted person and sensitive, appropriate language is therefore critical
- Would there be merit to adding a point on the review / signoff process for CPRs to ensure they are sufficiently thorough and not 'cut and paste' jobs?
- The standards so far mention the CPR and PAR (below) but not the APR. In the APR it could be useful to have the contact plan as presented in the CPR with an extra column for how the adopters would maintain the relationship.
- In the Purple Book Project, one of the adoption support standards is ensuring that adopters are introduced to the team who supports with contact. Should the contact details of this team be represented in all APRs?
- Elaboration on use of digital tools.

5. **The Prospective Adopter Report (PAR) should thoroughly explore openness to Staying in Touch (contact) alongside parenting capacity and other elements of the PAR. It is essential for all practitioners, managers, leaders, and decision makers to support adopters to understand and embrace expectations, that Staying in Touch (contact) is not a one off scheduled event but a life-long endeavour. Staying in Touch (contact) should not be seen as a separate element of an adoptive parents' capability but one that is a strength or vulnerability and central to support an adopted person's life-long needs.**

CVAA supports this starting point, especially the statement that contact should be a lifelong endeavour.

Adopters can be prepared well but Staying in Touch cannot be achieved without well-funded high-quality support which involves therapy, therapeutic life story work and facilitated contact. Without support this will lead to disruptions and children returning to care. We would therefore recommend a strategy is developed prior to the publication of these standards for communicating this need to government and key decision-makers, to make clear that plans and agencies will fall short of these standards without additional investment.

In the writing of the 'sub standards' beneath this starting point we would recommend further unpacking of what the support looks like from professionals to adopters to set expectations. For example, the use of reflective discussions and analysis from the assessing social worker on the three key areas from Beth Neil's research: communicative openness; empathy – general and specific to birth family; and reflective functioning.

Furthermore if adopters are being asked to continuously review the possibility of contact, there should be exploration of which professionals will be available to support this longer-term work and where the responsibility sits once the three-year statutory period of support is over. This requires sector-wide consensus on whose responsibility this is within the professional network.

6. **When the search for an adoptive family begins, it is important that all professionals involved recognise the needs of the child and the importance of the Staying in Touch plan (contact). It is essential that they make every effort to ensure that prospective adopters are thoughtfully matched to meet both the child's short term and their longer term needs regarding their identity, understanding their history, coping with loss and understanding changing needs as children grow and develop. The Staying in Touch plan (contact) can also support life story work and should be seen as in conjunction with rather than a separate element of a child's needs.**

We agree with the general sentiment of this starting point however would recommend re-wording and re-ordering of the final sentence. Rather than the contact plan supporting life story work, we would prefer it to say that life story work supports the contact plan, as the child needs life story work once they have settled into their new family in order so that an informed decision regarding contact can be made. However we welcome the suggestion of better join-up between life story work and contact planning, as often this work is done in siloes even though it is intrinsically linked. Further commentary on how agencies should go about linking these two strands of work together would be welcome. For many organisations this would require an element of restructuring which would come at cost.

In the sub standards we would like to see more about what thoughtful matching means in practice, such as reflective supervision for social workers and reference to any tools which can help with complex decision-making around matching.

7. **If a child moves in with an adoptive family that differs from their cultural birth identity, it is crucial for all practitioners, managers, leaders, and organisations to acknowledge the responsibility of supporting adoptive parents to build connections with birth parents/relatives or significant others to help respect and maintain a child's cultural**

identity. Practitioners can support birth family to contribute to the CPR, to ensure connections regarding their culture or ethnicity are retained. Practitioners and managers make use of research evidence and tools (e.g. the AFDiT) to assist in this process. All aspects of a child's cultural identity must be considered including, but not exclusively: Race, ethnicity, religion, class, gender identity, sexuality.

We would suggest some rewording of this starting point, including removing the initial reference to 'if'. ALL children will move into adoptive families which differ from their cultural birth identity, it is just that the extent of that difference will vary. Even for children who are placed with families which are an ethnic match from a similar area, there will be work to do in helping to respect and maintain a child's cultural identity. We are also concerned about the phrasing of "practitioners CAN support birth family to…" as this is ambiguous – would a word like 'should' be more helpful than 'can'? Additionally, we would question whether, without intensive support, the birth family contributions to the CPR can be for the purpose of ensuring 'connections' at this stage of the process. The primary purpose would usually be to bring understanding about children's pasts, family history, traditions and so forth, so further work is usually required.

Further considerations which we would like to be covered in the sub standards:

- Reference to adopters meeting with birth parents face to face (this is in the adopter journey standards)
- Clarity needed over which practitioners are responsible for different elements of the work, e.g. supporting birth family to contribute to the CPR.
- Further guidance on the information contained in CPRs about birth family members as this can strongly influence how an adopter feels about maintaining relationships. Very often CPRs still have lots of information about risk and harm which understandably increases anxiety about maintaining relationships
- More references to valuable tools such as the AFDiT
- Drawing out of important themes from the AFDiT, such as consideration of age-specific support and concepts such as racial mirrors and representation in the home, community and peer interactions etc.

8. **Once a child moves in with their adoptive family all professionals involved actively facilitate and support the development/building of relationships between adoptive parents and individuals considered within the plan, and appreciate and evaluate both the positives and possible negatives of any evolving Staying in Touch (SiT) plan (contact). This is inclusive of the support needed to ensure adopters wishes and feelings are considered to support a healthy and positive experience for children. Professionals should maintain an open mind to SiT/contact plans and a "if not now, maybe in the future" attitude.**

We support the general sentiment here, that professionals and adopters need to work together to thoughtfully implement any contact plans, including consideration in the future if not at first. However the wording does not give consideration to timings, especially the concern that contact too soon with the wrong family members could destabilise the placement. This is true for both adoption and fostering. We feel it important to recognise the importance of timing, and that adopters are more likely to be responsive and positive about appropriate child centred birth relative contact once they feel secure in their relationship.

We would recommend reference to adopter communicative openness in the starting point also, which is essential prior to any contact taking place and throughout any form of ongoing contact.

Our view is that this document will be useful if it can shed light on how practitioners and adopters can be supported to tackle challenging situations such as: preparing and planning for difficult contact experiences; managing contact arrangements which are not happening as planned, including letterbox exchanges; adopters changing their stance on contact post placement; supporting children and adopters in cases where the child wants contact but the risk is too high at that time.

As per previous comments, we would appreciate further clarity on which professionals in particular are being urged to maintain an open mind to contact plans in the future, as this will improve accountability.

9. **Ongoing adoption support should recognise the importance of providing support for birth relatives /significant others and adoptive parents, with timely reviews of Staying in Touch plans (contact), addressing evolving needs at various ages and stages in an adopted child's life as they grow up. Those around the child, professionals, adoptive parents, connected birth relatives or significant others should also recognise the importance of other evolving needs from varying life stages of the adults around that child. – i.e. elderly birth grandparents, new births within the family of origin.**

We agree with this starting point but it requires proper resource behind it. Currently reviews of contact plans usually only happen post-adoption if requested by adopters. Even then, it can be a battle to get this reviewed due to limited capacity within adoption teams. Facilitated contact is hard to get agreement for which is a barrier for maintaining connections.

We agree that regular reviews of contact plans are vital, but there needs to be clarification on who should review them and roughly how often, and where the resource for this will come from. It may be helpful to suggest that reviews come after adopters meet with birth families as this meeting often provides reassurance. Reviews are essential because this recognises the experience of birth parents and how their views may change over time. For example, before a Placement Order is made, a birth parent is often 'fighting' for their child to return to their care, but over time they may adjust their viewpoint and process their loss.

There may be a case for acknowledging the lack of available support services currently and therefore providing ideas of what can be done if agencies do not have the capacity to provide some of this support. For example, recommending signposting to birth parent support services where organisations do not have services to do this in-house (Family Rights Group recently published its birth parent support map).

Although this may not be the case for every adopted child and family, for the vast majority there will need to be support for the birth parent, child, and adoptive parents before, during and after contact so that it is not re-traumatising and harmful for the child.

Further detail here is requested including:

- Guidance on expectations on what information is provided to children and young people, in what form. For example, they should be given or signposted to resources to help them explore their identity and questions about the relationships they want to maintain. Ideally this information would be co-created by and with young people.
- Likewise adopters and birth families - what information should they be provided with, and where can they go if they have question.
- If the standards are going to reference support to birth families, there needs to be more detail on what this support should look like.
- Many of the same questions posed for starting point 2 apply here too, around how children and adopters are prepared for contact, how safety will be assessed, how children's wishes and feelings are heard etc.
- Inclusion of the role of facilitated contact and when this is needed.
- Reference to the role/use of video interviews which some VAAs use within their practice and find very useful to support therapeutic work around contact and identity.
- A breakdown of what support should be considered around different forms of contact - letterbox, indirect including email, phone, and face to face.
- What about support for adopted adults and duties towards them?

10. **Adopted children will be able to maintain relationships with their siblings. This is not to detract away from birth relatives and significant others but highlighted by children and young people to be of significance to them. This includes siblings in other adoptive families and those that remain with birth relatives or significant others, whether they be full, half or step siblings as these categorisations may hold little meaning for children themselves and the closeness of their relationships. Professionals and adults should not make assumptions based on such terms.**

Despite agreeing with the ambition, we do not agree with the wording of this Starting Point because for some children, contact with siblings will not be possible for a variety of reasons. As with elsewhere, this will need to be carefully assessed to make sure it is safe and in the child's best interests. Contact with siblings, if possible, has the potential to be very positive but there needs to be support available, to enable the contact to be meaningful and allow siblings to talk about their experiences (they will usually have a shared trauma history) and share their differing experiences. In some cases children may feel conflicted about sibling contact and be supported to work through these feelings. Likewise in other cases adopters will need support to maintain the sibling connection if there is an identified risk.

11. **Adopter Journey: Consideration by professionals working with adopters to support Staying in Touch plans (contact) for safe and appropriate contact with their birth parents, significant others, and siblings. Recognising the collaborative effort of all parties involved in developing Staying in Touch plans (contact), focused on the well-being of the child/young person. These messages can be embedded throughout a RAAs service from information evenings, preparation training events, matching and support services.**

This starting point contains significant repetition of others, and reduces the major theme of adopter training into a single line. We would recommend a starting point dedicated to adopter training alone. As these are national standards, we would suggest reference to RAA services is removed in favour of reference to 'adoption agency service' to be inclusive of VAAs. We would suggest altering the language of "can be embedded" as this is essential rather than optional.

Under this starting point (or a new one focused solely on adopter preparation and training) we would like to see more guidance on how these messages should be embedded throughout adopter journey, through materials, training, inclusion of birth parents as guest speakers, and so on. For example, one of our VAAs includes therapeutic life story work ('The Adventure of Me') within its training to adopters which they find helps adopters with thinking around maintaining connections. They also have a maintaining relationships module which includes a section on voice of the adopter/child/birth family member. We would like a stronger steer from the standard on when to start introducing the message of promoting relationships, emphasising that this should be raised in early conversations and information videos.

In the sub standards we would like to see reference to training of professionals to ensure that staff are skilled in preparing and supporting families, and abreast of the latest research, evidence and practice tools on children's relationships and contact.

Do you have any suggestions on what the National Practice standards for maintaining relationships should be named?

No…sorry

Do you have any other comments or feedback?

- Suggest drawing heavily from the Public Law Working Group report which is due to be published on Wednesday 23rd October and referencing to CVAA 'My People' paper (published April 2024) for further detail on the VAA position around maintaining relationships.
- Somewhere early on there needs to be agreement and definition on what language to use in relation to contact / SiT
- We would like to see something on expectations around knowledge and education in relation to contact. E.g. supporting children's identity needs should be a feature within social work education, social workers should be encouraged to do assignments which promote empathy with birth parents, and they should have training on contact planning.
- There is currently nothing on culture change expectations which we feel is an omission. For example:
    - LAs and agencies should promote mindful language in how birth parents are discussed by social workers, as this language affects mindset of adopters and may encourage risk aversion.
    - Senior leaders should create space for reflective discussions on contact within their workforce, and encourage managers to explore thinking around contact in supervision.

CVAA

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