

Protocol for a randomised controlled trial of Family Group Conferencing at pre-proceedings stage

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| Intervention developer | Daybreak and 22 local authorities in England |
| Delivery organisations | 22 local authorities in England: Bath and North East Somerset, Birmingham, Bromley, Derbyshire, Knowsley, Lancashire, Lambeth, Leicestershire, Lewisham, Middlesbrough, North East Lincolnshire, Northamptonshire, Nottingham City, Plymouth, Redcar and Cleveland, Rotherham, Salford, Sheffield, Shropshire, Southampton, Staffordshire, Sunderland Family Group Conferencing providers: Daybreak, the 22 local authorities listed above, other providers |
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| Type of trial | Non-blinded parallel trial with rolling 1:1 randomisation of families to two arms, plus a process evaluation |
| Age or status of participants | Families with children of any age who enter pre-proceedings |
| Number of participating local authorities | 22 |
| Number of children and families | Expected final analytical sample size: 6,000 children in 3,300 families |
| Primary outcome(s) | Care status: point-in-time legal status at 12 months after date on pre-proceedings letter: in care (looked-after child) or not in care (all other statuses). |
| Secondary outcome(s) | <ol style="list-style-type: none"> 1. Perceived inclusiveness of how local authority worked with parent(s), at around 8 weeks post randomisation 2. Sustainment of outcome: whether child's living arrangement remains the same or changes, between court judgement (or equivalent) and a date six months later 3. Time spent in care: number of days between date on pre-proceedings letter and date 12 months later spent as a looked-after child or not. 4. Court diversion: likelihood that court proceedings are issued, by a date 12 months after the pre-proceedings letter. <p>We will also report results for 2., 3. and 4. at six, 12 and 18 months.</p> |
| Contextual factors | <ul style="list-style-type: none"> • Local authority's existing provision of FGC, if any, and level of buy-in to the FGC approach • Family court propensity to request families take part in FGCs |

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Acknowledgements

We gratefully acknowledge the advice of our project advisory board members, Professor Ruth Gilbert, Dr Ann Hagell, Andrew Ireland, Professor Peter Marsh, Professor Judith Masson, TK Vincent, and HHJ Carol Atkinson. We also acknowledge the contributions of Noel Arnold and Dr John Simmonds and other Coram colleagues. However, this document reflects the views of the authors only.

Acronyms

| | |
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| CAU | Care-as-usual |
| CPP | Child protection plan |
| DfE | Department for Education |
| FGC | Family Group Conference/Conferencing |
| LA | Local authority |
| LAC | Looked-after child/ren |
| RCT | Randomised controlled trial |
| WWCSC | What Works for Children's Social Care |

Background and problem statement

This protocol describes a planned evaluation of a type of decision making used in children's social care in England and internationally.

Randomised control trials (RCTs) of Family Group Conferencing (FGC) have been carried out internationally, including in the United States (Hollinshead et al., 2017; Cosner Berzin et al., 2008) and the Netherlands (Dijkstra et al., 2019). These have found a lack of impact of FGC relative to usual care on child outcomes including referrals, re-referrals, out-of-home placements, reports of child abuse and neglect, removal from the home, time to permanency, and placement stability.

However, the model of FGC used in each country and each trial is somewhat different. A previous evaluation of FGC at pre-proceedings in England showed promising results but used less robust methods (Munro et al., 2017). Previous evaluations have not been able to establish causality, due to the lack of a robust comparison group.

Background on the project

The Department for Education (DfE)'s *Children's Social Care Innovation Programme* (2014-2020) funded projects with promising emerging evidence of impact, including FGC. DfE's *Supporting Families: Investing in Practice* programme aims to help safely keep children with their parents, by seeking to work with local authorities to adopt and adapt FGC and two other projects (Family Drug and Alcohol Courts, and the Mockingbird model of foster care).

What Works for Children's Social Care (WWCSC) is overseeing the evaluations of the projects.

Daybreak, a charity specialising in the provision of FGC, will provide support to ensure effective delivery and implementation of the new models. This will entail: providing briefing, training and materials to local authority staff; help with implementation, including ongoing advice and consultancy, including some on-site support; on-site audit of delivery and process at 3-6 months and 12-15 months into implementation; meeting regularly with local authorities in order to identify, discuss and resolve implementation and data collection issues; and facilitating regional learning events, to enable the sharing of experience and good practice, and problem solving.

What is a Family Group Conference?

Family Group Conferences (FGCs) are **meetings led by family members to plan and make decisions for a child who is at risk** (Family Rights Group, n.d). Family group conferences can also be used for adults who are at risk.

Family Group Conferencing (FGC) coordinators convene a meeting with family members to plan and make decisions for a child or children. They explain the process and seek to motivate people to attend. As well as the immediate family, others may also attend, including extended family, friends, neighbours, advocates, carers, interpreters and professionals. During the conference, a plan to keep the children safe is agreed by all involved. This may or may not be adopted by social workers as the plan for the child or children.

What are the principles and philosophical underpinnings of FGCs?

FGCs are a **rights-based, strengths-based** approach that bring family members together where there are concerns about the child. A principle of FGCs is that families are asked to help develop their own solutions (Mitchell, Tisdall and Riddell, 2018). The DfE statutory guidance describes FGCs as a **voluntary** process. Marcynyszyn et al.'s (2012) study of FGCs for American native families in South Dakota describes FGC's (FGDM) as a **family engagement** process. One of the underlying philosophies of the FGC approach is that families are the experts on their own situation and should be actively involved in and **share decision-making** about children in the family, drawing upon their existing strengths and resources. It is **solution-focussed** in that families develop solutions to the problems that they face, being supported to do so by an independent FGC co-ordinator (Rogers and Parkinson, 2018).

What are the alternative names given to FGCs?

FGCs can also be called:

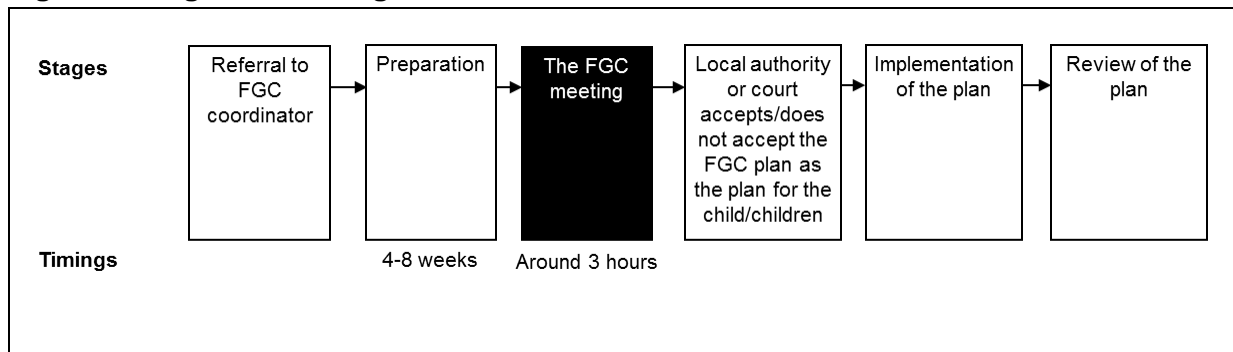
- Family Group Decision Making (FGDM)
 - Family Unit Meeting (FUM)
 - Family Decision Meeting (FDM)
 - Team Decision Making Meeting (TDM)
 - Family Team Meeting (FTM)
- (Early Intervention Foundation, 2018; Dijkstra, 2019).

In some cases these are different names for the same model of decision making, and in some cases these refer to similar but different models. Some may be used to refer to more agency-driven engagement practices (such as TDM or FTM) than FGCs, which are sometimes characterised from other practice by the involvement of an independent facilitator (Marcynyszyn et al., 2012).

What stages and timings are involved in FGCs?

There are five stages of a FGC: the **referral, preparation, the conference, implementation of the plan and review of the plan** (Family Rights Group, n.d). The preparation stage usually takes four to eight weeks (Family Rights Group, n.d, Early Intervention Foundation, 2018). We have summarised the process (Figure 1).

Figure 1: stages and timings of FGCs



What are the origins of FGCs?

FGCs originated in New Zealand. FGCs draw upon Māori culture and their development was a response to the large number of Māori children removed into state institutions.

FGC's origins as a child-centred and family-driven model are rooted in the traditional precepts and practices of many cultures where families share responsibility for community children and work collaboratively to solve problems.

How widely are FGCs used? Where have they been used, and in what contexts?

FGCs are reported to be used in over 20 countries¹ (Family Rights Group, n.d). There is a legal requirement in countries such as Ireland, the Netherlands and New Zealand that all families in youth care are offered the opportunity to make their own family group plan, for example through an FGC (Dijkstra et al., 2019).

FGCs are mainly used in child welfare, such preventative services, safeguarding work and court proceedings. Recently some local authorities have developed the FGC model for use in adult social care (Family Rights Group, n.d), and they have been used with long-term unemployed adults in Norway (Hillebregt et al., 2018).

How are FGCs used in England and Wales?

In England and Wales, **three quarters of local authorities** are reported to run or commission family group conferences for children in their area or be planning to do so (Family Rights Group,

¹ The Family Rights Group lists the following countries as using FGCs (mostly in child welfare): Austria, Australia, Canada, Finland, Germany, Holland, Hungary, Ireland, Israel, Italy, Japan, New Zealand, Norway, Poland, Serbia, Slovakia, South Africa, Sri Lanka, South Africa, the USA, England, Wales, Scotland and Northern Ireland.

n.d). However, only a small minority of councils routinely offer families a FGC before a young child is taken into care (Family Rights Group, n.d). The FGC model has been used for children experiencing domestic violence and abuse (Parkinson and Rogers, 2018) and in harmful sexual behaviour cases (Anderson and Parkinson, 2018).

What is the evidence base for FGCs?

The evidence base on FGCs in England is developing but promising. An evaluation by the Thomas Coram Research Institute (Munro et al., 2017) found promising findings on outcomes for FGCs used at pre-proceedings stage in two local authorities in England, Wiltshire County Council and the London Borough of Southwark. However, it did not have a robust comparison group. It found that, three to 12 months after FGCs, 75% of children were living with a parent (n=83, 60%) or a relative (n= 22, 16%). For children where no FGC took place, 61% lived with parents (n=22, 50%) or relatives (n=5, 11%). During the study timeframe of 2015-16, proceedings were initiated in 29% of FGC cases, and 50% of non-FGC cases.

The **DfE Social Care Innovation Programme** round 1 included projects which used FGCs. One of these was the Leeds Family Valued programme, which oversaw the expansion of FGCs to more families, including those affected by domestic violence and with a new offer for child protection. The programme evaluation (Mason et al., 2017) found that families who participated in a FGC felt more involved in the process and their values had been respected (100% of families interviewed, n=54). Nearly all also felt their FGC had helped address their problems and felt the services offered were appropriate to their needs (99% and 91% respectively).

The evaluation of Daybreak's FGCs under DfE's *Social Care Innovation Programme* also recorded that court proceedings were initiated in 29% of FGC cases compared to 50% of cases where no FGC was used (Sebba et al., 2017). The Leeds Family Valued and North East Lincolnshire's Creating Strong Communities programme evaluation also reported reductions in court proceedings in response to FGCs (Sebba et al., 2017).

Previous randomised controlled trials of FGCs

There are few examples of RCTs of children's social care programmes or interventions in England, and none cover FGCs (Baginsky et al., 2017b). Nurmatov et al. (2020) carried out a systematic review of studies comparing family group meetings to control group services. They found studies of provision in the USA, Netherlands and Sweden, as well as Munro et al. (2017) and Mason et al. (2017) covering England. They concluded that the evidence base was of poor quality, with few robust comparison groups. Nurmatov et al. found no RCTs on shared family decision making meetings that identified a reduction of entry or re-entry to care, referrals or re-referrals for maltreatment, or increased satisfaction, empowerment or reunification with families, compared to control services. Thus, they concluded that, overall, evidence of effectiveness was weak.

As such we are in a position of equipoise, holding no prior view on whether FGCs at pre-proceedings stage have an impact on child outcomes or not.

Addressing recommendations made in previous research

The key way in which this trial addresses recommendations made in the literature is by including random assignment to a comparison group.

Recommendations for future practice/evaluation from the Early Intervention Foundation's case study of the London Borough of Camden's use of FGCs included:

- Use a measure designed to show change over time, such as the Warwick-Edinburgh Mental Wellbeing Scale
- Longer-term assessment of FGCs to understand more about their effect and whether any outcomes are sustained
- Testing of how effective volunteer FGC coordinators are in comparison to professionals
- Use of a comparison group or counterfactual to measure impact on families (Early Intervention Foundation, 2018)

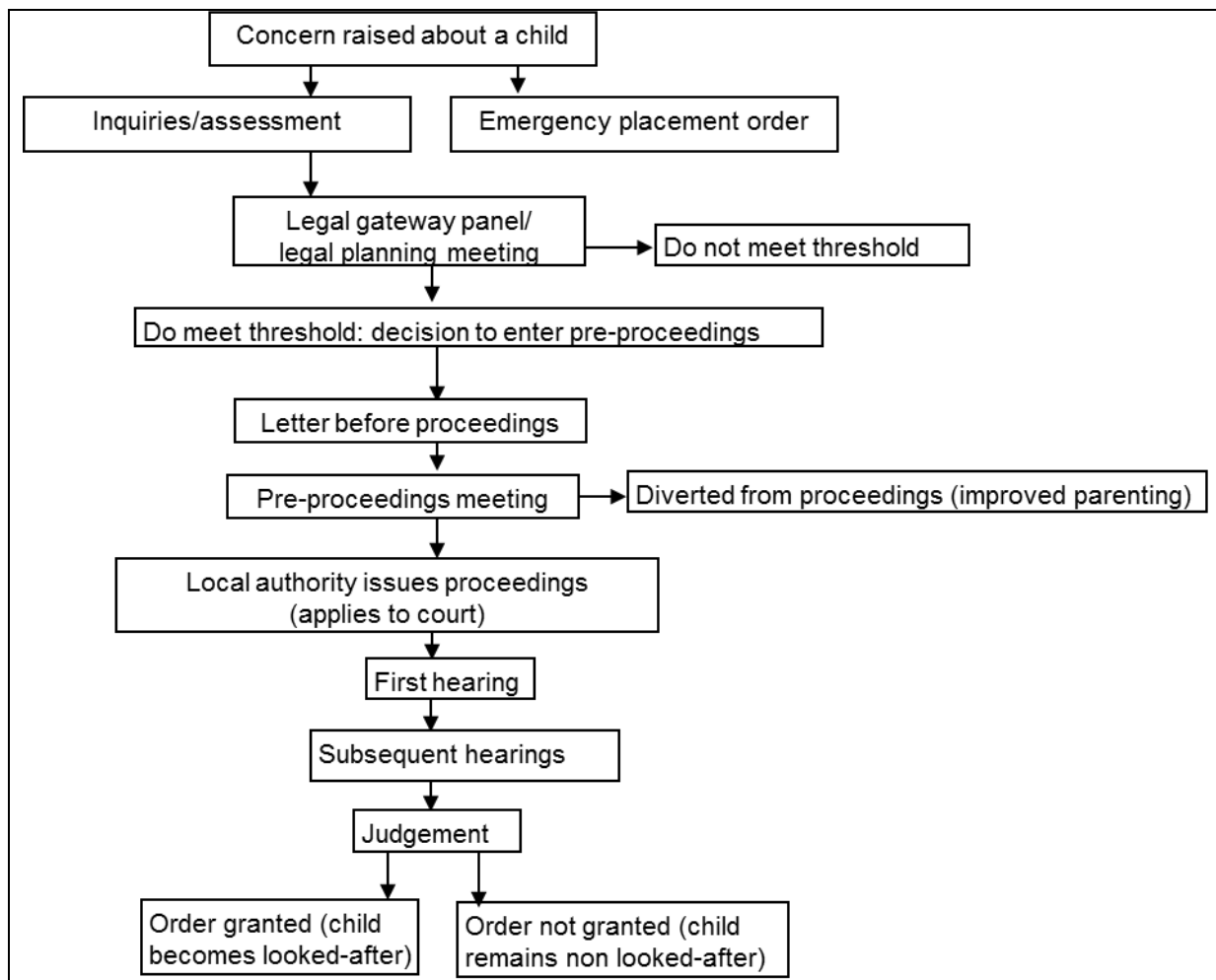
The DfE *Children's Social Care Innovation Programme* included an evaluation of all the funded programmes between 2015 and 2016. This final evaluation report included recommendations that children's service providers should use "a systematic, family-focused, strengths-based approach that supports families and young people to take more responsibility for their own lives" (Sebba et al., 2017). For the round 2 evaluations it also recommended that the evaluation designs should include comparison groups, including RCTs (Ibid).

Intervention and theory of change

Pre-proceedings stage (care-as-usual)

A child is already known to the local authority at pre-proceedings stage, but the birth or adoptive parents (usually, but sometimes other family members), rather than the local authority, have parental responsibility. The child may be a child in need (section 17 of the Children Act 1989), or subject to a child protection plan (section 47 of the Children Act 1989). In response to new information, or a gradually emerging picture of the (high) level of risk, a local authority uses pre-proceedings, and then care proceedings, to escalate a child's status from (usually) a child protection plan to being a looked-after child and take over parental responsibility (see Figure 2). Children who become looked-after in emergency situations bypass the pre-proceedings stage.

Figure 2: simplified process from concerns being raised about a child, to court ruling



The pre-proceedings stage begins when a local authority's Legal Gateway Panel or Legal Planning Meeting concludes that the local authority should issue a pre-proceedings letter to the parent(s), or adults with parental responsibility, of a child or children. The letter states that the local authority will seek to take the child(ren) into care, by seeking a Care Order from a court², if the parent(s) (or others) do not take specific actions. Pre-proceedings letters can be issued antenatally (though court proceedings themselves cannot begin until birth). Pre-proceedings letters can be issued at any point until the youngest child in a family reaches the age of 17. Those with parental responsibility are invited to a meeting where, perhaps accompanied by a legal aid solicitor, the local authority reiterates its concerns. Social workers gather evidence about whether or not the child is safe at home, which is submitted to the court. The extent and nature of this information gathering varies. The pre-proceedings stage can be terminated by a local authority if the parent(s) or others make positive changes, or for other reasons, such as a family agreeing to the children being looked after by alternative carers. The pre-proceedings stage ends on the date when proceedings are issued, that is,

² A local authority may apply for other kinds of orders from the court instead or as well, including Supervision Orders and Special Guardianship Orders.

when the local authority applies to the court, or writes to the parent(s) or others to say they will not do this.

Our understanding is that, from start to finish, the pre-proceedings stage lasts around six to eight months on average, but can be longer or shorter, partly due to differences in internal policies and practices within local authorities.

The pre-proceedings stage is sometimes described as 'PLO' or Public Law Outline stage. This refers to Ministry of Justice Practice Direction 12A in the Family Law Procedural Rules first published in 2010 (Family Law Procedural Rules, 2017).

The pre-proceedings checklist includes a record of key discussions with the family (which could include a family plan arising out of a FGC) but is not required to be filed by local authorities when proceedings are issued as part of the pre-proceedings checklist (Ibid). The record is only required to be disclosed by request. The Court Orders and Pre-Proceedings statutory guidance (Department of Education, 2014) states that local authorities "should consider referring a family to a family group conference service if they believe there is a possibility the child may not be able to remain with their parents, or in any event before a child becomes looked after, unless this would be a risk to the child." However, there is no requirement for a FGC. There is neither a right to a FGC, nor a responsibility on local authorities to provide FGCs.

Family Group Conferencing

The intervention being evaluated is referral by local authorities of families to FGCs, at entry into pre-proceedings stage. Local authority processes vary, within the boundaries of legal requirements, and all families are different. However, care-as-usual (CAU) during pre-proceedings involves a relatively intensive period of involvement with a family by social workers and other professionals. To this, a relatively intensive period of involvement with a FGC coordinator will be added, though the FGC meeting itself is a short, one-off intervention at around three hours in length.

A typical meeting takes place in a neutral location (not the family home or local authority) (Family Rights Group, n.d; Early Intervention Foundation, 2018).

The model of intervention is made up of a combination of work by the charity Daybreak, and work by the 22 local authorities. Daybreak, a provider of FGCs, will provide support to the local authorities in the sample to ensure effective delivery and implementation. The FGCs may be:

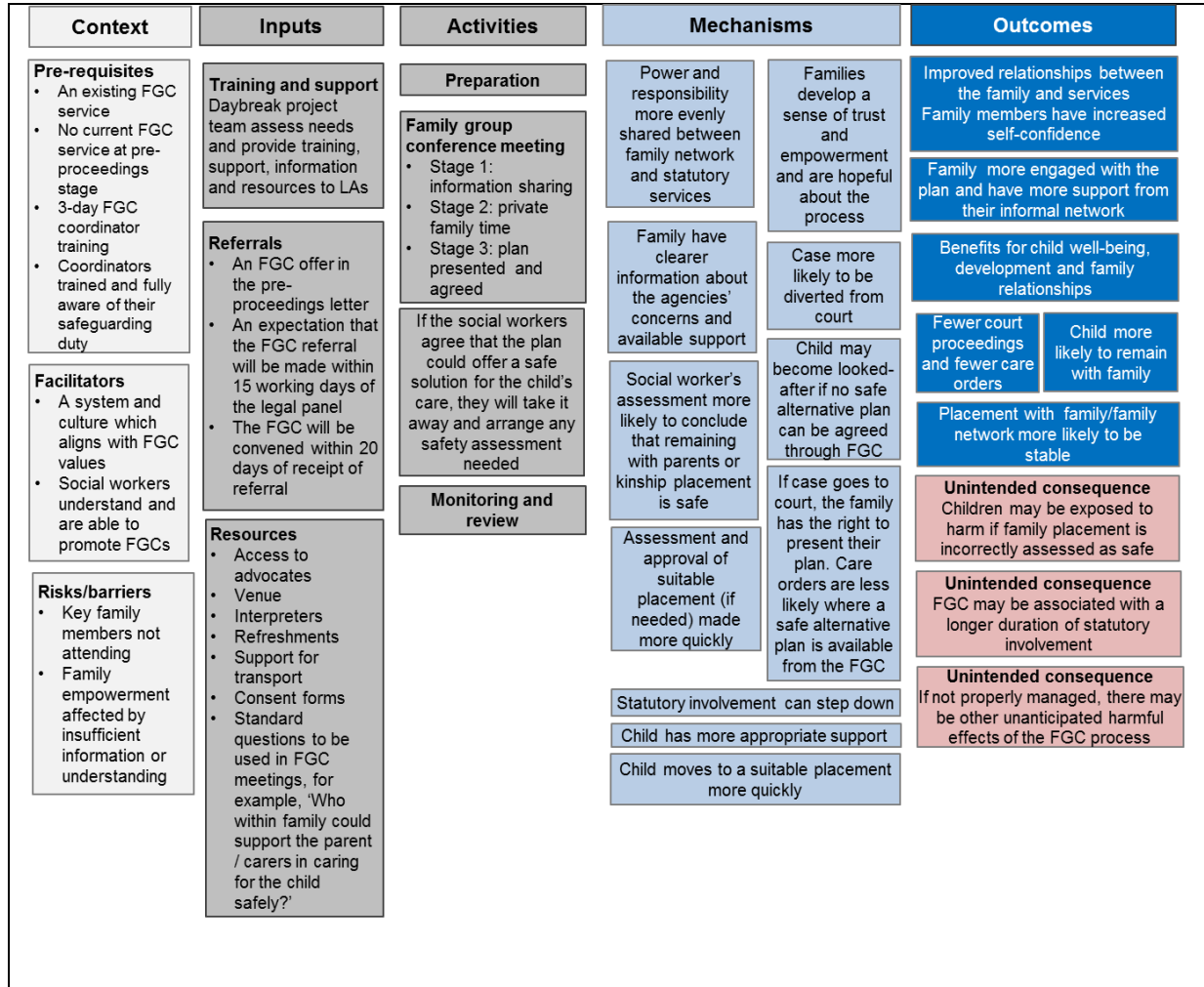
- provided in-house by the local authority (children's services team or other in-house provision),
- provided by Daybreak, or
- provided by another independent FGC provider.

We will request data from local authorities on this.

Description of the model of FGC used in this programme

The model of FGC in this programme is similar to that used in other local authorities and offered by other providers. A full logic model, setting out the inputs, activities and outcomes expected of the model of intervention in this programme, is available. It was developed by Daybreak with help from WWCS and Coram. A summary is shown below (Figure 3).

Figure 3: summary logic model of the model of FGCs in this programme



Both FGC coordinators and managers must have received baseline FGC training, including attendance at training on the use of FGC at pre-proceedings stage, provided directly by Daybreak.

The coordinators are responsible for recording all referrals and details of any activity linked to the referral. The coordinator contacts the relevant people and organises the FGC meeting.

In advance of the FGC meeting, the coordinator meets the main carer to obtain consent, and all participants receive written information about the process. The family members and professionals involved are fully briefed in advance, either face to face or by telephone. The participation of children (of any age) is sought, where appropriate.

Coordinators assist the family members to attend the meeting and seek to ensure that any access requirements are met.

At the FGC meeting, the coordinator chairs the meeting, though not the private family time which forms part of the agenda. The coordinator ensures families are aware of what needs to be discussed and helps ensure any questions or concerns are answered (where possible) so that they can put together a plan. The coordinators are responsible for ensuring the safety and wellbeing of participants throughout the process.

Following the FGC meeting, a review meeting is arranged (if required) and coordinators circulate the family plan to meeting attendees. A review FGC would not be necessary, for example, if both the family and local authority agree that the plan made in the FGC meeting is going well.

After pre-proceedings stage

Proceedings begin when a local authority issues proceedings by applying to a court. The government aims that court proceedings should last no longer than six months from the date of the care order application. Published Ministry of Justice family court data for England and Wales shows it took 33 weeks on average to dispose of a care or supervision case in April to June 2019 (Ministry of Justice, 2019).

Other treatments and interventions

It is possible that families who participate in the trial will also take part in the evaluation of Family Drug and Alcohol Courts, which is part of the same *Supporting Families: Investing in Practice* programme. Two local authorities – Birmingham and Bromley – are taking part in both evaluations. Also part of the programme is an evaluation of the Mockingbird model of foster care, in which three other local authorities in our sample are also participating: Sheffield, Shropshire and Staffordshire. Our process evaluation will investigate this possibility.

Other programmes and interventions families may experience include Family Network Meetings (mentioned as being part of current practice by four local authorities in programme application forms). We will use process evaluation interviews to investigate this possibility. Family Network Meetings are when family members get involved in the decision-making about how to keep children safe and develop the plans for this (Baginsky et al., 2017a). These tend to be social worker led, in contrast to FGCs.

Research questions

The primary evaluation question relates to **care status**: does referring families for Family Group Conferencing at pre-proceedings stage, relative to care-as-usual, change the likelihood that children in 22 local authorities in England are in care (looked after), 12 months after the pre-proceedings letter, and if so, by how much?

There are four secondary questions. These are shown below.

Does referring families for Family Group Conferencing at pre-proceedings stage relative to care-as-usual when used in 22 local authorities in England...

- **Perceived inclusiveness**: ...change the mean perceived inclusiveness of how the local authority worked with the parent(s) in planning their child or children's care, as assessed by parents on a 4-point scale, around eight weeks after randomisation?
- **Sustainment of outcome**: ...change the likelihood that a child's living arrangement remains the same or changes, between the date of a court judgement (or date of the letter informing families that their local authority will not pursue court proceedings) and a date six, 12 or 18 months later?
- **Time spent in care**: ...change the amount of time children spend as looked after (versus time spent not looked after), in the six, 12 or 18 months after the pre-proceedings letter?
- **Court diversion**: ...increase or decrease the likelihood that court proceedings go ahead (the percent of children for whom they go ahead), by a date six, 12 or 18 months after the pre-proceedings letter?

Other than 'perceived inclusiveness', for each question we will report results at six, 12 and 18 months, but the headline results will be at 12 months. By 12 months we can expect cases that do enter proceedings to have done so, making this the appropriate time period over which to look at whether court proceedings go ahead. Other outcomes can depend on court rulings and so a later choice of time point or period is appropriate.

Design

The trial will compare care-as-usual to care-as-usual plus referral for an FGC. The local authorities in the sample have in common the fact that they did not at the point of applying to the programme routinely offer FGC during pre-proceedings, whereas other local authorities in England may do so. So references in this document to 'care-as-usual' should be read as referring to care-as-usual in the local authorities in the sample.

Local authorities will identify families on a rolling basis and Coram will provide instructions for how local authorities can access an online randomisation platform in order to obtain randomisation assignments as and when needed. All families who start pre-proceedings are eligible for the trial, and assignment to intervention and control groups will be 1:1. Local authorities originally planned to begin referrals for FGCs for treatment group families from April 2020, but the start of the programme was delayed due to the Covid-19 pandemic. Once they begin, all these referrals will end 18 months later, and the final round of data collection will cover the three month period following this. This means that data on fewer families will be available for some of the analyses (for example, more will be available for outcomes at six months than for outcomes at 18 months).

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| Trial type and number of arms | | Parallel non-blinded trial with two arms: 1:1 randomisation to care-as-usual or care-as-usual plus referral for an FGC |
| Unit of randomisation | | The family |
| Stratification variables (if applicable) | | Local authority |
| Primary outcome – care status | variable | Point-in-time legal status taken from local authority records at 12 months after date on pre-proceedings letter |
| | measure (instrument, scale) | Dichotomised into: 'in care' (looked-after child) or 'not in care' (all other statuses). |
| Secondary outcome – perceived inclusiveness | variable(s) | Assessment by parents of their perceived level of inclusion in planning their child or children's care, on a 4 point scale. In two parent families where both respond, we will calculate the mean score, so there are 7 possible answers per child. |
| | Measure(s) (instrument, scale) | Responses to the following text message, sent by Coram to those with parental responsibility, for whom local authorities hold mobile phone numbers, and who do not contact Coram to request they are not sent a text message, at around 8 weeks after randomisation: hi, we're Coram. You may remember our information sheet on our study about how local councils work with families. How involved have you been in planning your child(ren)'s care in the last two months? Please reply: 1: not at all 2: slightly 3: very 4: completely. We will send you a reminder in a week unless you reply STOP. Thank you. |
| Secondary outcome – sustainment of outcome | variable(s) | Living arrangements at two time points, taken from local authority records. Possible living arrangements are: <ul style="list-style-type: none"> • Parent(s) including adoptive parent(s) • Relative(s) • Family friend(s) • Independent or semi-independent living • Foster carer(s) (unrelated, and not a family friend) • Children's home • Prospective adopter(s) |
| | measure(s) (instrument, scale) | Whether child's living arrangement, on two dates six, 12 or 18 months apart (three separate variables), is the same, or is different, taken from local authority records. The first date is the date of the court judgement, or in the case of families who do not go to court, the date of the letter informing families that their local authority will not pursue |

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| | | court proceeding. The second date is the date six months after this. |
| Secondary outcome – time spent in care | variable(s) | Number of days between date on pre-proceedings letter and a date six, 12 or 18 months later (three separate variables) spent 'in care' (as a looked-after child), taken from local authority records |
| | measure(s) (instrument, scale) | For each child a variable will be created to indicate the number of days in the period, between zero and 365 days, spent as a looked-after child |
| Secondary outcome – court diversion | variable(s) | Whether court proceedings are issued or not, by a date six, 12 or 18 months after the pre-proceedings letter (three separate variables), taken from local authority records |
| | measure(s) (instrument, scale) | Date proceedings issued, or date of the letter informing families that their local authority will not pursue court proceeding, or confirmation from the local authority that proceedings have not (yet) been issued |

Data – summary

We will collect data directly from parents on perceived inclusiveness, by texting the mobile phone numbers of parents, where local authorities hold this information, and where parents do not contact Coram to request that we do not text message them. These texts will be sent on weekdays during the daytime at around 8 weeks post randomisation. They will be followed by reminder texts one week later, for those who do not reply to request that we do not do this, or to provide a substantive response. We will offer entry into a monthly prize draw for responding.

We will collect data from local authority systems on child legal status, living arrangement, family characteristics, FGC participation, and other fields (see Annex 2). Once every six months, Coram will request completed data returns, in a standard template, from each local authority, relating to the previous six month period just finished, containing one row per child (the child is the unit of analysis). We will handle the data in line with legislation, guidance and Coram policies and procedures, to ensure it is secure, that participants' privacy is safeguarded, and that the data is deleted at the end of the project, defined as 12 months after publication of the main findings.

Randomisation

Randomisation will be on a rolling basis with 1:1 assignment of each family to either the intervention or the control group within each local authority. We will use a permuted block design to ensure that randomisation outcomes are more difficult to guess, with blocks of different sizes, so that the treatment and control groups are equally sized in each local authority as well as overall. The randomisation platform will be independent of Coram.

While we intend that randomisation will be 1:1, we may revisit this ratio if uptake of FGCs is much lower than anticipated. If this happens, Coram, in discussion with WWCSC, will consider revising the proportion of families that are referred for an FGC, if resources allow. The 24 local authorities in the original sample agreed to 2,649 FGC referrals. Lancashire and Blackpool originally made a joint application to the programme, and when Blackpool dropped out, Lancashire agreed to deliver the Blackpool FGCs. Merton agreed to deliver 28 FGCs before it dropped out. As this difference is

small, our calculations have not been updated to reflect the sample size falling from 24 to 22 local authorities.

Point in time at which randomisation takes place

Local authorities decide to pursue legal proceedings at a Legal Gateway Panel. This is the point in time at which randomisation will take place. At this point, the decision is known only to the local authority. The family becomes aware of the local authority's decision to apply for a care order when the pre-proceedings letter is delivered (by hand, or received in the post) which may be a few days or a week later. There may be one letter or two, in the case of two-parent families, but for simplicity we refer to the letter as singular in this document.³ As our information sheet will be sent in the same envelope, families will simultaneously become aware of this evaluation. A copy of the information sheet that local authorities will send to families can be found at the end of this document.

The appropriate start date for data collection is the date from which FGCs could start to influence family attitudes and behaviours. For members of the intervention group, the pre-proceedings letter will include information about FGC, and so this is the appropriate date from which to measure outcomes.

Randomisation and consent

This design brings the risk that consent refusal is higher for one or other group, due to families in the intervention group conflating participation in an FGC with participation in the evaluation. We will report on the rate at which each group objects to their data being processed for the evaluation.

It would be better to allow families the opportunity to opt out of participation in the evaluation before rather than after randomisation. This would lessen the risk that knowing which group a family has been assigned to differentially affects opt-out rates. However, we consider it more important that families receive their pre-proceedings letter at the same time as information on FGCs, so that they can, if they wish, seek legal aid advice on their participation in an FGC.

We will instruct local authorities to request randomisation assignments (intervention or control) immediately after the Legal Gateway Panel, by accessing a website.

Contingency procedures in the event of failure of the randomisation procedures

We will advise local authorities who cannot access the website, having tried on more than one device, to contact Coram. We will provide a randomisation outcome from the platform, or (if we also experience technical problems) a randomisation outcome taken from a back-up list held securely in Coram's project folder and accessible only by members of the evaluation project team.

Blinding

As is typical of trials in the field of social policy, the trial will be unblinded. Social workers, other professionals, the courts and the evaluators will all know or be able to find out which families have been referred for FGCs and which have not. Families themselves will know whether or not they have been referred for an FGC. As such, there is a risk that perceptions of FGCs will affect the outcome, rather than the impact of FGCs themselves. This will be especially pronounced for proximate outcomes like whether court proceedings go ahead. That is, the decision to abandon pre-

³ A family will be randomised once in the trial, regardless of the number of letters.

proceedings, or issue proceedings, depends on social workers' views of whether families have done enough to change. They may consider that families who have taken part in a FGC have done more than families who have not, whether or not the FGC causes any changes in the behaviour or attitudes of families.

Participants

Local authorities in the sample will identify participants from their records. For more information on recruitment of local authorities themselves, see section on 'Local authorities in the sample'.

Trial participants

The trial participants will be all families with a child or children in the selected 22 local authorities in England who are issued with a 'letter before proceedings' by their local authority during the course of the programme (originally planned for April 2020 to September 2021) alerting the parent(s), or those with parental responsibility for the child or children, to the local authority's intention to start care proceedings, if there is not significant change in the child(ren)'s situation. We estimate the trial to consist of approximately 3,300 families: this is the total of an estimated 1,650 in the intervention group, assigned to be referred for an FGC, and an estimated 1,650, in the control group, assigned to not be referred for an FGC.

Inclusion criteria

Our approach will be inclusive and, in line with advice from Daybreak, will not exclude particular groups of families. We will instruct local authorities to include all families who begin pre-proceedings in the trial. We will include:

- Families where one or more members do not speak English as a first language (FGC coordinators should arrange for interpreters)
- Families where a restraining order or other circumstances that mean that one or more family members cannot be present in the same meeting (FGC coordinators can arrange separate meetings)
- Families with any number of children of any age, from antenatal to the youngest child being 17 (Masson, 2017).
- Families with one or more members based abroad (FGC coordinators can arrange video conferencing)
- Families with any type of problem or circumstances leading to the local authority deciding they should enter pre-proceedings (which may include neglect, physical abuse, emotional abuse, domestic violence, substance misuse, a combination of these, or other issues).
- Families whose local authorities are seeking any kind or combination of court order(s), such as section 20, section 31, or interim orders
- Families where the children are already living with relatives, friends or neighbours in a formal or informal kinship care arrangement (but the parents retain parental responsibility)
- Families where the children have any legal status other than that of looked-after child (we expect this will usually be child protection plan but can be child in need or other)
- Families whose children have been previously looked after, but the parents (or other family members) have re-gained parental responsibility (so this may not be the first time they have started pre-proceedings)
- Families who have raised a complaint against the local authority.
- Families who have previously taken part in a FGC
- Families where the parent(s) of the child or children are themselves aged under 18

- Families who are being entered into the trial by their local authority after the local authority has finished delivering the number of FGC referrals it agreed as part of the *Supporting Families: Investing in Practice* programme (i.e. unfunded cases which the local authority may decide to pay for itself)
- Families where new information comes to light after they enter pre-proceedings, meaning the local authority takes immediate action to escalate the case, and pre-proceedings are bypassed.

Exclusion criteria

All families entering pre-proceedings will be included, and none excluded. However, for clarity, the following cases will be excluded from randomisation:

- Children who are already looked after.
- Urgent or emergency cases where the local authority takes immediate action, by-passing the pre-proceedings stage. As these families do not enter pre-proceedings, they are not eligible.
- Children in families who have already entered pre-proceedings in the course of this evaluation. Families should only be randomised once.

Analysis sample

For a child to be included in our analysis, they must be in a family meeting the inclusion and exclusion criteria above, but the pre-proceedings letter need not have been sent regarding the child. For example, we will request and analyse data from local authorities on new babies born into families after they enter pre-proceedings.

Sample size / Minimum Detectable Effect Size calculations

| | | Randomised sample | Analysed sample |
|--|--------------|--|--|
| MDES (Proportion of a Standard Deviation)⁴ | | 0.09 | 0.095 |
| Baseline/Endline correlations | Child | n/a: all children should be non-looked after at baseline | n/a: all children should be non-looked after at baseline |
| Intraclass correlations (ICCs) | Family | Unknown, assume very high: 0.9 | Unknown, assume very high: 0.9 |
| Alpha | | 0.05 | 0.05 |
| Power | | 0.8 | 0.8 |
| One-sided or two-sided? | | Two-sided | Two-sided |
| Level of intervention clustering | | Family | Family |
| Average cluster size⁵ | | Unknown, assume 1.79 | Unknown, assume 1.79 |
| Expected final sample size (children) | Intervention | 3,300 | 3,000 |
| | Control | 3,300 | 3,000 |
| | Total | 6,600 | 6,000 |
| Expected final sample size (families) | Intervention | 1,850 | 1,650 |
| | Control | 1,850 | 1,650 |
| | Total | 3,700 | 3,300 |

⁴ The original agreed number of FGC referrals was 2,649. Doubling this gives the assumed number of families in a best-case scenario, 5,298, and the assumed number of local authorities in our calculation is 24. Allowing for delays and shortcomings in implementation, the assumed number actually randomised is 3,700 families (6,623 children), falling to an assumed 3,300 families (5,907 children, rounded to 6,000 above) after loss to follow-up and exclusions from analysis. We impose that 50% are allocated to treatment. We have also assumed an ICC of 0.9 and exclude any effect of covariates. Our code gives an MDES value of 0.09. Two local authorities dropped out of the sample after this analysis was performed.

⁵ The assumed number of children per family is 1.79, because the ratio of households containing dependent children to children in the 2018 Annual Population Survey for England, from Nomis, was 1:1.79.

We assume that ICCs at family level are very high because of the likelihood that all siblings in a family have the same legal care status (i.e. non-looked after at baseline).

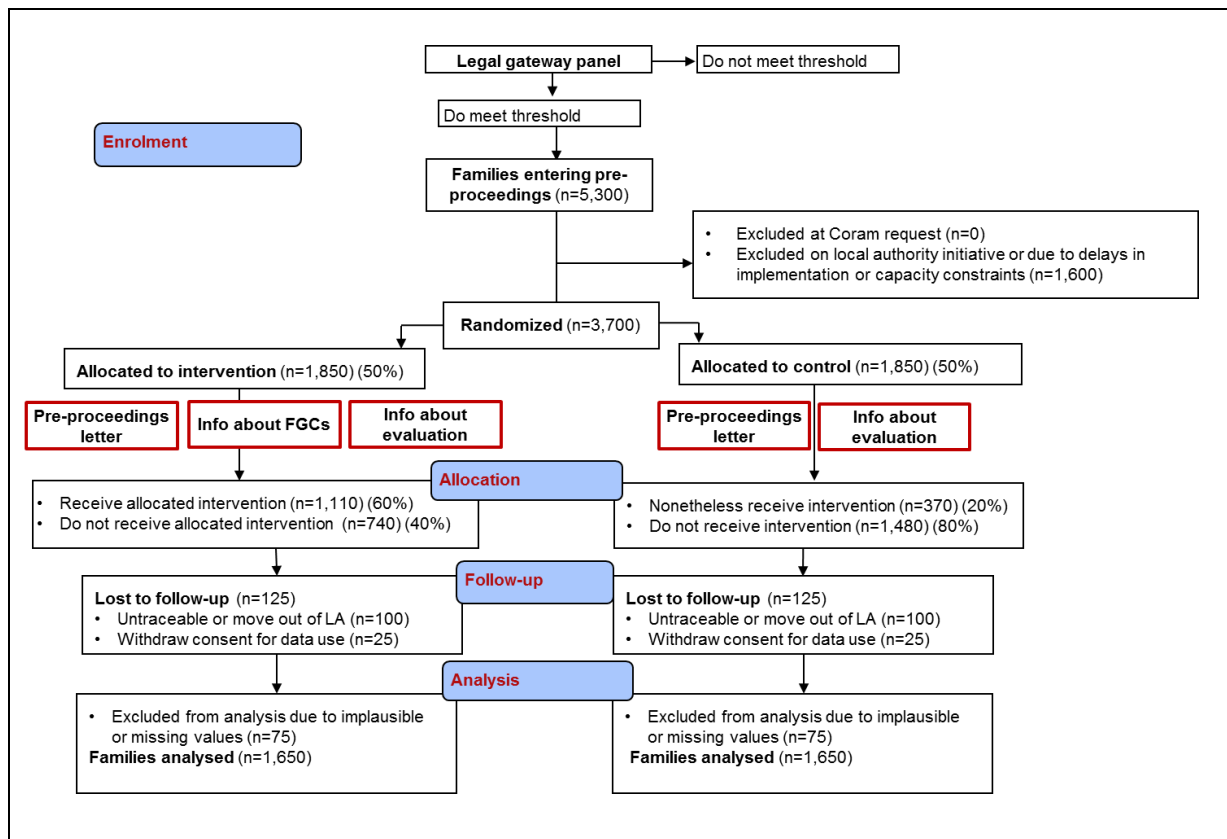
Sample size

We calculated our expected sample size based on the number of FGC referrals the local authorities in the sample have agreed to, which is based on the number of families expected to enter pre-proceedings in the 18 months. This is 5,298. We round this in the flow chart to 5,300 for simplicity.

We expect to lose sample members due to consent refusal, moving out of the local authority, death, or record keeping failures that mean data is not available for analysis of particular families. We will ask local authorities to distinguish between cases that close because families move away from cases that close because of a reduction in risk. We will use available data on families up until the point at which a case closes for either reason, but not make assumptions about later outcomes for these children, so they will not form part of the analysis of later outcomes.

Data cleaning checks may also lead to us excluding some cases from analysis, for example, cases with implausible values. It also assumes that all local authorities take part in the programme, while in fact one or more local authorities may drop out or experience delays in implementation that reduce the number of families they can contribute to the sample. Some families are also likely to get in touch with us to request that their data is not used for the evaluation – we will provide details of how to do this in an information sheet about the evaluation, which we will give to local authorities to include with pre-proceedings letters. For these reasons we expect that data will be available for analysis on 3,300 families (see Figure 4), representing around 6,000 children, assuming 1.79 children per family.

Figure 4: flow chart of expectations for randomisation, attrition and exclusions from analysis



Expectations for receipt of allocation

It is possible that we are too pessimistic in assuming that only 60% of families in the intervention group will receive a FGC, as Daybreak reports that its success rate at turning FGC referrals into completed FGCs is 85%. However, Daybreak has established processes while some of the local authorities in the sample have never attempted to carry out FGCs before, and none of the local authorities in the sample use them at pre-proceedings stage currently.

We conservatively assume that 20% of the control group do receive an FGC by the end of fieldwork. We will gather data on whether FGC meetings in fact happen or not. This could happen for a number of reasons. These include social workers undermining the protocol, courts requesting a FGC, or families changing status to a stage where FGCs are practiced (for example, a family might de-escalate to early help, where FGCs are in use in their local authority). This also accounts for the fact that the control group may receive some of the benefits of a local authority adopting FGCs, though they do not receive one themselves, due to system-level changes like staff taking a more whole-of-family approach in care-as-usual. We will take steps to mitigate the risk of contamination by encouraging local authorities to leave care-as-usual unchanged in the 'refer for FGC' group relative to the 'do not refer' group, and by explaining the evaluation (including this specific challenge) to local authorities.

Sample size for 'perceived inclusiveness' outcome

We expect that only a small number of parents or others will get in touch with Coram to request that we do not send them a text message. We do not know how many families have one person with

parental responsibility, or two people. We will ask local authorities for up to two mobile phone numbers per family. If a mobile number is not available, we will ask local authorities to indicate whether this is because only one person in the family has parental responsibility, or whether a person with parental responsibility has no known mobile phone number. We will report on this. We assume that the average number of adults with parental responsibility per family is 1.5, and so we expect to send around 5,500 initial text messages to 3,700 families, plus one reminder sent around a week later, in many cases. Some parents may change their mobile phone numbers in the two months after randomisation, which would depress the response rate. In case of the death of a parent or child in the two months after randomisation, we will ask local authorities to notify Coram, so that we do not send text messages to these parents.

We will include 'perceived inclusiveness' as an outcome in our analysis only if the overall response rate is 50% or higher, and the difference in response rates between the intervention and control groups is 5 percentage points or less. The response rate denominator will not include mobile phone numbers which prove to be inaccurate or invalid.

Expected effect size

We expect the effect size to be small to medium. Munro et al.'s (2017) evaluation of Daybreak FGCs found a small to medium sized effect. It found that, three to 12 months after FGCs, 75% of children were living with a parent or relative, compared to 61% in cases where no FGC took place, a difference of 14 percentage points. It found that court proceedings were initiated in 29% of FGC cases, but 50% in cases where no FGC was convened, a difference of 21 percentage points. Given this evidence, and the findings of the international evidence base, it is important to maximise the sample size, within reason, to give this evaluation the best possible chance of reaching statistically significant findings, and to maximise the chance that sub-group analysis can be carried out meaningfully.

Outcome measures

Choice of outcome measure

FGCs are a time-limited process with the intention of creating a plan to support and improve a specific parental issue or a problem or issue a young person is experiencing (Early Intervention Foundation, 2018). The primary aim of FGCs can therefore be described as being about improving decision making (means) rather than aiming to improve particular outcomes (ends), but we would expect improved decision making to have a consequential impact on a range of outcomes. The choice of outcome measure for this trial is not obvious, so we considered a number of possibilities.

All possible outcome measures have shortcomings and none will allow us to conclude definitively on whether children are safer or happier. For example, it can often be the right decision, rather than an indicator of service failure, to bring a child into care (Wilkins, 2018). To take another example, it may seem that young people who are not in care and are living independently or semi-independently are enjoying a positive outcome. However, they may be living in precarious temporary accommodation such as sofa surfing.

Outcomes such as participation, well-being, or a family's network of support, require primary data collection. Although local authorities collect data from looked-after children using the Strengths and Difficulties Questionnaire, this does not extend to children who are not looked after.

Primary data collection risks producing little data. If we collected so little data that analysis could not be meaningfully conducted, we would have wasted the time taken by families who did take part in data collection. In Munro et al (2017) attrition rates for an online survey of parents were relatively high, to the point where the data obtained at six months post-FGC were excluded from analysis.

We therefore decided to mostly measure outcomes taken from local authority records. We also decided to attempt to gather primary data from parents, taking care to design this to maximise the chances of gaining enough data for meaningful analysis, by asking one question of parents. We selected legal status as our primary outcome, because whether a child is in care or not is important in itself, and an important influence on many other child outcomes.

Details of the selected outcome measures

Perceived inclusion

We will be asking our question on perceived inclusiveness only of parents, and not other family members or friends who may be invited to attend FGCs and play a role in care-as-usual. This is a limitation, as we might expect FGCs to alter the perceptions of this wider group.

We will also be unable to distinguish the views of parents in the intervention group on their level of inclusion in care-as-usual as opposed to their level of inclusion in the FGC they were referred for. One may be high and the other low, for example, and we will not know whether parents respond with one of these values, or provide an average.

Living arrangement

Living arrangement is defined as where a child lives. These arrangements can be thought of either as living with family, friends or independently, or as living with previously unknown people. It is not the same as legal care status. Taking the categories used in Munro et al (2017), possible living arrangements are:

- Parent(s) including adoptive parent(s)
- Relative(s)
- Family friend(s)
- Independent or semi-independent living
- Foster carer(s) (unrelated, and not a family friend)
- Children's home
- Prospective adopter(s)

Table: legal status versus living arrangement

| | | Legal status | |
|--------------------|---|---|---|
| | | 'In care' | 'Not in care' |
| | | Looked-after child subject to a care order (including interim orders) | Child in need, child protection plan, neither |
| Living arrangement | Living with family, relatives, friends or independently | Unusual but possible ⁶ | Most children in England |
| | Living with previously unknown people | Most looked-after children | Impossible (for example, a child cannot live with foster carers unless they are looked after) |

We will ask local authorities for a child's 'legal status' rather than the most recent court ruling, in order to capture situations like children who are looked after under section 20. However, we will enrich our analysis by asking local authorities for the nature of the order or orders, where applicable. This will allow for analysis of, for example, Special Guardianship Orders (SGOs), as an extension to our primary outcome analysis.

FGCs might be expected to increase the likelihood of children moving to live with parents to living with other family members. However, Munro et al (2017) found no difference in SGOs (5% in the FGC group and 5% in the non-FGC group). Children may become looked after by a relative who becomes a connected person foster carer, in which case they will be counted by us as looked after. We will gather data on SGOs via our request to local authorities for the nature of the court ruling, and will report descriptive statistics on this outcome in the intervention and control groups, but we will not include this information as part of our primary outcome analysis.

For children who do not enter the care system, the local authority may not know as much about them, and so we may overestimate the amount of stability, for example by not counting moves from living with parents to living with other family members in an informal arrangement. (However, if most remain on child protection plans, or de-escalate to 'child in need' status, then the local authority should still know where the child lives.) This applies to the sustainment outcome measure only.

In many cases children will move once. This may be due to becoming looked after (though this does not guarantee that a child will move to a new home) but could be for other reasons unrelated to court and local authority decision making. At most, children may experience perhaps five or 10 moves over the course of 18 months, in the case of a child with multiple failed placements.

A move or absence of a move can be interpreted in different ways. We will not capture moves by families from one address to another, unless there is a simultaneous change in a child's legal status or living arrangement. Conversely, we may capture 'moves' for some children who do not physically move (change address), but whose other household members change, due to (for example) other

⁶ For example, cases where a local authority is helping birth parents without parental responsibility to care for their children, or cases where children live with foster carers to whom they are related.

family members gaining parental responsibility. Some moves may arise from bad luck, such as the ill-health of a carer, others might be desirable but resisted by the child and/or carers, and some can be beneficial (Masson et al., 2018).

The time period over which outcomes can be measured will depend on the amount of data available for each child, and the length of time it takes their local authority to begin FGCs at pre-proceeding stage. The minimum will be three months, and the maximum will be 21 months.

Analysis plan

The plan for the statistical analysis of the trial is described below. There is no separate statistical analysis plan document, but revisions to the plan may be made before outcome data is received if they are agreed with Professor Richard Dorsett, WWCS and Coram's ethical advisory group and details appended in the table at the end of this protocol.

Once we have gathered the data, and carried out checks and cleaning, we will carry out analysis using statistical software, publishing full records of syntax/code to enable replication.

We will carry out analysis of all participants for whom good enough quality data is available (see section on missing data for details), and who have not requested that their data not be used for the evaluation.

Primary analysis:

We will calculate descriptive statistics including the characteristics of the intervention and control groups on each variable collected, including fidelity. This will include a crosstabulation of living arrangement against legal status.

We will report full baseline characteristics of the sample, the characteristics of those lost to follow-up, and the baseline of those analysed. This will include the variable list below, plus:

- whether the local authority's FGC were externally commissioned or in-house;
- status of the FGC coordinator (for example, employee of the local authority);
- whether the FGC coordinator and manager were trained to standards set by Daybreak;
- a local area deprivation indicator (below local authority level);
- local authority Ofsted rating as of 2019; and
- local authority type (unitary, London borough, metropolitan district, or county).

To calculate our overall main result, we will use a logit model. We will report the effect in absolute terms (the percentage point difference, if any, between the intervention and control groups in the likelihood of being looked after, 12 months after the pre-proceedings letter), with confidence intervals. Our tests will be two-tailed, as FGCs may increase or decrease the likelihood of becoming looked after.

We will consider the following variables for possible inclusion in the model. We will decide whether to include them or not based on whether or not they significantly predict the primary outcome. One of these is 'time into implementation', because some local authorities are likely to begin referrals for FGCs at pre-proceedings stage before others. We will take account of what difference, if any, this

makes to outcomes, by considering whether to include a regressor for the number of months into implementation of FGCs in a local authority in which the pre-proceedings letter is sent.

- dummy variable for gender of child (female, male, neither, unknown);
- dummy variables for ethnic group of child (White, Asian, Black, Mixed, Other, Unknown);
- dummy variables for age of child (0-3, 4-7, 8-11, 12-15, 16-17, unknown);
- number of children in family;
- deprivation indicator (derived from postcode district);
- dummy variables for child's legal status on entry into pre-proceedings stage (child in need, child protection plan, or neither),
- dummy variables for time into implementation of FGCs in local authority of the date on the pre-proceedings letter (early: 1-4 months; mid: 5-9 months; established: 10 months+).

If any of the cells defined as above have fewer than 10% of cases, we will merge them with another cell. For example, if necessary we would merge the 0-3 age group with the 4-7 age group.

We will report the level of statistical uncertainty around all our estimated effect sizes. For our secondary analysis, which includes 10 comparisons (or nine depending on the response rates to the text messages overall and for the intervention and control groups) we will use Hochberg's step-up procedure to correct for the multiple comparisons. Given the difficulty in selecting appropriate outcomes to measure, we plan, conservatively, to adjust for multiple comparisons.

The length of time taken by the court to get from the application to the date of judgement is partly exogenous, due to the efficiency of the court as well as family-level characteristics. As some courts may request a FGC, which would slow down proceedings for the control group, we will report on but not adjust for the length of proceedings, from the date on which proceedings were issued, to date of judgement.

Secondary analysis

In our secondary analyses, we will follow the same model specification used for the primary outcome.

As with the primary outcome analysis, we will carry out analysis to take account of the nesting of children within families and families within local authorities. We will cluster standard errors at the level of the family, and use fixed effects for local authorities.

We will carry out logit regression (likelihood of proceedings being issued and of living arrangements being sustained) and linear probability models (days in each placement type), using the same regressors as for the primary outcome, and reporting Glass' Delta effect size.

Non-compliance analysis

We will assess fidelity through analysing qualitative and quantitative data provided to us by What Works for Children's Social Care, and through our analysis of quantitative and qualitative data collected from local authorities, comparing what we find to the logic model. For example, we will assess fidelity as FGCs in which the trainer is trained to Daybreak standards, and local authorities that implement FGCs to Daybreak standards. We will also consider the 'conversion rate': the proportion of referrals for FGC which lead to a FGC meeting taking place. We will also track non-compliance in the sense that we will track the number of intervention group members who do not receive a FGC, and the number of control group members who do. Local authorities may be excluded from analysis if no staff members take part in Daybreak training or if we assess that a local authority has failed to implement the model of FGCs with reasonable fidelity.

Survival analysis

There may be no difference in stability between the intervention and control groups, but changes in placement may occur sooner in one group than the other. We would expect FGCs to accelerate decision-making and planning processes, such that the decision to issue proceedings, or inform parents that the local authority will not be doing this, or any change in living arrangement, happens sooner with than without a FGC. We will test whether this is the case using survival analysis using the first of these dates (some children will change living arrangement more than once, for example). We will report Kaplan-Meier survival curves, survival times for the 25th, median (50th) and 75th percentiles, and standard errors for the intervention and control groups, and the results of a log-rank test we will carry out of whether any differences between the control and intervention group survival curves are statistically significant. Depending on which model best fits the data, we will report on the results of either an accelerated failure time model or a multivariate Cox proportional hazard model, with all covariates (discussed above) initially included, and then removed if non-significant (backward elimination).

Treatment of excluded participants

We will instruct local authorities to include all families entering pre-proceedings into the trial. However, it is possible that some local authorities may fail to include some families in the trial. We will explore the characteristics of these cases in process evaluation interviews with staff, but will not be able to analyse their data, as they will not have had an opportunity to request that their data is not used for the evaluation.

Analysis populations

Our analysis will be of all randomised participants with valid data (intention to treat), but we will also report results of the effect of treatment on the treated. We will carry out Complier Average Causal Effect Analysis.

Stopping rules

It is possible but unlikely that we may need to stop the trial early due to lack of power, or if the randomisation itself causes unacceptable levels of distress to large numbers of families. This decision would be made by Coram, in conjunction with the chair of Coram's ethical advisory group, and WWCS.

Our trial design involves regular, twice annual increases in the amount of data available for analysis. This will enable us to carry out an interim analysis of the relationship between receiving an FGC or not and our main outcomes. The exact point at which this interim analysis will become statistically meaningful will depend on the speed at which families enter pre-proceedings and local authorities implement FGCs, but we expect to carry out an interim quantitative analysis from month 7.

If our interim analysis finds very large differences in outcomes between the intervention and control groups, we would nonetheless continue the trial. This is due to uncertainty discussed elsewhere in this document about whether particular outcomes are better or worse for children, and due to the fact that our design is based on the minimum number of cases needed for robust evidence of effectiveness (and so an interim analysis based on a smaller number of cases would not be a robust enough basis on which to take this decision).

The level of statistical significance

In line with standard practice we will adopt 0.05.

Robustness checks

We will check the robustness of our placement stability outcome measure, by checking the difference made to our results from defining stability in different ways, such as comparing zero moves to one or more moves, and one move to two or more moves.

We will check for the likelihood of moving out of area between the intervention and control groups. We do not expect FGCs to affect the likelihood of a family moving to another local authority or abroad, or of a local authority losing contact with a family, but we will check this assumption.

Procedure for dealing with missing data and outliers

We may need to generate some dates, where the exact date is missing (see Annex 2 for details).

For missing child demographic details, we will code as 'unknown' and include in the analysis.

We will calculate and report on the response rate of parents to the 'perceived inclusiveness' text messages, overall and for the intervention and control groups.

Imputation of missing data on outcomes

We will follow WWCS's statistical guidance on imputation for missing outcomes. If all child outcomes are missing at every time point (living arrangement, and whether proceedings issued) then the child will be excluded from analysis.

We expect that some data may be missing due to gaps in staffing one or more of the local authority data lead roles, meaning we do not receive one or more of the data returns. If this happens we will use multiple imputation to replace the missing values.

In cases where we are aware that data is missing because the local authority data lead, as a member of the FGC team, has less access to data on the control group than on the intervention group, then we will use null imputation.

If data are missing for both of these reasons, other reasons, or unknown reasons, we will use null imputation.

Data validation checks

We will carry out the following data validation checks:

- Checking for data completeness and any missing codes
- Checking data ranges and types and total number, length and coding of records
- Data screening for duplicates (other than multiple births), outliers, plausible values
- Checking whether data have been imported correctly into the statistical software
- Checking the plausibility of the ordering of dates (for example, FGC occurs before date of first change in legal status/living arrangement /date proceedings issued), where applicable

Exploratory analysis

We may carry out analysis of the impact of the FGC provider or of characteristics of the FGC coordinator, or recommend this as an extension to our analysis in future research. This may depend on our exploration of the data on whether FGCs are consistently carried out in-house or externally commissioned in a local authority, or whether local authorities each report a mixture of the two.

We will keep and, where appropriate, publish records (code or syntax, and study documentation) that will allow the possibility that future researchers can return to the children and follow-up their longer-term outcomes, beyond 22 months.

Contextual factors analysis

We will explore the possibility of analysing differences between family courts as a mediating influence on our outcome measures. However, as we aim for a parsimonious analytical strategy, we will aim to include this in the process evaluation rather than trial analysis.

This is a summary of our plan for the process evaluation. The full plan, including topic guides, is appended to this protocol. The plan has undergone separate ethical approval, to give due consideration to the sensitive subject matter and the fact that families will be going through a difficult time, and likely to be vulnerable.

The purpose of the process evaluation will be to support the trial by providing evidence on the reason for the effectiveness or ineffectiveness of FGC. In our final report on the project as a whole, we will synthesis overall findings into a mixed methods summary, but will otherwise separately report on the impact evaluation and process evaluation.

We plan a number of qualitative and quantitative methods. The key method will be 1:1 in-person semi-structured interviews of around one hour in length, though some telephone interviews may prove necessary. These interviews will be carried out with parents, other family members, young people, and local authority staff. If interviewees give permission for recording, we will record the interviews, and if not, we will take notes. We will take notes from recordings and analyse the qualitative data using qualitative analysis software, taking a thematic analysis approach.

Using unique family IDs, we will seek to link our data on families to that collected by Daybreak from local authorities on the nature of the FGCs (such as the number of attendees of different types). This will enrich our description of the nature of the intervention delivered through the programme.

Process evaluation questions

- Was the project implemented as planned?⁷
- What were the barriers and enablers to successful implementation?
- Were FGCs carried out as planned and to Daybreak standards? Why or why not?
- Were any adaptations made to the FGC model that was planned, and if so, what, why, and where?
- What, if any, changes were made to care-as-usual?
- How much impact do staff and families think what they experienced during pre-proceedings (care-as-usual or care-as-usual plus referral for FGC) had on their outcomes?

⁷ For example, we will explore the nature of the FGCs; whether review meetings are held; which professionals are attending, and other features of the model as interpreted and implemented locally.

The process evaluation will include some analysis of feedback forms gathered from family members immediately after FGC meetings.

We have assessed baseline care-as-usual using written descriptions from circa June 2019 of current practice in the local authorities in the sample, taken from their programme applications. We will follow this up by asking about current practice (for the intervention and control groups) at a later date.

As both FGC and care-as-usual are relatively intensive periods of activity where practitioners intervene in family life, we will investigate whether local authorities take any action to de-intensify work with parents who receive FGCs, in order to allow time for FGC-related activity.

Interviews with families

We will approach a small number of families as part of the process evaluation. These families will be members of the control and intervention groups, to maximise the value of the process evaluation findings.

We will monitor diversity in the sex, age and ethnic group of the children and adult family members. We will seek to interview children aged 10-17.

We will discuss accessibility requirements for interviews with local authorities, who will act as our gatekeepers for access to families. For example, they may alert us to the need for information sheets and consent forms in alternative formats or translations, which we will arrange for.

We will carry out document review and case studies of four local authorities, drawing on a range of sources of information.

Cost evaluation

We will carry out a cost-benefit analysis as part of the main report on our findings. This will draw on information from several sources. Twelve months into the programme, we ask the main contacts in all 22 local authorities for costing data on their actual expenditure up to that point on FGC referrals and overheads under the *Supporting Families: Investing in Practice* programme, broken down into start-up and ongoing costs. Including start-up costs is conservative but will produce more useful evidence to commissioners to inform future decisions on whether to introduce FGCs at pre-proceedings stage. We will clean, check and combine the local authority data, querying outliers and ensuring definitions and inclusion criteria are broadly consistent, or make adjustments if not. We identify suitable public domain figures on the cost to a local authority of a year of delivering care to children with different legal statuses. We will adjust these figures for inflation as necessary. We identify a suitable estimate of the average time spent in different care statuses. As part of the final analysis, we use our analysis of the care statuses of children in the intervention and control groups at 12 months post pre-proceedings letter, to calculate the average additional cost avoided or incurred by a local authority of providing FGCs. We will report a range, based on assuming that the cost or benefit lasts for one year (minimum) to assuming the cost or benefit lasts for the whole of the rest of a childhood (maximum).

Funding

The DfE's *Supporting Families: Investing in Practice* programme is a £15.1 million programme, the FGC strand is one of three. DfE is funding local authorities, Daybreak, and WWCS, the evaluation commissioner. Coram will receive funding to conduct this trial from WWCS.

Local authorities may part-fund the FGCs from their own funds, but the cost-per-unit funded is consistent across local authorities. The (full or part) payments by DfE to local authorities will be made on a grant basis. This brings a risk that local authorities fail to ring-fence the funding for FGCs and/or for the evaluation, leading to absent or poor quality data due to under-staffing of administrative or data lead posts. In mitigation, the costings worked out between the DfE and Daybreak allow for data admin costs related to the evaluation.

Ethics & participation

Ethical approval process

Following a recommendation from Coram's Research Ethics and Governance Advisory Group, Coram trustees approved the evaluation plan on 22 January 2020.

The Research Ethics and Governance Advisory Group meets twice yearly and is chaired by a Coram trustee (Dr Judith Trowell) and contains at least one service user representative, external academic advisor, and staff and other independent members. The Group reports to Coram's Children's Services Committee, which is a sub-committee of the overall Board of Trustees. Its role is to advise the Group Head of Impact & Evaluation and help decide whether or not Coram should engage with specific research projects. The Coram project team (Coram's Impact and Evaluation Team) acts as the secretariat to the group but does not take part in its decision making regarding this project. We have gained additional external input from two independent external reviewers from the Institute of Education. Their comments were considered by Coram's Research Ethics and Governance Advisory Group and by members of Coram's Children's Services Committee as part of decision making.

In addition, we will comply with any ethical clearance processes required in individual local authorities as appropriate.

Key ethical considerations

The overall ethical challenge of this evaluation is balancing the potential benefits and detriments for an individual child, with the potential benefits and detriments to future children in general.

Other key ethical considerations are:

- that families taking part are going through a difficult time in their lives and likely to be vulnerable, and
- that families may feel pressure to take part in a FGC.

Ethics risks

We risk inflicting harm on children and families who receive FGCs, if they are harmful, or depriving children and families of benefits they would have received, if FGCs are beneficial. We are in a position of equipoise with respect to the existing evidence base, meaning we do not know whether

the FGCs that children will receive through the programme will be beneficial or harmful to them, or neither.

The risk of depriving families of a benefit

If FGCs are beneficial during pre-proceedings, children and families in the control group would be worse off than they otherwise be had we randomised them to the intervention group. They would not receive one or more of the benefits of FGCs that we have identified in the literature, or other unanticipated benefits, though the strength of evidence for these benefits is low. They include:

- FGCs may help **strengthen family ties and relationships** (Frost, N., Abram F., and Burgess, H, 2014)
- FGCs may be an enabling process that can provide the setting for individuals and groups to be empowered. Even if the plan is not carried through, it may have already improved individuals' and families **ability to communicate and problem-solve** (Frost, N., Abram F., and Burgess, H, 2014)
- FGCs may **help reduce the power imbalance** between statutory social work services and children and families. The process helps family members and professionals reframe unproductive attitudes towards each other (Mitchell, M., Tisdall K and Riddell, C, 2018).
- FGCs may **strengthen the relationship between families and social workers and social services** – research report by Munro *et al* (2017) showed that family members feel more supported by their social worker following an FGC and no longer felt that they 'were out to get them'.
- Through facilitated dialogue, consensus and cooperation, FGCs may **improve child protection decision-making** and outcomes for children and their families (Mitchell, M., Tisdall K and Riddell, C, 2018).

The risk of inflicting harm on families

If FGCs are harmful during pre-proceedings, children and families in the intervention group would be worse off than if we had randomised them to the control group, or not carried out the trial. They would experience one or more of the disadvantages of FGCs that we have identified in the literature, or other unanticipated harms, though the strength of evidence for these benefits is low. They include:

- **Disengagement and exclusion:** children and their families may feel disengaged and excluded, particularly if they feel that agendas and strategies to support them are driven forward solely by statutory agencies rather than together with family members (Mitchell, M., Tisdall K and Riddell, C, 2018).
- **Dominant agendas from social workers** is also mentioned in Ney, T., Stoltz, J., and Maloney, M (2011). In their study about families' experiences of FGCs, one participant thought the focus was on building a case about her wrongful parenting and did not focus on what they were doing right.
- **Power dynamics** between family members, with some family members being able to voice their opinions more than others and conflicts arising during meetings when children are present (Ney, T., Stoltz, J., and Maloney, M, 2011; Munro, E *et al*, 2017)
- **Conflict, tension and hostility:** In Munro *et al*'s (2017) study of FGCs, findings suggested that family conflicts and diffusion of tension could happen during meetings with children present. One

social worker interviewed explained they had been in vulnerable positions during FGCs and had to step in during family conflicts with family members verbally attacking them.

- **Confusion:** social workers highlighted that there was a need to clarify the relationship between FGCs and statutory social work processes. Families could become confused about the role and functions of different meetings (Munro, E et al., 2017).
- **Inappropriateness:** FGCs are not always appropriate for certain families. In some circumstances, family networks are small and/or relationships are too fractured for the process to yield the levels of support that would be required to protect and promote a child's welfare (Munro, E et al., 2017).
- **Worse outcomes:** in one study, FGCs increased the number and length of out-of-home placements for families with older children. FGCs also increased the number and length of out-of-home placements in minority groups (Dijkstra, S et al., 2019).

There is also a risk, for families in the control group who do not receive a FGC and whose court proceedings go ahead, that their proceedings are delayed by a judge requesting that the family undergo a FGC.

There is also a risk that families in the intervention group receive a poor quality service, due to FGCs being implemented with low fidelity by local authorities that are inexperienced in providing FGCs at pre-proceedings stage.

Ethical mitigations

We have designed a number of mitigations against these ethical risks, and take assurance from some of the features of the project and features of FGC.

Local authorities in the sample are currently not using FGCs at pre-proceeding stage

All the FGCs which will be funded through the *Supporting Families: Investing in Practice* programme will be additional FGCs that would not otherwise have happened, had the DfE funding not been granted to the local authorities. This mitigates the risk that families in the control group are deprived of a benefit.

Current practice in allocation of FGCs is non-random

We are not offering families an opportunity to consent to being randomised to either the intervention or control group. This reflects current practice for families in England at pre-proceedings stage. Presently families may or may not be offered an FGC, according to their local authority's practice, over which families have no direct say. Partly due to funding constraints, FGC provision is uneven across England. Our allocation system of randomisation – a lottery – is no worse than this, and may be a fairer basis on which to allocate the scarce resource that is an FGC.

Use of FGCs is widespread in England

The Family Rights Group reports that three quarters of local authorities are reported to run or commission family group conferences for children in their area or be planning to do so. This shows that FGCs are widely believed to be safe for families and acceptable to families.

Local authorities in the sample are volunteers

The local authorities have volunteered to take part in an evaluation, and so should be committed to ensuring that the provision of FGCs to intervention group families, and the care-as-usual for control group families, is carried out safely and ethically.

Our trial is of a model which has preliminary evidence of effectiveness

This trial follows up on the evaluation by Munro et al. (2017) of Daybreak FGCs at pre-proceedings stage in England, which found positive results, which maximises the chance that we benefit the intervention group while making no difference to the control group.

Option to request that one's data is not used for the evaluation

We will provide local authorities with an information sheet about the evaluation to include with the pre-proceedings letter. This describes how families can request that their data is not passed from their local authority to Coram for the purpose of this evaluation. Some families may be distrustful of our evaluation, as information about it comes in a local authority envelope, so we will instruct local authorities to not make any changes to our information sheet, such as replacing or removing the Coram logo.

Primary data collection from parents is light-touch and not sensitive

In Dijkstra et al. (2019) families each received €25 for participating in primary data collection, but this was more demanding than the one question we plan to ask parents. We consider that this light-touch data gathering will not take up enough of respondents' time to require a substantial financial reward or incentive, but we will offer entry into a monthly prize draw for responding. We consider that the nature of the question is not likely to cause distress or upset. We do not refer to families' circumstances or invite comment on these, which should safeguard the privacy of respondents.

Choice of pre-proceedings stage

Choosing to investigate the impact of FGCs at pre-proceedings stage allows for the safeguard of allowing families to seek advice from a legal aid solicitor. Details of how to contact a solicitor are included in the letters. Families will be able, if they wish, to discuss their participation in the evaluation with their solicitor. Families in the intervention group will be able, if they wish, to discuss their participation in an FGC with their solicitor.

Good enough care-as-usual

We will encourage local authorities not to make any changes to their care-as-usual provision for families in both the intervention and the control group during the pre-proceedings stage and afterwards. As local authorities are funded for the FGCs in this project, they will not need to redeploy staff from care-as-usual in order to provide FGCs, and so the quantity and quantity of care-as-usual should not decline in the control group relative to the pre-trial situation.

FGCs are voluntary

Participation in FGC is voluntary, but Daybreak training for local authorities will encourage FGC coordinators to explain to families that courts look unfavourably upon non-participation in FGCs, as evidence of a family's commitment to keeping children at home. As such, families may feel some

pressure to take part. We will assure ourselves that Daybreak written material for families (templates provided by Daybreak to local authorities) states that participation is voluntary.

Intention to treat design

We will ask local authorities to protect the integrity of the evaluation, to produce the best evidence for future decision making. This means not offering a FGC referral to any families in the control group. However, we will advise local authorities to obey the law and abide by court judgements. If, due to a request from a court or for other reasons, a family in the control group somehow receives an FGC, we will track data on their outcomes as for any other member of the control group.

Offer FGC to control group members at the end of the evaluation

At the end of fieldwork, we will provide all local authorities in the sample with a list of the families in their area in the control group. This will be based on the final, checked and cleaned child outcomes data collection template. For many of these families, a FGC may no longer be suitable, but we will suggest to local authorities that, as their final contribution to the evaluation, their social workers should consider whether or not to now offer a FGC to these families.

Time has been allowed for implementation of the new model

The names of the local authorities taking part in the programme were announced in August 2019, and referrals will begin in April 2020. This allows time to prepare for implementation and reduces the chance that families in the intervention group receive a poor quality service.

Following good practice in research and evaluation

Coram research and evaluation projects adhere to widely accepted frameworks for conducting work ethically to minimise the risk of harm to participants or wider society. These are the frameworks published by:

- the [Economic and Social Research Council](#); and
- the [Social Research Association](#).

Unanticipated risks and harms

We will gather information through the process evaluation strand and through project steering group meetings about any emerging risks and harms. If evidence emerges of serious and substantial harms being caused to families in either the control or intervention group, we will consult Coram's ethical approval board and consider ending the trial early.

Any safeguarding issues that arise (for example, during process evaluation fieldwork) will be escalated in accordance with Coram's safeguarding policy.

If abuse is suspected or disclosed in the course of delivery, Daybreak materials state that FGC coordinators should inform their manager and follow their organisations' safeguarding policies.

Compliance with Coram complaints procedure

If a family member wishes to raise a complaint with Coram, we will direct them to Coram's complaints policy and procedure: www.coram.org.uk/complaints-policy-and-procedure

Procedures are in place to reduce the risk that FGC meetings cause upset or distress

Daybreak materials for local authorities state that FGC coordinators are required to create a safety plan in advance of the FGC meeting. This aims to ensure the meeting takes place in a safe and secure setting, and also mitigate against possible situations which may cause upset or distress to family members. FGC coordinators should consult with professionals working with the family and project manager when planning this.

Conflicts of interest

The principal investigator is not aware of any conflicts of interest, actual or perceived, that could have a bearing on her impartiality. If any changes occur she will make these known to the chair of Coram's ethical advisory group. She will seek statements on conflicts of interest from all Coram staff who work on the evaluation, including an undertaking that, if the situation changes or they become aware of any actual or perceived conflict, they will inform the principal investigator immediately.

Reporting

This protocol, including the process evaluation plan which will be appended to this document, will be published on the website of WWCSC and the Coram website, and registered with the Open Science Framework.

We will write up the overall results and seek to publish them in a peer-reviewed academic journal. In this, we will acknowledge the advice we have received from Professor Richard Dorsett and the reference group and the advisory group. Alongside this, working with WWCSC we will produce a number of other reports and outputs, such as conference presentations, ordinary language summaries, and sub-group analysis.

In our information sheet, we will offer to share our findings, once these are available, with family members who get in touch to request this. We will also publish our findings on the Coram website. We will send a link to the Association of Directors of Children's Services (ADCS) Research Group.

We will offer to send family members and professionals who take part in the process evaluation a weblink, by email, of the results of the evaluation as a whole, once these become available.

Participant confidentiality and privacy

The study will comply with the General Data Protection Regulation (GDPR) and Data Protection Act 2018. The chances of individuals being identified due to our processing of the data relating to participants will be minimised by making use of a unique participant study number only on all study documents and any electronic database(s). We will maintain confidentiality and privacy in setting up interviews by keeping references to the evaluation generic (for example, avoiding references to the care system or children's services). All documents will be stored securely and only accessible by Coram staff. These staff will safeguard the privacy of participants' personal data.

Registration

In line with WWCSA requirements we will register this trial with the OSF (Open Science Framework) and update this trial registry with outcomes at the end of the project.

Data protection

Adherence to legislation and policy

All data collection will adhere to ethical practice ensuring the confidentiality of information shared and the secure handling of data in accordance with the GDPR and Coram's Data Security Policy. Local authorities are the data controller, and Coram is the data processor, for this evaluation. The legal basis for processing the information on trial participants will be public task; that is, the processing is necessary for us to perform research in the public interest, and the task has a clear basis in law. Local authorities need to fulfil their duties in the Children Act to provide families with the information and support necessary to enable participation in decisions, and to do this, they need evidence on effectiveness. We include a plain English explanation of this legal basis in the 'More information' sheet for adult family members. We plan to collect information on the ethnic group of children, which as special category data requires an additional purpose, which is 'archiving, research and statistics' under the Data Protection Act 1998 (Article 9(j)). HM Treasury guidance (HM Treasury, 2011), requires evaluation to be carried out of the uses to which public money is put.

We will carry out the evaluation in line with Coram's privacy policy for research and evaluation, which was last updated in September 2019.

Requesting that one's data is not used for the evaluation

As in Hollinshead et al. (2017), families will be able to request that their data is not used for the evaluation. This possibility will remain until the first day of month 22. This is the date on or shortly after which we will be sending local authorities the final data collection request. Due to the trial design, with randomisation at family level, any family member's request will mean that we do not analyse data on the whole family.

We will not ask family members why they make such requests, but we will report on the reasons cited by any family members who proactively inform us of their reasons, to inform future research.

We will not analyse data on those who make these requests, to determine how their characteristics compare to others.

The only situation in which participants will not be able to withdraw their data will be where their data has already been integrated into interim results. But their data will be omitted from the final analysis.

Participants who withdraw their data will not be replaced; no action will be taken to increase the sample size to make up for the loss of participants.

Data recording and record keeping

Data will be stored only on Coram's internal network which is fully protected by appropriate firewalls and a dedicated IT support team. The data will only be accessed by the Impact & Evaluation team.

We will not sell or rent the data to third parties, or use it for marketing purposes or any other purpose.

Data collected for the purposes of this evaluation will be retained for up to 12 months after the end of the project, defined as the date of publication of the main results. All files containing personal and confidential information will be deleted, but a version of the final analytical dataset will be deposited in an academic data archive.

Data protection impact assessment

We have completed a data protection impact assessment, which is available on request. We will keep this under review, and may repeat it if there is a substantial change to the nature, scope, context or purposes of our data processing.

Source data

Each local authority will have slightly different systems and data storage arrangements. FGCs are not a requirement and do not form part of annual statutory returns to central government ('SSDA903' returns, or the 'Children looked after data return'). As such, overall record keeping systems may not hold information on FGCs, and bespoke add-ons, separate systems or ad-hoc spreadsheets may be in use. This may increase the administrative burden on local authorities in providing us with data, as our template will request both data held in overall systems (such as a child's legal status) and FGC information (such as whether an FGC took place) for each child. This may require local authorities to carry out matching by unique identifier, which may introduce errors.

We anticipate that some of the data may be compiled for us by an administrator or business support officer in the FGC team. This brings the risk that data on the control group, who do not receive a FGC, is of lesser quality than data on the intervention group. We will carry out analysis of missing data, include a free-text data quality field, and use process evaluation interviews to investigate this possibility.

We will consult at least two local authorities before finalising the child outcomes data collection template, to understand more about the data and minimise the burden.

There is a risk that local authorities provide inaccurate data due to their focus on annual returns (903 returns) which cover financial years. As our collection will be twice annually, data may not have been subject to some of the usual checks.

Access to data

Coram will agree and sign memorandums of understanding, including details of data sharing arrangements, with each of the 22 local authorities. The person signing on behalf of the local authority will be of at least assistant director grade, or more senior. Signing on behalf of Coram will be the Deputy Chief Executive.

Once these memorandums are in place, access to data by Coram will be through a designated data lead contact person, suggested by the local authority. Requests will be made by email and data will be uploaded to a secure Sharepoint site, for secure data transfer.

Personnel

Delivery team:

Daybreak:

| Name | Role | Responsibilities |
|------------------|---|---|
| Richard Chalmers | Chief Executive | Supervise the delivery team and keep oversight of Daybreak delivery. Assist training local authority staff; audit; remaining in touch with local authorities |
| Tah Tabod | Project Manager | First point of contact for all <i>Supporting Families: Investing in Practice</i> programme business. Oversee the smooth running of the <i>Supporting Families: Investing In Practice</i> FGC delivery Development, implementation and monitoring of delivery and monitoring Regular contact with all local authority FGC teams and data collectors Providing materials to local authorities Arrange audit of the process |
| Hannah Gohrisch | FGC Facilitator | Provide training and support to local authority FGC teams Monitor FGC data to ensure that local authorities are on track and following the agreed methodology. Develop and oversee local learning events |
| Anna Coad | Office Manager | Supervise/provide admin support. Arrange and book visits/ travel |
| Trainers | One day <i>Supporting Families: Investing In Practice</i> training delivery | Deliver one-day training to local authorities in early 2020 |

Local authorities:

| Organisation | Name of data lead (Feb 2020) | Name of senior manager / social work lead (Feb 2020) |
|------------------------------|--|--|
| Bath and North East Somerset | Leigh Zywek, Mary Keaney-Knowles | Leigh Zywek, Mary Keaney-Knowles |
| Birmingham | Andy Couldrick | Andy Couldrick |
| Lancashire | Annette McNeil, Annie Blaney-Green, Dave Carr | Annette McNeil, Annie Blaney-Green, Dave Carr |
| Bromley | Wendy Pullen | Wendy Pullen |
| Derbyshire | Mary Lees, Karen Gurne, Linda Dale, Isobel Fleming | Mary Lees, Karen Gurne, Linda Dale, Isobel Fleming |
| Knowsley | John Johnson | Tracey Overs |

| | | |
|--------------------------------------|--|--|
| Lambeth | Sheleena Powtoo | Sheleena Powtoo |
| Leicestershire | Nadine Good, Jane Richardson, Tracey Sharpe, Zoe Bretherton, Mala Razak, Liz Perfect | Nadine Good, Jane Richardson, Tracey Sharpe, Zoe Bretherton, Mala Razak, Liz Perfect |
| Lewisham | Lucie Hayes, Harriet Jannetta | Lucie Hayes, Harriet Jannetta |
| Middlesbrough and Redcar + Cleveland | Diane Sewell-Blythe, Sue Butcher Catherine Prest | Diane Sewell-Blythe, Sue Butcher Catherine Prest |
| North East Lincolnshire | Deborah Burres, Donna Burns, Matthew Clayton | Deborah Burres, Donna Burns, Matthew Clayton |
| Northamptonshire | Paul Shanley | Paul Shanley |
| Nottingham City | Carole Rooth | Tajinder Madahar |
| Plymouth | Martine Aquilina, Matthew Fulton, Annette Moss, Tracy Green | Martine Aquilina, Matthew Fulton, Annette Moss, Tracy Green |
| Rotherham | Susan Claydon, Liz Smith | Susan Claydon, Liz Smith |
| Salford | Carolyn Hamer | Stephen Canning |
| Sheffield | Helen Sweatton, Karen Harrison, Carly Speechley, Simon Jones, Matthew Oates | Helen Sweatton, Karen Harrison, Carly Speechley, Simon Jones, Matthew Oates |
| Shropshire | John Foster | Sasha Bellis |
| Southampton | Lesley Weekes, Katrina Ploumaris, Russell Turner | Lesley Weekes, Katrina Ploumaris, Russell Turner |
| Staffordshire | Mandy Thomas, Katherine Pardy-McLaughlin | Mandy Thomas, Katherine Pardy-McLaughlin |
| Sunderland | Keeley Brickle | Karen Davison |

Responsibilities of data lead: gathering, checking and providing data to Coram; flagging any data quality concerns or queries

Responsibilities of senior manager / social work lead: ensuring compliance with protocol among social workers and other professionals

Evaluation project team:

Coram:

| Name | Role | Responsibilities |
|-----------------------|-------------------------------------|---|
| Dr Sarah Taylor | Group Head of Impact and Evaluation | Principal investigator |
| Renuka Jeyarajah-Dent | Deputy Chief Executive | The Impact & Evaluation team and Coram governance procedures are in the portfolio of Renuka Jeyarajah-Dent. |

| | | |
|-------------------|--|--|
| Olivia Micheltore | Senior Research and Evaluation Officer, Impact & Evaluation Team | Lead on data collection and analysis |
| Emma Borjes | Research Assistant, Impact & Evaluation Team | Monitor data collection, arrange interviews and escalate if obstacles emerge |
| Kevin Yong | Managing Director, Coram-i | Advice on data collection |
| Claire Harding | Acting Head of Coram Family and Childcare | Advice on methodology |

Timeline

| Dates | Activity | Staff responsible/leading |
|--|--|---------------------------|
| September 2019 to March 2020 | Preparation and planning, including communications with local authorities. | Coram |
| Month 1 | FGCs will begin in each local authority from April 2020, once Daybreak has trained local authority staff in the use of FGCs to Daybreak standards and at pre-proceedings stage, and provided materials to local authorities. | Daybreak |
| Throughout | Stay in touch with the aim of ensuring consistency and high standards of professionalism in local authorities' provision of FGCs. | Daybreak |
| On/around first day of month 7 | Coram's first data collection request to local authorities, covering the six months from month 1 to month 6 | Coram |
| From month 9 | Interim quantitative analysis | Coram |
| On/around first day of month 13 | Coram's second data collection request to local authorities, covering the six months from month 7 to month 12 | Coram |
| End of month 14 | Final referrals for FGCs will take place | Daybreak |
| On/around first day of month 22 | Coram's third and final data collection request to local authorities, covering the nine months from month 13 to 21 | Coram |
| Months 23 to 24 | Analysis and report writing | Coram |
| Month 24 onwards | Publication and dissemination | Coram and WWCS |

Annexes

Annex 1: Local authorities in the sample

As the sample is made up of volunteers, it cannot be considered representative of local authorities in England (it will lack external validity). However, Daybreak and WWCSC selected 24 from the 40 applicants with a view to maximising representativeness. During the planning phase, Merton and Blackpool dropped out of the programme, leaving 22.

We carried out analysis of publically available data, to assess the extent to which the original sample was typical or unusual of English local authorities.

Our analysis finds that the local authorities covered around 18% of all children in England; and 20% of looked-after children (2017-18 data).

Care Order applications per 10,000 population in 2017-18 were somewhat higher (at 16.6) in the sample local authorities than the overall average. The overall local authority average for England was 12.2.

The average number of referrals was 5,243 in 2017-18 for the original 24 local authorities in the sample, which compares to 4,139 for the other 128 local authorities in England.

The local authorities contained a good mix of regions (covering all regions except the east of England) and of types, and cover a wide range of sizes. When considering size in terms of the number of children who became looked-after in the year to March 2018 (most of whom will have gone through pre-proceedings), the smallest was Bath and North East Somerset at 70, and the largest is Lancashire at 764.

When considering size in terms of the number of children living in the area in mid 2018 (the maximum number at risk of entering pre-proceedings), the smallest was Redcar and Cleveland at around 28,000, and the largest is Birmingham at around 290,000.

The average placement stability, measured by the Children's Commissioner as the percent of looked-after children with no changes in placement over 24 months, as of 2017-18, was 53% for all local authorities, and also 53% for those in the original sample.

The average proportion of children living in income-deprived households was higher among the 24 original sample LAs than all English LAs (21% compared to 18%). This is based on average scores published in the indices of deprivation.⁸ In the sample, Middlesbrough, Blackpool and Knowsley have the highest proportions of children living in income deprived households (33%, 31%, and 30% respectively).

Representativeness is likely to fall if more local authorities drop out or experience delays in implementing FGCs.

⁸ Specifically, the Income Deprivation Affecting Children Index.
Ministry of Housing and Local Government (2019) The English Indices of Deprivation 2019. Available at: www.gov.uk/government/statistics/english-indices-of-deprivation-2019 [accessed 23 October 2019]

Local authorities in the sample

| Local authority | Region | Type | Mid-year population estimate, under 18s, 2018 (ONS) | Ofsted | Number of children who became looked after, 2018 | Current practice (~June 2019, from programme application form) | Placement stability (Children's Commissioner 2017-18) (LAC with 0 changes over 24m) |
|------------------------------|----------------|-----------------------|---|-----------------------------|--|--|---|
| Bath and North East Somerset | South West | Unitary | 35,946 | Good (2017) | 70 | Sporadic | 48% |
| Birmingham | West Mids | Metropolitan district | 288,388 | Requires improvement (2019) | 750 | Embedded | 52% |
| Bromley | Outer London | London borough | 75,055 | Good (2019) | 161 | Sporadic | 46% |
| Derbyshire | East Mids | County | 153,272 | Good (2014) | 338 | No FGCs | 62% |
| Knowsley | North West | Metropolitan district | 33,477 | Requires improvement (2017) | 85 | No FGCs | 49% |
| Lancashire | North West | County | 249,727 | Requires improvement (2018) | 764 | Sporadic | 54% |
| Lambeth | Inner London | London borough | 62,629 | Requires improvement (2018) | 198 | Sporadic | 58% |
| Leicestershire | East Mids | County | 140,307 | Requires improvement (2017) | 218 | No FGCs | 52% |
| Lewisham | Inner London | London borough | 68,458 | Requires improvement (2019) | 239 | No FGCs | 59% |
| Middlesbrough | North East | Unitary | 32,513 | Requires improvement (2016) | 162 | New | 58% |
| North East Lincolnshire | Yorks & Humber | Unitary | 34,503 | Good (2017) | 160 | Embedded | 53% |
| Northamptonshire | East Mids | County | 170,235 | Inadequate (2019) | 494 | No FGCs | 50% |
| Nottingham City | East Mids | Unitary | 68,651 | Requires improvement (2019) | 212 | No FGCs | 58% |
| Plymouth | South West | Unitary | 52,552 | Requires improvement (2019) | 213 | Embedded | 47% |
| Redcar and Cleveland | North East | Unitary | 27,626 | Requires improvement (2017) | 123 | New | 49% |
| Rotherham | Yorks & Humber | Metropolitan district | 57,196 | Good (2018) | 321 | New | 45% |
| Salford | North West | Metropolitan district | 56,566 | Good (2018) | 214 | Embedded | 56% |
| Sheffield | Yorks & Humber | Metropolitan district | 117,497 | Good (2019) | 289 | Embedded | 53% |
| Shropshire | West Mids | Unitary | 59,839 | Good (2017) | 135 | Embedded | 59% |

| | | | | | | | |
|---------------|------------|-----------------------|------------------|-----------------------------|--------------|----------|------------|
| Southampton | South East | Unitary | 50,832 | Requires improvement (2014) | 178 | Embedded | 54% |
| Staffordshire | West Mids | County | 169,603 | Good (2019) | 433 | Embedded | 57% |
| Sunderland | North East | Metropolitan district | 54,563 | Inadequate (2018) | 357 | Embedded | 51% |
| Total | | | 2,135,605 | | 6,410 | | 53% |

Key to 'current practice' in around June 2019:

- 'Sporadic': FGCs sporadic/uneven/not routinely offered (4 local authorities)
- 'New': FGC service is newly established (3 local authorities)
- 'Embedded': FGC service is well-established (but not at pre-proceedings stage) (9)
- 'No FGCs': No FGC service is offered at all (6 local authorities)
 - Of which, no details are provided on what families receive instead:
 - Derbyshire and Lewisham
 - Of which, Family Network Meetings are offered in place of FGCs:
 - Knowsley, Leicestershire, Northamptonshire, and Nottingham



Map of locations of local authorities in the sample



Ofsted ratings, local authorities in the sample and other local authorities in England

| Ofsted ratings as of 28/08/2018 | Outstanding | Good | Requires improvement | Inadequate | Total |
|--|-----------------|-----------------|----------------------|-------------------|-------------------|
| 22 local authorities in the sample | 0 (0%) | 9 (41%) | 11 (50%) | 2 (9%) | 22 (100%) |
| The other 130 local authorities in England | 3 (2%) | 47 (36%) | 63 (49%) | 17 (13%) | 130 (100%) |
| Total | 3 (2.0%) | 56 (37%) | 74 (48%) | 19 (12.5%) | 152 (100%) |
| | | | | | |

Annex 2: Data fields we will request from local authorities

We will send the template – initially blank – to local authorities on or shortly after the first working day of each new six month period.

The template will be accompanied by explanatory notes and contact details for Coram's data lead on the evaluation. We will provide an explanation alongside each field of why we are asking for the data.

Table: child outcomes data fields we will request from local authorities

| Data item requested | Comments | Possible responses |
|--|--|---|
| ID number for family | <p>Local authorities may need to create this for the purposes of the evaluation, but we will suggest they can pick an existing child ID in their system, such as the ID of the eldest child in the family. Unique IDs will be needed to track which families are allocated to the intervention group and which to the control group. Each child within a family should be assigned the same family ID.</p> <p>It is possible that two or more local authorities may provide the same ID number for two or more different families, which could introduce error in combining different records into one overall table for analysis. As such we will add a local authority identifier prefix into each family ID when we receive the data.</p> | Pre-populated by Coram |
| ID number for child | To enable checks for duplicates, and matching between time periods. Should be unique for each child including in cases of multiple births. The pre-proceedings letter need not have been sent regarding the child, for example, in the case of babies who were not conceived at the time. Local authorities should add rows as needed so that one row=one child. | The ID must be unique for that child. Only use alphabetic and numeric characters. |
| [Randomisation outcome: intervention or control] | [We will provide this to local authorities] | Pre-populated by Coram |
| Date on letter before proceedings | | DD/MM/YYYY |

| Data item requested | Comments | Possible responses |
|--|---|---|
| Mover flag (whether child has moved address to outside the local authority since [date]) | <p>We will update '[date]' in each return to show the last date of the previous data collection. For example, for a return covering 1 April-30 September, this would be '30 March'.</p> <p>This will also allow local authorities to indicate families with whom they have lost touch since the last round of data collection, or who have moved abroad or to another UK local authority.</p> <p>We will make no attempt to trace movers or follow them to their new local authority.</p> | <p>1: Mover: child is known to have moved to outside the local authority since [date].</p> <p>0: Non-mover: child has not moved to outside the local authority since [date].</p> <p>-1: Lost contact: local authority has lost contact with family since [date] and does not know their whereabouts</p> |
| Date of birth of child | For use in calculating age and matching datasets together | DD/MM/YYYY |
| Gender of child | So we can find out whether the impact of FGCs differs between girls and boys. | <p>0: Not known (gender not recorded or unknown for unborn children)</p> <p>1: Male</p> <p>2: Female</p> <p>9: Neither (indeterminate i.e. unable to be classed as either male or female)</p> |
| Ethnic group of child | <p>Ethnic group should be recorded using one of the DfE main categories listed.</p> <p>The information is required so we can find out whether the impact of FGCs differs between different ethnic groups.</p> <p>This is especially important as previous research has suggested that ethnicity may have a bearing on care-proceeding outcomes.</p> | <p>WBRI: White British</p> <p>WIRI: White Irish</p> <p>WOTH: Any other White background</p> <p>WIRT: Traveller of Irish Heritage</p> <p>WROM: Gypsy/Roma</p> <p>MWBC: White and Black Caribbean</p> <p>MWBA: White and Black African</p> <p>MWAS: White and Asian</p> <p>MOTH: Any other Mixed background</p> <p>AIND: Indian</p> <p>APKN: Pakistani</p> <p>ABAN: Bangladeshi</p> <p>AOTH: Any other Asian background</p> |

| Data item requested | Comments | Possible responses |
|---|--|---|
| | | BCRB: Caribbean BAFR: African BOTH: Any other Black background OOTH: Any other ethnic group REFU: Refused NOBT: Information not yet obtained |
| Have the child's mother or father ever had a child taken into care? | As of the date on the pre-proceedings letter, and to the best of the local authority's knowledge. Please report 'yes' if at least one of the mother or father have had a child taken into care. | 0: Not known/recorded 1: Yes 2: No |
| Postcode | Based on address to which the pre-proceedings letter was sent. To allow analysis of local deprivation. If the children live at different addresses or pre-proceedings letters were sent to more than one address, please provide the postcode district of the address at which each child spends the majority of their time. Postcodes can differ for different children in the same family. | e.g. 'SW1P 1AA', 'M3 5AP', 'HP15 7AZ' |
| Date of FGC meeting if applicable | We will request every six months, as an FGC may take place after a delay in either of the two groups We will advise local authorities to supply the date of the first FGC meeting, if more than one occurs. We need this information in order to establish a temporal sequence such that FGCs happen first and cause a change in the outcome variable(s). | DD/MM/YYYY 0 Not yet happened -1 Not applicable ('do not refer' group) |
| Why did a FGC meeting happen ('do not refer' group) or not happen ('refer for FGC' group) | We expect that the most common reasons will be family refusal (intervention group) and court or family request (control group). We will analyse the first set of answers and provide set answer categories | Free text field – a short explanation of around 100 words or less. |

| Data item requested | Comments | Possible responses |
|---|---|--|
| | (plus 'other') at subsequent data collection points. | |
| Whether the FGC was externally commissioned or in-house | | -1: Not applicable (no FGC) 0: Not known/recorded 1: Commissioned externally 2: Internal |
| If applicable: number of FGC attendees from family network | | Free text field |
| Of whom, number attending by phone or video conference | | Free text field |
| Status of the FGC coordinator (employee of the local authority; self-employed; zero hours contract with local authority; worker for independent provider of FGCs; paid via an agency per case; other) | | Not applicable (no FGC) Employee of the local authority Self-employed Zero hours contract with local authority Worker for independent provider of FGCs Paid via an agency per case Other Not known/recorded |
| Whether the FGC coordinator was trained to standards set by Daybreak | | -1: Not applicable (no FGC) 0: Not known/recorded 1: Yes 2: No |
| Stage of court proceedings | To establish whether FGCs affect the likelihood of court proceedings going ahead. | CP1: Care proceedings have been issued CP2: Care proceedings were not issued and the PLO is stepped down CP3: Care proceedings have yet to be issued |
| Date court proceedings issued, or indicator that this has not (yet) occurred | To enable analysis of whether FGCs affect the likelihood of court proceedings going ahead | DD/MM/YYYY -1 Not applicable |
| Date of letter informing families that local authority will not pursue | | DD/MM/YYYY -1 Not applicable |

| Data item requested | Comments | Possible responses |
|--|--|---|
| court proceeding, or N/A | | |
| Date of court ruling or date of section 20 agreement if applicable | To enable us to calculate the length of time spent in court proceedings, so that we can take this into account in analysing outcome measures for these children | DD/MM/YYYY -1 Not applicable |
| Nature of court ruling (or section 20) | To enable us to establish whether FGCs make particular court rulings more likely. We will ask local authorities to report all orders; we will aggregate the data. | Not applicable (no court ruling) Section 20 Adoption Order Care Order Interim Care Order Child Arrangements Order Interim Child Arrangements Order Placement Order Special Guardianship Order Supervision Order Other order (not listed) Order not granted |
| Nature of court ruling (or section 20) | This question is repeated to allow local authorities to report on situations where courts grant more than one order at the same time. | Not applicable (no court ruling) Section 20 Adoption Order Care Order Interim Care Order Child Arrangements Order Interim Child Arrangements Order Placement Order Special Guardianship Order Supervision Order Other order (not listed) Order not granted |
| Start date of living arrangement | Each of these require detailed information on the status of children on particular dates. We will request the precise dates from local authorities. | DD/MM/YYYY |
| Nature of living arrangement | | Parent(s) including adoptive parent(s) |

| Data item requested | Comments | Possible responses |
|--|--|--|
| | It is possible we may be given less granular data, such as the first of the month in which a move took place, or a snapshot of a child's status on the data on which an extract from a system is taken. If this is the case, we will clean the data and generate random dates for status changes within the boundaries of the earliest and latest possible dates for a particular change for a particular child. We will report on the nature and extent of any such working. We will assign random dates, rather than picking a particular date such as the mid-point of the month, because this will more accurately reflect the way that children's statuses change over time (differently, not uniformly). | Relative(s) Family friend(s) Independent or semi-independent living Foster carer(s) (unrelated, and not a family friend) Children's home Prospective adopter(s) |
| End date of living arrangement | | DD/MM/YYYY -1 Unknown |
| Start date of legal status (child in need, child protection plan, looked-after child, none of these) | | DD/MM/YYYY |
| Legal status | | Child in need Child protection plan Looked after child None of these Not applicable |
| End date of legal status | | DD/MM/YYYY -1 Unknown |
| Comments on data quality (optional) | Option to comment on any issues affecting the quality of the data (e.g. IT problems affecting completeness, accuracy, timeliness). | Free text field |

We will ask local authorities to provide data at child level (one row per child).

In the case of children who experience more than one change, in a six month period, of being looked after or not looked after, or living arrangement, our explanatory notes will advise local authorities to provide dates for all of these periods of time, adding columns to the right-hand side of the spreadsheet as needed.

We will add periods of data together to combine static statuses into summary variables. For example, if a child lived continuously at home for a year, the start and end dates of this living arrangement would be the start and end dates of each data return, allowing us to add two six month periods together into 365 days.

With each data collection, the number of columns will grow, as the cells shaded in grey will be repeated. By the fourth and final data collection point we therefore expect to have over 50 variables available on each child.

To this we will add a variable for each child, taken from our data on parents' responses to our 'perceived inclusiveness' text messages (the mean score of the two responses, in the case of two-parent families where both parents respond).

Variables we will create

In addition to these we will create some variables at Coram. One of these will be the month in which the family's local authority started making FGC referrals. We will have this information due to the randomisation process. From this we will calculate the month into implementation of FGCs in which a particular family's FGC takes place (from 1 to 14). This will allow us to take account of what difference, if any, this makes to outcomes, by including the variable in our multiple regression, if it predicts outcomes.

Creating these variables will allow our analysis to investigate the time taken for the model of intervention to become mature. On the one hand, we would expect the effect of FGCs to be attenuated for families whose FGCs fall early in the fieldwork period, relative to those whose FGCs occur later, as systems and processes take time to embed. On the other hand, the Daybreak training will be fresher in the minds of local authority staff for families whose FGCs fall early in the fieldwork period.

We will condense family ID and child ID variables to produce a variable indicating the number of children in the family. This will minimise the data reporting requirements for local authorities, but under-estimate the number of siblings, as some may be aged 18 or over.

We will also create variables to reflect characteristics of local authorities which we expect to have an influence on the primary and secondary outcomes. These will include type (metropolitan district, London borough, county, or unitary), Ofsted rating (outstanding, good, requires improvement, or inadequate) and level of FGC implementation. This will be based on the information provided by local authorities in application forms, but may be revised as work with local authorities proceeds and more information becomes available to us.

Annex 3: Information sheet for those with parental responsibility



Evaluation by children's charity Coram

Information for adult family members

We are writing to all families who have received a pre-proceedings letter from their local council. We are Coram, a children's charity, and we are running an evaluation project to look at the different ways councils work with families and how this affects the chances that children live with family or friends, or go into care. We also want to know how often children might move between different family members, foster carers or children's homes.

We aim that this project will help to improve public services in future for all children and families. We have been funded to carry out this work by What Works for Children's Social Care. We would like to look at data from over 1,000 families in your position across England, to find out what happens to children over the months after you receive a 'pre-proceedings' letter like the one you have received.

This project has received ethical approval from Coram's research ethics committee and from your council. This means they believe no harm will be done to families whose information will be included, and that the findings will be useful to families and local authorities in the future.

If you are happy to be included in the project, you do not need to do anything. If we do not hear from you, we will send you a text message in two months' time, asking for your views. We will also ask your council for data on your child or children from now on until December 2021. This will let us see the short-term and long-term outcomes of different ways of working with families.

As part of the evaluation we will write reports on our findings. Information collected about your family will be **confidential and anonymous**: we will not use anyone's name or anything about your family that could identify you to other people. All information collected will be stored securely, and may be used for other research projects in future.

If you do not want us to collect, analyse and securely store your family's data for the project, please get in touch with us to let us know by the end of 2021. This will make no difference to the service you receive from your council.

If you would like more information about the evaluation you can email

research@coram.org.uk, phone 0207 520 8181 or write to Impact & Evaluation Team, Coram, 41 Brunswick Square, London WC1N 1AZ. Please include your mobile number and the name of your council. You can also get in touch if you would like to be added to a list to receive a copy of our findings, when they are published.

Thank you,

Sarah Taylor
Head of Evaluation
Coram

Evaluation by children's charity Coram

More information for adult family members

Thank you for your interest in our evaluation.

We are running an evaluation project to find out what happens to families after they have been sent a letter by their local council. The letter states that the council will seek to take your child or children into care, by seeking a Care Order from a court, if you or others do not take specific actions.

About this document

You should have received an information sheet from your council telling you about the evaluation. This document goes into more detail on the evaluation. You can share and discuss it with other people like your solicitor.

Purpose of the evaluation

We want to know if the way your council works with you and your family affects the chances that your children live with family or friends, or go into care, in the months and years after the letter. We also want to know if their living arrangements change and how often, such as how often they might move between different family members, or go to live with foster carers or in a children's home.

We will look at data from over 1,000 families in your position across England, to find out what happens to children over the months after you receive a 'pre-proceedings' letter like the one you have received. We aim that this project will help improve public services in future for all children and families, by providing more evidence to better inform decision making.

Evaluating different ways of working with families

At the point when your council decided to write to you with the letter you received, you were randomly placed into one of two groups of families. Half of families are in one group, and the other half in the other group. Your council will work with the two groups of families in different ways. We are interested in the difference made by the ways of working, if any, to the chances that your children live with family or friends, or go into care. One group are offered a 'family group conference' and the other group are not, but will still receive other support from the council. So you should know which group of families you are in.

We do not know if family group conferences are helpful or not, so we are working with councils to test them. We will follow up with councils to find out what happens afterwards to children whose families take part in family group conferences, and those who do not. This type of evaluation is known as a randomised controlled trial.

What you need to do

There is no need for you to do anything in order to be included in the project. If we do not hear from you, we will ask your council for data on your child or children until December 2021. This will let us see the short-term and long-term outcomes of different ways of working with families. The data will not include your name or full address. We do not need these details because we want to find out about what happens to children in general, not your family specifically. Information collected about your family will be confidential and stored securely in an archive which other future researchers may analyse. When we write about what we find, we will not use anyone's name or anything that would tell people who you or your family are.

We want to collect this data for research purposes, and because councils have a duty to give families the information needed to enable them to take part in decisions, and to do this, they need evidence like this. If you do not want us to collect and analyse your family's data for the project, you can email research@coram.org.uk, phone 0207 520 8181 (you can leave a message outside working hours) or write to Impact & Evaluation Team, Coram, 41 Brunswick Square, London WC1N 1AZ. If you do this by the end of 2021, your data will not be included in any later analysis or reports. If you opt out of us collecting and analysing your family's data, it will make no difference to the service you receive from your council.

As well as this data collection, we will ask a small number of families if they are happy to speak to us in person or on the phone. We want to hear what families think about how their council works with them. We will explain more to these families when we contact them.

Ethical approval

This project has received ethical approval from Coram's research ethics committee and from your council. This means they believe what we are suggesting will not be harmful to you, and that the findings will be useful to other families and local authorities in the future.

Background to the evaluation and evaluators

We are Coram, a children's charity. The Impact and Evaluation team in Coram have been funded to carry out this work by What Works for Children's Social Care, as part of the Department for Education programme, *Supporting Families: Investing in Practice*. Councils applied to take part in the programme. We are working with your council to carry out the evaluation.

The councils taking part are: Bath and North East Somerset, Birmingham, Bromley, Derbyshire, Knowsley, Lancashire, Lambeth, Leicestershire, Lewisham, Middlesbrough, North East Lincolnshire, Northamptonshire, Nottingham City, Plymouth, Redcar and Cleveland, Rotherham, Salford, Sheffield, Shropshire, Southampton, Staffordshire, and Sunderland. The charity Daybreak is also involved in the programme.

How to find out more

If after reading this document you would still like more information about the evaluation, you can email research@coram.org.uk, phone 0207 520 8181 (you can leave a message outside working hours) or write to Impact & Evaluation Team, Coram, 41 Brunswick Square, London WC1N 1AZ. You can also get in touch if you would like to be added to a list to receive a copy of our findings, when they are published.

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Annex: full process evaluation plan

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1. Project overview and objectives

Process evaluation objectives and research questions

The purpose of the process evaluation is to support the randomised control trial (RCT) of Family Group Conferencing (FGC) at pre-proceedings stage by providing evidence to explain the reasons for the effectiveness or ineffectiveness of FGCs. The process evaluation seeks to understand how FGCs are being delivered across 22 local authorities, what care-as-usual and the intervention look like, and what the experiences are of those delivering and receiving services. The RCT is large scale, complex and sensitive, and so we have designed a comprehensive, mixed methods process evaluation.

The key research questions for this process evaluation are:

1. Was the project implemented as planned across local authorities?
2. What do staff and family members think the barriers and promoters were to a successful implementation?
3. Were FGCs carried out as planned and to Daybreak standards? Why or why not?
4. Were any adaptations made to the FGC model that was planned, and if so, what, why, and where?
5. What is the local authority's care-as-usual offer, and were any changes made to this during or as a result of the programme?
6. How much impact do staff and families think what they experienced during pre-proceedings (care-as-usual or care-as-usual plus referral for FGC) had on their outcomes?
7. What are families' experiences of a FGC? How (un)helpful was the FGC for them?

2. Design and methods: overview

The process evaluation will use a mixed-methods approach to gather information from Daybreak and local authority staff, FGC coordinators and families.

The methods are:

1. Baseline and follow-up surveys of our main contacts all 22 local authorities
2. Interviews with local authority staff
3. Interviews with Daybreak staff
4. Surveys of FGC coordinators
5. Case studies of 4 local authorities, including document review and interviews with families (parents, children/ young people, and other adults)
6. Analysis of data collected as part of the RCT
7. Analysis of output of work done by others to assess fidelity in the 22 local authorities

The family interviews will be with the birth parent and/or significant carer of the child, as well as with the children and young people themselves. By the time of the interviews some birth parents may have lost parental responsibility and the children may be living with foster carers, with prospective adopters, or in a children's home, for example. As the birth parents or carers of the child at the time of the FGC are the focus of the intervention, we will prioritise interviewing birth parents or carers in such cases.

Interview and survey data will provide the majority of information, alongside document reviews and data collected from the RCT strand of the project. We will synthesise these different sources of evidence into a set of combined findings, triangulating where possible to maximise the validity of our findings.

Our case studies will illustrate the possible range of experiences in the whole sample, rather than aiming for representativeness. They will allow a richness of description that will help, in analysis and reporting, to explain the factors explaining our quantitative findings on effectiveness.

We will draw upon the results of work commissioned by WWCS to assess the quality and consistency (fidelity) of the model of FGCs being delivered through the programme, as well as analysing the data we collect from local authorities, such as the 'conversion rate'; the proportion of referrals for FGC which lead to a FGC meeting taking place. Coram was not involved in developing the intervention but will be involved in designing the scope of the fidelity assessment exercise.

Mindful of the risk of contamination, we have considered the need to be even-handed and avoid placing excess emphasis, over the course of fieldwork, on the FGC side of practice. Half of families will be referred for FGCs and half not, and we will aim to replicate this ratio in our level of effort.

The interviews may be carried out in-person or remotely via phone or video conference, according to circumstances at the time and in the interviewee's location, and taking account of interviewee preference. We will retain flexibility for making case-by-case decisions as the response to Covid-19 evolves. We will take into account any Covid-19 related implications which might affect the research methods. We will review the method(s) and make adjustments where necessary, consulting the project advisory group in the case of substantial changes, and recording any deviations from the protocol in the table (annex).

Table 1: Overview of research design

| Evaluation strand | Methods |
|---|---|
| Local authority and care-as-usual delivery strand | <ul style="list-style-type: none"> • Baseline survey of main contacts in local authorities x 22 • Follow-up survey and interviews with local authority staff x 22 • Follow-up interviews with Daybreak staff x 2 |
| FGC delivery strand | <ul style="list-style-type: none"> • Online survey of FGC coordinators • Analysis of FGC participant feedback forms (case study families only) |
| Case study strand 4 x local authorities | <ul style="list-style-type: none"> • Interviews with family members referred for a FGC, and the relevant referring social worker x 4 • Interviews with family members not referred for a FGC, and the relevant referring social worker x 4 • Follow-up interviews with social workers involved with the family x 8 |
| Fidelity assessment strand | <ul style="list-style-type: none"> • Review outputs of work provided by WWCS • Analysis of qualitative and quantitative data |
| Other methods | <ul style="list-style-type: none"> • Analysis of some of the 6-monthly RCT data returns • Document review |

Table 2: Comparison of evaluation questions to methods

| Method: Question: | Interviews with local authority and Daybreak staff | Interviews with family members | Baseline and follow-up surveys of local authority staff and FGC coordinators | Review outputs of fidelity work | Analysis of some of the RCT data | Document review |
|--|--|--------------------------------|--|---------------------------------|----------------------------------|-----------------|
| Was the project implemented as planned? ⁹ | ✓ | | ✓ | ✓ | ✓ | |
| What do staff and family members think the barriers and enablers were to a successful implementation? | ✓ | ✓ | ✓ | | ✓ | |
| Were FGCs carried out as planned and to Daybreak standards? Why or why not? | ✓ | ✓ | | ✓ | ✓ | ✓ |
| Were any adaptations made to the FGC model that was planned, and if so, what, why, and where? | ✓ | | ✓ | ✓ | | ✓ |
| What is the local authority's care-as-usual offer, and were any changes made to this as a result of the programme? | ✓ | ✓ | ✓ | | | ✓ |
| How much impact do staff and families think what they experienced during pre-proceedings (care-as-usual or care-as-usual plus referral for FGC) had on their outcomes? | ✓ | ✓ | | | | ✓ |
| What are families' experiences of a Family Group Conference? How | ✓ | ✓ | | | ✓ | |

⁹ See Figure 3, the summary logic model of the model of FGCs in this programme. For example, we will explore the nature of the FGCs; whether review meetings are held; which professionals are attending, and other features of the model as interpreted and implemented locally.

| | | | | | | |
|-----------------------------------|--|--|--|--|--|--|
| (un)helpful was the FGC for them? | | | | | | |
|-----------------------------------|--|--|--|--|--|--|

More details on the research methods and their key research questions for each strand are set out in the following sections.

3. Local authority and care-as-usual delivery strand

The local authority delivery strand is made up of the following methods:

- Baseline survey of main contacts in each local authority x 22
- Follow-up survey of local authority staff x 22
- Follow up interviews with Daybreak staff x 2

We will collect information from local authorities to understand their current practice as of approximately June 2019, at the point of applying for the programme, care-as-usual practice, and FGC delivery model. This will be monitored throughout the project to understand any changes and to capture lessons learned. We will also monitor the number of cases that are randomised in each local authority to ensure that this is in line with expectations. To do this, we will use the randomisation section of the study website, which will allow us to automatically generate reports by local authority on the number of randomisations, which we will report on at project steering group meetings.

We anticipate that some of the regular data returns may be compiled for us by an administrator or business support officer in the FGC team. This brings the risk that data on the control group, who do not receive a FGC, is of lesser quality than data on the intervention group as it may be considered as of less interest. We will carry out analysis of missing data, including responses to the free-text data quality question, and use our baseline and follow-up surveys of our main contacts in local authorities, to investigate this possibility.

Baseline survey of local authorities

Early into local authorities' implementation of FGCs at pre-proceedings stage (months 2-3 into the programme) we will ask all of our main contacts at each local authority to complete a short online survey. The main contacts at local authorities are varied but commonly include: Head of Service, Service manager/ Team manager and Service Director (children's service teams).

The online survey will ask local authorities about current practice for the intervention and control groups. Local authorities will be asked to confirm if the information provided at the application stage for the programme about their current practice in around June 2019 still stands, or if any changes have been made.

As five of the local authorities who are participating in the RCT are participating in other concurrent evaluations (two are part of the DfE *Supporting Families: Investing in Practice* –funded evaluation of Family Drug and Alcohol Courts, and three are part of the similarly funded evaluation of the Mockingbird model of foster care), we will use the baseline survey of local authorities to examine whether there is a risk that families in the RCT also become part of the other evaluations, and the nature and extent of this. This will allow us to assess any threat the other evaluations pose to the validity of the trial. The five local authorities will not take part in the case study strand of the process evaluation.

We anticipate that some local authority staff may prefer to answer the questions by telephone and will provide the option to complete the survey over the phone with a Coram researcher. We will review the completed surveys and follow up any queries or incomplete fields.

Follow-up with local authorities

Between 18 and 20 months into the programme we will contact local authorities to ask them to take part in a short online survey and follow-up phone call. This can be either with the staff member who completed the baseline survey/interview, or with a frontline practitioner.

The purpose of the survey and interview will be to gather data on the final model implemented in each local authority, and to find out about any changes made by local authorities as their FGC practice embeds (such as possible changes to the model, provider, and turnover of workers, including any changes to the quality or quantity of care-as-usual support offered to the 'refer for FGC' group members relative to the 'do not refer' group members). We will also seek feedback on care-as-usual, to explore whether any changes were made to what was offered to families who were not referred for FGC, and also for those who were referred. Four local authorities stated at the point of application for the programme that they used Family Network Meetings. We will use the follow-up interviews with local authorities to explore this and any possible impact on FGC provision. We will also seek general reflections on the project, including successes and improvements, and explore what, if any, role the family courts have played (such as through increased use of court requests for FGC), and whether there were eligible cases that were not entered into the trial, and if so, why. We will also seek reflections on any impact of Covid-19 on care-as-usual by local authorities.

Finally, we will examine whether the 'unblinded' nature of the trial (meaning that social workers, other professionals, and the courts will know or be able to find out which families have been referred for FGCs and which have not) may have affected the outcome, and thus may have implications for the trial's validity. This could be especially pronounced for proximate outcomes like whether court proceedings go ahead, as the decision to abandon pre-proceedings or issue proceedings depends on social workers' views of whether families have done enough to change. They may consider that families who have taken part in a FGC have done more than families who have not. We suggest in study documentation that social workers should consider this risk as part of their ongoing reflective practice.¹⁰ In addition to the local authority follow-ups, we will explore this with social workers in the follow-up interviews.

Follow-up interviews with Daybreak staff

We will carry out interviews with key Daybreak staff towards the end of the programme (in around month 16 into the programme) to gather reflections on the project implementation and progress, successes and improvements. Interviews will be carried out in-person or over the phone, depending on the preference of the interviewees and any Covid-19 related implications. We will also seek to understand whether fidelity of the Daybreak model was achieved (see section 6 for more information).

We plan to request an interview with Daybreak's project manager, who is responsible for programme delivery and maintaining contact with local authorities. We also plan to speak with the member of staff in Daybreak responsible for providing training and support to local authority FGC teams.

4. FGC delivery strand

The FGC delivery strand is made up of the following methods:

- Online survey of FGC coordinators
- Analysis of FGC participant feedback forms (case study families only)

This strand will collect feedback from FGC coordinators to understand more about how the FGCs work in practice and what support they have been provided with by Daybreak and the local authority. We want to collect contextual feedback from one family per case study local authority who have received an FGC about

¹⁰ [Frequently Asked Questions - information for local authorities about Coram's evaluation of Family Group Conferencing at pre-proceedings stage](#)

their FGC experience, as well as from a family who did not receive a FGC We will explore the FGC coordinators' impressions of the care-as-usual support, and whether they feel any changes were made –both for families who were not referred to FGC, and for those who were.

FGC coordinator survey

We will invite FGC coordinators from all local authorities (though not necessarily employed by the local authorities) to take part in an online survey at month 11 to 13 into the programme. FGC coordinators will be asked about how they have carried out FGCs, how the Daybreak model is working, and if any adaptations have been made. They will also be asked about any successes or difficulties, and for their impressions of the impact of the FGCs on families. As coordinators delivering FGCs have an interest in their work continuing beyond the programme, we may expect a positive slant in these survey responses. We will reflect on this risk in the analysis and mitigate it by triangulating against other methods.

As the survey is funded as part of the programme, we will communicate with local authorities that we expect the survey to be completed, and anticipate a high response rate. However, we will analyse results, whatever the rate.

FGC participant feedback forms

The process evaluation will include analysis of any Daybreak feedback forms filled in by family members and others (who participate in the four case studies) immediately after the FGC meetings they attended. This will provide information on how happy families were with the FGC and other indicators. A copy of the relevant questions can be found in the appendix.

5. Case study strand

The case study strand is made up of the following methods:

- Interviews with family members referred for a FGC, and the relevant referring social worker x 4
- Interviews with family members not referred for a FGC, and the relevant referring social worker x 4
- Follow-up interviews with social workers x 8

Selection of local authorities

We have selected four local authorities to take part in the case study strand. Table 2 identifies them, but we have identified substitutes if they are not able to participate.¹¹ The local authorities have been selected to provide a range in terms of region, FGC current practice in 2019, OFSTED rating and size by number of resident children.

Table 2: Local authorities to be invited to take part in the case study strand

| Case study | Local authority | FGC current practice as reported in June 2019 | Type and region | Size (number of children resident in LA)* | OFSTED rating |
|------------|------------------------------|---|---------------------|---|----------------------|
| 1 | Bath and North East Somerset | Not routinely offered | Unitary, South West | Bottom quartile | Good |
| 2 | Lewisham | No FGC service | London borough | Top / middle | Requires improvement |

¹¹ The back-up choices are: 1. Shropshire; 2. Lambeth; 3. Northamptonshire; and 4. Salford.

| | | | | | |
|---|----------------|-------------------|---|-----------------|----------------------|
| 3 | Leicestershire | No FGC service | County, East Midlands | Top quarter | Requires improvement |
| 4 | Rotherham | Newly established | Metropolitan district, Yorkshire and the Humber | Middle / bottom | Good |

* The six largest local authorities in the sample in terms of number of resident children are categorised as the top quarter, second six are top/middle, the third six are middle/bottom and the smallest six local authorities are the bottom quarter.

In each case study, we plan to speak with members of a family who were referred for a FGC and took up this offer, and also to members of another family who were not referred for a FGC. We aim that interviews with each family will take place separately. We would also like to speak with the child(ren)'s social worker for both families who received a FGC and 'care-as-usual' and who received 'care-as-usual', before we speak with the family members. In each family we aim to speak with the main carer¹² at the point of the pre-proceedings letter being sent, and a second family member, as well as a child or young person. We will seek to interview children aged 10-17 (see section 9). We will take into account any Covid-19 related implications for families and may vary the timing or mode of interviews to suit the family's situation and wider circumstances.

The interviews with families who attend a FGC and their social worker will take place *after* the FGC but *before* the end of pre-proceedings, and we will aim for 8-12 weeks after the family enters pre-proceedings. For families who are receiving care-as-usual only, we will seek to interview them and their child(ren)'s social worker 8-12 weeks after the family enter pre-proceedings, to maximise comparability.

Local authorities will act as our gatekeepers for access to families and will be responsible for helping us to approach a number of families who have been referred for a FGC or not. The local authority will have extra information about families to enable us to select families with different characteristics, beyond that which we will receive via the six monthly data return. We will not approach any families who have got in touch with Coram to request that their data is not used as part of the RCT.

Over the course of fieldwork for our interviews with family members, we will keep track of family member characteristics, with the aim of achieving a broad range of characteristics among those we interview, in terms of: ethnic group, gender, family size and structure, age of children, and the nature of the local authority's concerns.

We will be gathering data on families every six months through the RCT data collection template, but because this is limited to the minimum necessary, we will not be receiving families' names or details that would enable us to determinate whether it would be appropriate to approach them for interviews. We wish to avoid local authorities choosing families to take part in the evaluation, but we will require local authorities to identify families for us who will potentially be able to take part in interviews. Families may have very difficult circumstances and for some it would not be appropriate to interview them because this would entail an unacceptably high risk of harm to the family or researcher (see *section 9: interviewing vulnerable participants* for more information).

Local authorities will contact the families directly to pass on information about the evaluation (see appendix) and ask for their consent for Coram to contact them. Coram will then liaise with the family and/or social worker to schedule the interviews. Ideally we would conduct the interviews with family members (from the same family) on the same day, but these would be separate interviews. We will discuss accessibility requirements

¹² The main carer may be the child's parent, a foster carer, other family member etc. Parental responsibility may not necessarily be with the child's parent. For this interview we consider the main carer to be the person with care responsibilities for the child. Consent will be obtained from them for the child to take part in the interview (if applicable).

for interviews with local authorities, who for example, may alert us to the need for information sheets and consent forms in alternative formats or translations, which we will arrange for. The interviews will take place in a location of the participant's choice such as the home.

Family members will receive an voucher for participating in the local authority case study interviews. The parent/carer and other adults will receive a £30 voucher each for taking part in 45-60 minute interviews. Children and young people aged 10-17 will receive £15 for taking part in a shorter interview, which will take up to 30 minutes.

Interviews with adult family members (during pre-proceedings)

We will speak with the parent/carer of the child and/or another adult in the family network. The other adult family member may or may not have attended the FGC meeting, in families where these occur, or may just be heavily involved in the child's care. We will discuss this with the child(ren)'s social worker. The purpose of these interviews will be to understand the family's experience of pre-proceedings and what support they have received from their local authority (including FGCs). We will be interviewing families to understand how the FGC worked as well as how care-as-usual has worked for them.

Interviews with children and young people (during pre-proceedings)

At around the same time as interviews with family members and/ or social workers (usually on the same day or within a week or so), we would like to speak with children and young people to understand how involved they have felt in decisions about their care. If they have attended a FGC, we would like to know more about this experience and if they thought it was useful. If they have not attended a FGC, we would like to know if they have been involved in any other support or meetings with their social worker, local authority or other family members, and their experience of this.

We will only seek to interview children aged 10 to 17 in a family, but it is possible that younger children may be present. That is, we may hear incidentally from younger children in the course of interviewing older family members. If this is the case we will offer interviewees a chance to reschedule, to enable privacy, and only go ahead if the child's age and the circumstances of the interview mean they are unlikely to hear or understand what is said. We will not include in the analysis any comments from younger children. We understand that typically FGCs involve families with children aged younger than 10, so in identifying families to approach, we will not rule out families with these children from our case study families.

Further information about interviewing children and young people, obtaining consent, safeguarding procedures and risk assessments can be found in section 9 of this document.

Social worker interviews (during pre-proceedings)

Around the same time we speak with family members, we would also like to speak with the child or children's social worker (preferably before we speak with the family members). This will provide background on the family context and what support the family has been receiving from their social worker and the local authority during pre-proceedings. We will also ask about the perceived impact of the care-as-usual or FGC plus care-as-usual on the family. If the same social worker has been working with both of the families in the case study local authority, we will suggest a longer interview, or two separate appointments.

Follow-up interviews with social workers

We also want to speak with social workers after pre-proceedings have ended (which may be due to the local authority dropping pre-proceedings, issuing proceedings, or immediate escalation if new serious issues emerge). This may be the same social worker, or a new one, if there has been staff turnover. The purpose of the short telephone interview will be for later reflections on the pre-proceedings process and whether the services received by families were felt by social workers to have had an impact on the pre-proceedings

outcomes including court diversion, living arrangements, legal status, time spent in care, and sustainment of outcome, or on any other outcomes, including unintended consequences. The interview will also provide an opportunity to verify the data collected in respect of the case study families as part of the RCT data return.

Follow-up of families in the case study strand

Families interviewed as part of the case study strand will be followed up through the 6-monthly quantitative data returns from local authorities to monitor progress and outcomes for the families. This is so that the data from the interviews can be used to provide contextual information to the families' journey through the proceedings.

6. Fidelity assessment strand

The fidelity assessment strand is made up of the following method:

- Review outputs of work commissioned by WWCS
- Analysis of quantitative and qualitative data

We will assess the fidelity of the FGC model through analysing the output of work commissioned by WWCS, and by analysing the data we collect from local authorities.

7. Other methods strand

The 'other methods' strand is made up of the following methods:

- Analysis of some of the RCT data
- Document review

Document review

We will review other project documents. This will include minutes of project steering group meetings and local authorities' answers to the questions below, as of June 2019, taken from the application forms for the programme.

- *Areas already delivering [...] Family Group Conferencing (unless Family Group Conferences are already in use at the pre-proceedings stage) are welcome to apply. Please confirm whether you are already using the approaches you are applying for (including any variations or similar models), and if so, describe how these are currently being used in practice.*
- *Describe your commitment to the model and how it would fit within your current practice and local service planning?*
- *Describe your approach to ensuring sustainability of these models post March 2020. Where possible, provide examples of initiatives which you have successfully supported beyond their initial external funding period*
- *Please confirm your commitment to, and how you will support the evaluation*

Analysis of some of the RCT data

Data collected using the six monthly data collection template will also be used to inform this process evaluation. This includes the following fields from the RCT data returns:

- Was the FGC commissioned externally or in-house? (G1c)
- Status of FGC coordinator (G2a)
- Was the FGC coordinator trained to standards set by Daybreak? (G2b)
- Why families did or did not receive a FGC (contrary to randomisation)

- Open text box responses

8. Analysis

Qualitative data

Interview transcripts will be stored (password protected) in Word, stored on an encrypted server. We will use NVivo Framework to store and manage the data for thematic analysis and coding of all interviews. Interview recordings will be recorded on a digital recorder or by the video conferencing platform and removed once uploaded to Coram's secure server, where files will be held securely in the project folder which is accessible only by members of the evaluation project team. These will be deleted once transcripts have been written up.

The interview notes will not include names, but will include family ID, to allow matching to other data. We will take care in reporting to anonymise particular events / information that may identify a family, and will not specify their local authority. Any reference in our reporting to the documents we review (see section 7) will be similarly anonymised. Any paper notes will be typed up, saved in the project folder, then shredded.

Analysis will be conducted on both the interview content and for comparison between groups of respondents. Team meetings will also be held during the analysis and reporting periods to discuss emerging findings and thematic analysis. All qualitative findings will be agreed by researchers and signed-off by the Principal Investigator. We will identify and explore themes and theories emerging from analyses from surveys and interviews with social workers, family members and children. Theories which emerge from the data analysis will be applied to other parts of the data. For instance, theories emerging from analysis of social worker interview data may then be explored when analysing family member interviews.

Quantitative data

Quantitative data includes: FGC coordinator survey data, local authority baseline and follow-up survey data, and family FGC feedback forms. As part of the process evaluation, we will also explore the possibility of analysing differences between family courts as a mediating influence on the final outcome measures. The data from family members will be linked to other information using the unique family ID we will be using for the RCT. For data from professionals, we will not report on personal identifiers such as name, address, or age. We will take care not to attribute statements to identifiable professionals, but we will report job titles and local authority names where relevant, so there is a risk that individuals may be identifiable.

Data will be analysed and stored in SPSS or Excel, depending on the size of the data (for example the family FGC feedback forms will be stored and analysed in Excel, whereas FGC coordinator survey data will be stored and analysed in SPSS). All analysis outputs will be quality assured by another researcher in the Impact and Evaluation Team and signed-off by the Principal Researcher.

We will use SmartSurvey, an online survey platform, for the local authority staff and FGC coordinator surveys. SmartSurvey adheres to GDPR guidelines.

Triangulation

We will triangulate our overall findings based on analysis of qualitative and quantitative data together. We will take an iterative approach to our analysis and discuss the nature and reasons for any discrepancies between our qualitative and quantitative findings. Triangulating the data will help to ensure that the findings are trustworthy and reliable.

9. Ethics

Researchers must protect the physical, social and psychological wellbeing, and the rights, interests and privacy of research participants. The welfare and best interests of participants are our primary consideration in

methodology design and data collection. In this case, families will be going through a difficult time, and likely to be vulnerable.

Characteristics of participants

At baseline, parents (usually, but sometimes other family members), rather than the local authority, have parental responsibility. But they risk losing this, as they have entered pre-proceedings. A child is already known to the local authority at pre-proceedings stage, but the birth or adoptive parents (and occasionally other family members) have parental responsibility. The child may be a child in need (section 17 of the Children Act 1989), or subject to a child protection plan (section 47 of the Children Act). In response to new information, or a gradually emerging picture of the (high) level of risk, a local authority uses pre-proceedings, and then care proceedings, to escalate a child's status from (usually) a child protection plan to being a looked-after child and take over parental responsibility.

Parents

Some of the potential vulnerabilities and challenges these parents will be facing are:

- Emotional stress of being involved in a process that could lead to their child(ren) being taken into care or going to live with other family members
- Substance misuse, domestic violence and/or mental health issues
- Isolation and lack of support networks
- Complex family situations
- Being a parent at a young age
- Being a care experienced person themselves.

Parents may previously have had children taken into care. As part of data gathering for the RCT, we will ask local authorities to report on whether, to the best of their knowledge, each child's mother or father has ever had a child taken into care.

Children

Children in the families will have experienced or be experiencing these things. They may previously have spent time in care, though must be non-looked after at the point at which their family enters pre-proceedings. They may have different levels of awareness of the pre-proceedings process and its implications.

Other family members

The wider family, such as grandparents, may have different levels of involvement in the family and its challenges, and may be unaware of the pre-proceedings process and its implications. Statutory guidance requires that local authorities "so far as is reasonably practicable, ascertain the wishes and feelings of [...] any other person whose wishes and feelings the authority considers to be relevant [...] through individual discussion, family discussions or other means and that may mean convening a Family group Conference". Wider family members may or may not be invited to attend a FGC, where one takes place.

Ethical consideration and approval process

Our plans have been informed by our research ethics process and on substantive ethical issues have been discussed with a number of advisors, including project advisory board members. A full ethics application, setting out and responding to all the ethical considerations we have identified, was made to Coram's Children's Services Committee (to which Coram's Research Ethics and Governance Advisory Group reports) separate from the RCT ethics submission. We gained additional external input on the process evaluation proposal from two independent external reviewers from the Institute of Education. Their comments were considered by members of Coram's Children's Services Committee as part of decision making.

Harm

Advice will be sought from the social worker or staff working with the family in question before interviews with family members take place, to ensure interviewers are aware of anything that may cause distress to the participant. If we identify in the course of fieldwork that we are causing harm to a participant, such as causing a family member to become distressed or upset, we will offer to pause or end the interview.

Harm could also be caused by a person's identity being discoverable through our reporting, if we do not do enough to anonymise people and situations. To mitigate for this, all reports will be thoroughly quality assured, no quotes or details will be attributed to particular local authorities, and where there are particular concerns that a family member might be identifiable, we will omit details, or remove entirely.

We will also gather information through the process evaluation strand and through regular project meetings about any emerging risks and harms. If evidence emerges of serious and substantial harms being caused to families in either the control or intervention group due to the evaluation, we will consult Coram's Research Ethics and Governance Advisory Board and consider ending the trial early.

Consent

All interview participants will receive an information sheet in advance of them agreeing to an interview. Social workers will be responsible for giving this to families, but the researchers will carry additional copies to interviews. Participants will have the opportunity to read the information sheet at the start of the interview and ask any questions. If telephone or video-conference interviews prove necessary, the interviewer will offer to go through the information sheet with the interviewee before starting the interview. We will explain the research purpose and how data will be used, to all participants in advance of them providing consent.

Verbal consent will be requested at the point of making an interview appointment, and will be sought at the start of each interview (the topic guides set out the form of words). We will remind participants that their participation is on a voluntary basis and that they may stop at any time or choose not to answer questions. However, in the case of local authority and Daybreak staff, we will also remind them that their organisation is being paid to support the evaluation as part of its participation in the programme. Researchers will explain to family members in clear, age-appropriate language that they are not required to participate in the study, and that they may stop at any time or choose not to answer questions. Researchers will explain that refusal to participate will not affect the service they receive from their local authority or the outcome of pre-proceedings.

Participants will be asked for their permission to have the interview recorded, which will be used only for the purposes of data analysis. We will explain that any quotes used in reporting would be anonymous. We will ask for interviewees' verbal and written consent to take part in the interview, and for recording of it. If recording consent is refused but participation consent is given, the interviewer will take notes instead. Data gained by telephone/video conference will be stored securely in Coram's project folder and accessible only by members of the evaluation project team.

Further information about obtaining consent from young people can be found later in this document section.

Confidentiality

Sensitive information may be shared in the interviews, due to the topic of this study. We will emphasise that views/answers will not be shared with other people, such as their social worker, other family members or colleagues (subject to the safeguarding caveat below). The following steps will be taken to ensure confidentiality:

- Interviews will take place in a secure, private location which ensures participant's answers are not overheard (for example, a meeting room rather than an open-plan office);

- Researchers will redact the names of participants and will ensure that names are not recorded on any documents (such as interview notes and transcripts);
- All data will be stored securely (see section 10 for more details); and
- No names or identifying details will be used in any reporting.

We will need to balance the need to explain complex situations with the need to avoid providing so much detail on situations that individuals or families become identifiable.

Safeguarding

Safeguarding issues or concerns may arise. At the start of the interviews with family members it will be made clear to all participants that Coram is not part of the local authority and that what is discussed is confidential, unless something is raised which suggests someone is at risk of harm (including the participants themselves). In these instances researchers would follow Coram's safeguarding protocols and report concerns to the relevant authorities. A copy of Coram's safeguarding policy and procedures is available on request.

Interviewing children and young people

Only children aged 10 to 17 will be invited to participate in interviews. Trained researchers from Coram's Impact and Evaluation team with experience of interviewing on sensitive topics and with vulnerable participants will carry out the interviews. The interviews will be age-appropriate and tailored to the needs of the child (a copy of the topic guide can be found in the appendix). Questions will be asked sensitively and in a child-friendly manner that is appropriate to the child or young person. Clear language will be used. Because sensitive information and experiences may be discussed, the interview will end on a positive, to ensure that the young person is not left focusing on a negative experience. Finally, at the end of the interviews we will hand over vouchers to thank children and young people for their time; in the envelopes with the vouchers we will include details of the counselling service Childline that can provide telephone support.

The interviews will take place in the home or a safe location; we expect this to be the same location as their parent's or carer's interview. Ideally the interview will be conducted with parents or carers not in the same room as the young person but present in the house, for example in the room next door. However, if the parents/carers prefer to be present in the room with the child (and the child consents to this) the interview can still go ahead. Children will also be able to be accompanied by with a trusted adult or friend (who is over 16) if this would make them feel more at ease. We will acknowledge in reporting that this may affect the child/young person's response, and discuss any effects we believe their presence had on the nature of responses.

Obtaining consent from young people

Young people who are aged 16 and over can consent to take part in an interview without the consent of those with parental responsibility. However, we will make the parent / carer aware of the interview and seek their permission for us to approach the young person for an interview. If permission is granted, the young person will be asked for their own consent to participate in an interview (signed consent will be obtained).

For children and young people aged 10 to 15, we will also seek written consent from their parent or carer. If consent is provided, the young person will be asked for their consent to take part in an interview. Consent collected from parents/carers will be signed, and the young people will be asked if they consent verbally (which we will record).

Coram researchers have enhanced DBS checks. A full risk assessment (template in the appendix) will be completed before each interview takes place. Coram researchers will exercise caution and common sense, and follow Coram's safeguarding policy and procedure and Coram's lone working policy (we plan to carry out interviews in pairs, but this may not always be possible). The policy requires a line manager or colleague to know where staff are working, who they are seeing, and what time they expect to leave; and requires staff to

telephone the office at the point of leaving and on arrival at the destination; and requires staff to provide their line managers with contact numbers for next of kin, in case of an emergency.

Interviewing vulnerable participants

Given the sensitive nature of this research and the fact that families going through pre-proceedings, we potentially will be interviewing vulnerable families and family members. Initial discussions will be held with the child(ren)'s social worker to ensure that families invited to participate in the case studies are suitable and can comprehend what they are being asked to do. For the participants' and researchers' safety, we will only interview families if the social worker agrees that the risk to researchers would not be unacceptably high. We will assess this on a case by case basis. We will assess, and in reporting discuss, the extent of bias in selection that this recruitment process entails.

Researchers must ensure that data collection takes place in a safe environment. Participants will be interviewed by two researchers (one interview, one note taker). We believe the benefits to the quality of data and analysis outweigh the risk of causing interviewees to feel outnumbered by interviewers. Researchers will complete a risk assessment form for all family case study visits (a copy can be found in the appendix). At the end of the interviews family members will be given a voucher as a thank you for their time; in the envelopes with the vouchers we will include details of organisations that can provide telephone support: for adults, the mental health charities Samaritans and Mind; and for children, Childline.

10. Data protection

All data will be stored in line with Coram's data protection policies. All personal information, interview recordings and interview notes will be stored securely on Coram's internal encrypted network, which is fully protected by appropriate firewalls and a dedicated IT support team. Only members of the project team will have access to the project folder and files will be password protected. Where information is entered into NVivo, this will be anonymised.

We will collect the following personal data as part of the process evaluation:

- Local authority leads: names, job titles, contact details
- FGC coordinators: names, employer, contact details
- Case study social workers: names, contact details
- Case study family members: names, age / DOB, address, personal circumstances, ethnic group, contact details

This information is for the purpose of identifying families to take part in the case studies as well as to arrange interviews. Only anonymised aggregate data will be reported. This information will not be used for any other part of the study or shared with team members not working on the case studies.

We will offer to send family members and professionals who take part in the process evaluation a weblink, by email, of the results of the evaluation as a whole, once these become available. However, in order to do so, we will need to collect and keep the consent of family members and professionals for their personal information (e-mail address) to be kept for this purpose. The data will be stored in line with Coram's data protection policies.

Personal data will be destroyed 12 months after the end of the project, defined as the date on which the main findings are published.

11. Risk assessment

Researchers will be required to complete a risk assessment in advance of each family member interview visit. This will need to be signed off by the Head of Impact and Evaluation. A copy of the template can be found in the appendix.

12. Timetable

Fieldwork for the process evaluation will begin at the same time as the start of the programme, when RCT fieldwork and FGC referrals begin. This was originally planned for 1 April 2020, but was delayed to 1 September 2020 due to the Covid-19 pandemic. The process evaluation fieldwork will continue until the end of the project. The project activity and reporting timings shown below are dependent on the progress of the RCT and local authority FGC delivery.

| Month | -4 | -3 | -2 | -1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 |
|-----------------------|--|-------------------|----|----|-----------------------------------|---|---|--|---------------------------------|---|----------------|---|----------------------------|----------------------------|----|----|---|---------------------------------|----|----|----|---|--------------|----|----|----|--------------|----|
| Key milestones | First contact with local authorities | | | | Trial begins / start of referrals | | | | | | | | Interim report due | | | | | Final referrals to trial | | | | | | | | | Final report | |
| Setting up field work | Design topic guides, information sheets, consent forms | | | | Review LA application information | | | | | | | | | | | | | | | | | | | | | | | |
| | | Submit ethics app | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fieldwork | | | | | Baseline survey with LAs | | | | Case study interviews fieldwork | | | | Survey of FGC coordinators | | | | Follow up survey and interviews with LA staff, Daybreak and case study social workers | | | | | | | | | | | |
| Data analysis | | | | | | | | Interim data analysis: review of baseline data | | | | | | Family case study analysis | | | | FGC coordinator survey analysis | | | | Follow-up survey and interviews data analysis | | | | | | |
| Reporting | | | | | | | | | | | Interim report | | | | | | | | | | | | Final report | | | | | |

13. Appendix

Copies of the following documents are included in the appendix. The topic guides and surveys should be viewed as drafts subject to revision and iteration as we receive review comments from advisors, and pilot and test drafts in early fieldwork. Later data collection templates will be informed by the progress of the programme as a whole – we will retain enough flexibility to ask about developments affecting implementation and delivery.

Coram evaluation of Family Group Conferencing at pre-proceedings stage

Baseline survey of local authority staff – 2-3 months into programme

This survey is to help us understand current practice in local authorities participating in the *Supporting Families: Investing in practice* programme, and how the delivery of Family Group Conferencing is organised within the local authority.

Please explain your answers fully in the comment boxes, where applicable, so that we do not need to contact you to ask for explanations. Only 1 response per local authority is required, but you are welcome to complete the survey in collaboration with colleagues.

1. Job title

2. Local authority

3. Summary of responsibilities within local authority

4. Please describe your usual practice for families at pre-proceeding stage (what do you do with families, how much time do you spend, which staff are involved, etc), other than the Family Group Conference referral for some families.

5. Please give details of any recent, current or planned changes to this (other than the referrals for FGCs)

6. Do you anticipate that a referral to Family Group Conferencing will affect what you do as part of your usual practice at pre-proceedings stage? If so, how?

7. What type of Family Group Conference are you offering at pre-proceedings stage?

- ☐ In-house by the local authority (please give name of team below)
- ☐ Provided by Daybreak
- ☐ Provided by another independent provider (please give name below)
- ☐ A mixture (please explain below)

Please provide details

8. How do the Family Group Conferences you are now offering at pre-proceedings stage compare to other Family Group Conferences in your local authority?

- ☐ Not applicable – we do not offer Family Group Conferences at other stages
- ☐ They are the same – we offer the same kinds of Family Group Conferences at other stages (please describe when in the child's journey they are offered, below)
- ☒ They are different – we offer a different model of Family Group Conferences at other stages (please describe when in the child's journey they are offered, and how they differ, below)

9. How is Family Group Conferencing at pre-proceedings stage organised in your local authority? Please describe which organisations, teams and staff are involved in organising and delivering Family Group Conferences, including the number of people involved, their roles, and the extent of their FGC work relative to their other work.

10. Do you have any measures in place to assure the quality of the data in the six-monthly data returns to Coram (e.g. data completeness and accuracy, both for the 'Refer to FGC' group and the 'Do not refer' group)? If so, what are they?

11. What are you hoping that your local authority's participation in the Supporting families: investing in practice programme (introducing Family Group Conferencing at pre-proceedings stage) will achieve?

12. Do you anticipate that any of the families entering pre-proceedings in your local authority over the course of the programme may also become part of other evaluations?

- ☐ Yes
- ☐ No
- ☐ Don't know

13. How do you think the services received by families who are participating in more than one evaluation will be affected?

14. Do you have any other comments?

15: Email address:

You will not be named in any reporting. We may contact you for further information about your responses if necessary. Thank you for taking the time to complete this survey. If you have any other comments or questions, please contact impactandevaluation@coram.org.uk

Coram evaluation of Family Group Conferencing at pre-proceedings stage

Follow-up survey of local authority staff – month 15 to 17

This survey is to help us understand how practice has developed in local authorities participating in the *Supporting Families: Investing in practice* programme, with particular focus on usual practice and the Family Group Conferencing model. More background information is available on the [study website](#). We will ask for some figures and details of costs, so please ensure you have these to hand.

Please explain your answers fully in the comment boxes, where applicable, so that we do not need to contact you to ask for explanations. Only 1 response per local authority is required, but you are welcome to complete the survey in collaboration with colleagues.

1. Job title

2. Local authority

3. Summary of responsibilities within local authority

4. Please describe the final model of Family Group Conferencing implemented in the local authority, specifying any changes made since the beginning of the programme (including changes in commissioning arrangements/ Family Group Conference provider, staff turnover, changing approach to delivery or timing of Family Group Conferences)

5. In your opinion, has the introduction of Family Group Conferencing at pre-proceeding stage made any difference to how the local authority works with families during pre-proceedings in general? If so, how?

6. How many emergency cases has the local authority dealt with since the start of the programme (who have entirely by-passed pre-proceedings)?

7. How many cases have initially entered pre-proceedings, but then escalated to become emergency cases since the start of the programme?

8. Are you aware of any families who entered pre-proceedings since the start of the programme, but who were not randomised into the 'Refer to FGC' or 'Do not refer' groups?

☐ Yes

☐ No

If yes, how many?

9. If yes, why was this?

10. What if any changes have been made to usual practice at pre-proceedings stage for families who were not referred for a Family Group Conference since the start of the programme?

11. What if any changes have been made to usual practice at pre-proceedings stage for families who did receive a Family Group Conference since the start of the programme?

12. In your view, what has the impact been of staff knowing whether families participated in a Family Group Conference at pre-proceedings stage, on decisions about whether to proceed to court?



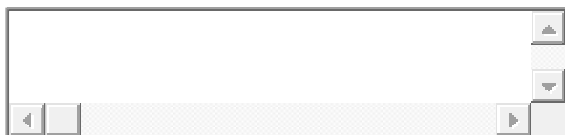
13. Has anything affected the quality of the data submitted in the six-monthly data returns to Coram (e.g. in terms of missing data, completeness, data quality, and data capture across the 'Refer to FGC' and 'Do not refer' groups)? If so, what were they?



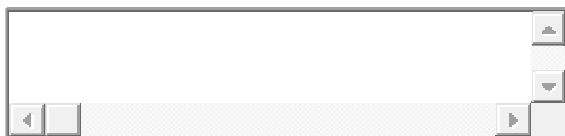
14. What were the actual costs to the local authority of implementing Family Group Conferencing at pre-proceeding stage in the first year of the programme? Please include staff costs, overheads, and other costs. Please do not include spending on other, non pre-proceeding stage FGCs. Please break down your costs into start-up costs and ongoing costs where possible. Please include a comment on data quality and completeness. If you prefer to email a spreadsheet, please send this to impactandevaluation@coram.org.uk.



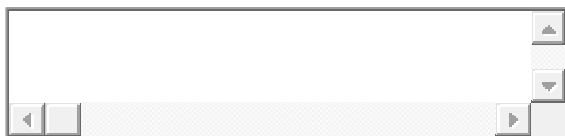
15. What factors helped in the implementation of Family Group Conferences at pre-proceeding stage?



16. What were the barriers to the implementation of Family Group Conferencing at pre-proceedings stage?



17. What role have Family Courts played in the programme?



18. Do you have any other comments about the programme, Family Group Conferences, usual practice, or anything else to do with the study, including any suggested improvements?

19. Email address:

You will not be named in any reporting. We may contact you for further information about your responses if necessary.

Thank you for taking the time to complete this survey. If you have any other comments or questions, please contact impactandevaluation@coram.org.uk

Family Group Conferencing at pre-proceedings stage: process evaluation

Topic guide for follow-up interviews with Daybreak – month 15 to 17

| | |
|--|-------------------|
| 1. Introduction | 5 minutes |
| <p><i>Introduce yourself, Coram and the evaluation</i></p> <p><i>Explain interview purpose and timings (c. 60 minutes)</i></p> <p><i>Check consent and reassure confidentiality (if phone interview, check if in private meeting room)</i></p> <p><i>Check if happy to have the interview audio recorded</i></p> <p><i>Check if any questions before we begin</i></p> | |
| 2. Background | 3 minutes |
| <ul style="list-style-type: none"> • Please can you tell me briefly about your role? <ul style="list-style-type: none"> - What is your job title? - What does your role involve? | |
| 3. Roll-out of Family Group Conferencing | 50 minutes |
| <ul style="list-style-type: none"> • How do you feel the roll-out of the Daybreak model of Family Group Conferencing at pre-proceedings stage has gone? <ul style="list-style-type: none"> - Any challenges? - How were these mitigated? • Were there any common problems experienced by local authorities in implementing the model? If so, what were they? • In your view, was fidelity of the Daybreak model of Family Group Conferencing achieved? • What were the key successes for project implementation? • In your view, what impact has this project had on local authorities' practice? And any changes to Daybreak's practice? | |
| 4. Close interview | 2 minutes |
| <ul style="list-style-type: none"> • Is there anything else you would like to tell me about? • Do you have any questions? <p><i>End interview and thank participant for their time.</i></p> <p><i>Explain next steps of evaluation</i></p> <p><i>Offer to put on list to receive email when report is published in 2022</i></p> | |

Coram evaluation of Family Group Conferencing at pre-proceedings stage

Survey of Family Group Conference Coordinators – month 11 to 13

This survey is to help us understand the nature and delivery of Family Group Conferencing within local authorities at pre-proceedings stage as part of the *Supporting Families: Investing in practice* programme. More background information is available on the [study website](#). Please explain your answers fully in the comment boxes, where applicable, so that we do not need to contact you to ask for explanations.

1. Job title

2. Local authority

3. Relationship with local authority

- ☐ Employed -Permanent contract
- ☐ Employed -Fixed-term contract
- ☐ Contractor for Family Group Conferencing services
- ☐ Contractor -Other (please give details below)

Other (please specify)

4. For how long have you worked as a Family Group Conference Coordinator (in total, not just for this local authority)? Please give your answer in years and months

5. For how much of this time have you worked as a Family Group Coordinator at pre-proceedings stage? Please give your answer in years and months

6. Please describe the key steps in organising a Family Group Conference at pre-proceeding stage in this local authority?



7. Please describe any support you have received from the local authority in organising and delivering Family Group Conferences (such as FGC Managers, social worker support, administrator support)



8. At the start of the programme, did you receive the 1-day training from Daybreak on their model of Family Group Conferencing at pre-proceedings stage?

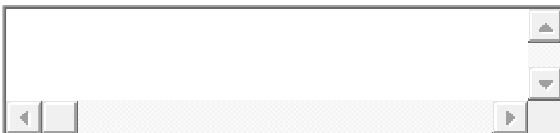
☐ Yes

☐ No

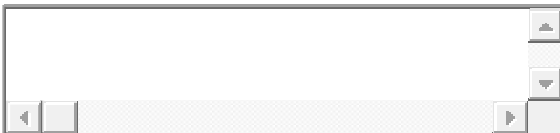
If so, how useful was the training?



9. Other than being timed at pre-proceedings stage, how did the Daybreak model differ from your usual practice (if at all)?



10. In practice, were any modifications needed to the Daybreak model of Family Group Conferencing at pre-proceedings stage? If so, what were they, and when were they made?



11. What were the main barriers from families to a successful Family Group Conference at pre-proceedings stage?



12. What were the main barriers from the local authority to a successful Family Group Conference at pre-proceedings stage?



13. In your experience (both from this local authority and from elsewhere), what is family engagement typically like around the Family Group Conference?



14. What would you say are the signs of a successful Family Group Conference?



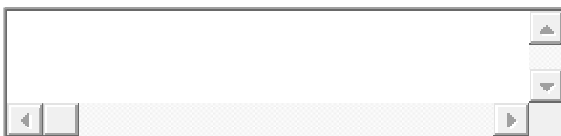
15. What impact would you say Family Group Conferences have on families' experience of pre-proceedings?



16. Do you think Family Group Conferences at pre-proceedings stage affect the outcome of the pre-proceedings process? By outcomes we mean, for example: care status, sustainment of outcomes, court diversion, time spent in care, perceived family inclusiveness in the process. Please explain your answer.



17. Do you have any other comments?



18. Email address:

You will not be named in any reporting. We may contact you for further information about your responses if necessary.

Thank you for taking the time to complete this survey. If you have any other comments or questions, please contact impactandevaluation@coram.org.uk



DAYBREAK FAMILY GROUP CONFERENCE

Date:

Programme:

Ref No:

FAMILY & FRIENDS FEEDBACK FORM

Now your Family Group Conference is over, we would be grateful if you could spare a few minutes to give us your views on your meeting so that we can improve the service

Before the meeting:

| | | |
|---|---|----------|
| 1 | Did the coordinator visit you? | YES / NO |
| 2 | Did you receive a leaflet about FGC? | YES / NO |
| 3 | Did you receive a written invitation? | YES / NO |
| 4 | Were you asked about who should be invited? | YES / NO |
| 5 | Did the coordinator discuss/explain the reason for the meeting? | YES / NO |

At the meeting:

| | | |
|---|--|----------|
| 6 | <p>Were the right people there?</p> <p>If not please tell us more:</p> | YES / NO |
|---|--|----------|

| | | |
|----|--|----------|
| 7 | Was the information at the start of the meeting clear? | YES / NO |
| 8 | Did you feel able to discuss issues and ask questions which might be difficult or sensitive? | YES / NO |
| 9 | Did you feel listened to at the meeting? | YES / NO |
| 10 | Did you have enough private time to discuss and plan as a family? | YES / NO |
| 11 | Were appropriate refreshments provided? If not please tell us more: | YES / NO |

About the person for whom the meeting was held:

| | | |
|----|---|----------|
| 12 | Did anyone support him/her to make sure their point of view was heard? | YES / NO |
| | If so, who was this person: Family or friend / Independent advocate / other professional Someone else (please state who): | |
| | Do you think it was helpful to have an advocate or supporter? | YES / NO |
| 13 | Were the views of the person for whom the meeting was held important in making the plan? If no, please explain: | YES / NO |

About the plan made at the meeting:

| | | |
|----|---|----------|
| 14 | Do you feel the plan addressed the questions and issues? If no, please tell us more: | YES / NO |
|----|---|----------|

| | | |
|----|---|----------|
| | | |
| 15 | <p>Do you think the person for whom the meeting was held will be safer as a result of the plan made?</p> <p>Please explain:</p> | YES / NO |
| 16 | <p>Do you think the person for whom the meeting was held will benefit in any other way?</p> <p>Please tell us more:</p> | YES / NO |

– And finally:

| | | |
|----|---|----------|
| 17 | <p>Would you recommend the FGC process to others?</p> <p>Please add any additional comments about your FGC:</p> | YES / NO |
|----|---|----------|

Please tell us if you did **not** like anything about the way in which Daybreak worked with your family, or any other comment about how we can improve.

This form will be used to improve the service to all families in the future.

We would like to ask your views about how we can improve Family Group Conferences. **May we telephone you?** If so, please complete your details.

Name Phone :.....

This information will not be passed to any other agencies.

Thank you. Please return in the pre-paid envelope provided to:- Daybreak FGC, Wessex House, Upper Market Street, Eastleigh, SO50 9FD

Family Group Conferencing at pre-proceedings stage: process evaluation

Topic guide for social worker initial interview for case study – month 6 to 8

| 8. Introduction | 5 minutes |
|--|------------|
| <p><i>Introduce yourself, Coram and the evaluation</i></p> <p><i>Explain interview purpose and timings (c. 30 minutes in no FGC/ 40 minutes if FGC)</i></p> <p><i>Check whether information sheet has been read; provide spare copy if not</i></p> <p><i>Check consent and reassure confidentiality</i></p> <p><i>Check if happy to have the interview recorded</i></p> | |
| 9. Background | 5 minutes |
| <ul style="list-style-type: none"> • Please can you tell me briefly about your role? <ul style="list-style-type: none"> - What is your job title? - When did you start working at the local authority? - What is your remit? - What is your role in relation to FGCs? • How many families who are in the trial are currently you working with/ have you worked with since the start of the programme? <ul style="list-style-type: none"> - Do they include both families referred to Family Group Conferencing and those who were not? <p><i>Emphasise that this interview is focused on the family in question (or both families, if the social worker has been working with both families in the case study local authority), and will only concern general experiences when explicitly stated.</i></p> | |
| 10. Family Group Conference for the family [if applicable] | 10 minutes |
| <ul style="list-style-type: none"> • What do you think families (in general) gain from the Family Group Conferencing process? (<i>Confidence, better relationships etc.</i>) • What do you think this family (in particular) has gained? <ul style="list-style-type: none"> - What do you think they found difficult or didn't work well for them? - How is this different to usual practice? - Have there been any unanticipated or unintended consequences? • What impact do you think the Family Group Conference has had on this family's progress? • Is the family plan that was discussed and developed at the Family Group Conference being used? If yes, is it working? If no, why not? | |

| | |
|---|-------------------|
| <ul style="list-style-type: none"> Has anything changed, either in the plan or for the family? | |
| 11. Usual practice for the family [For all] | 10 minutes |
| <ul style="list-style-type: none"> Can you briefly describe the usual practice this family has received? How has your usual practice worked? <ul style="list-style-type: none"> Were any changes made after the invention started? What impact do you think usual practice has had on this family's progress? What do you think could have been done differently in planning the family's care? <ul style="list-style-type: none"> If things could have been done differently, why were they not? | |
| 12. Final observations | 5 minutes |
| <ul style="list-style-type: none"> Is your local authority able to fund any other forms of additional advocacy? How have Family Group Conferences affected how you personally work with families at pre-proceeding stage (and in general)? | |
| 13. Close interview | 5 minutes |
| <ul style="list-style-type: none"> If there anything else you would like to tell me about? Do you have any questions? <p><i>End interview and thank participant for their time.</i></p> <p><i>Explain next steps of evaluation</i></p> <p><i>Offer to put on list to receive email when report is published in 2022</i></p> | |

Family Group Conferencing at pre-proceedings stage: process evaluation

Topic guide for social worker follow-up interview for case study – month 16-17

| | |
|---|-------------------|
| 1. Introduction | 5 minutes |
| <p><i>Introduce yourself, Coram and the evaluation (more background if this is a different SW from the previous interview)</i></p> <p><i>Explain interview purpose and timings (c. 25 minutes in no FGC/ 35 minutes if FGC)</i></p> <p><i>Check whether information sheet has been read; provide spare copy if not</i></p> <p><i>Check consent and reassure confidentiality</i></p> <p><i>Check if happy to have the interview audio recorded</i></p> | |
| 2. Background | 3 minutes |
| <ul style="list-style-type: none"> Please can you tell me briefly about your role? <ul style="list-style-type: none"> What is your job title? Have you worked with this family since pre-proceedings were initiated? <p><i>Emphasise that this interview is focused on the family in question, and will only concern general experiences when explicitly stated.</i></p> | |
| 3. Family Group Conference for the family [if applicable] | 10 minutes |
| <ul style="list-style-type: none"> What do you think this family (in particular) has gained from the Family Group Conference? What do you think they found difficult or didn't work well for them? How is this different to usual practice? Have there been any unanticipated or unintended consequences? What impact do you think the Family Group Conference has had on this family's progress and outcomes? Is the family plan that was discussed and developed at the Family Group Conference still being used? If so, is it still working? Has anything else changed, either in the plan or for the family? Do you think there is anything in the Family Group Conference process that could have been done differently for the family? <ul style="list-style-type: none"> If yes, what? How? | |
| 4. Usual practice for the family [For all] | 10 minutes |
| <ul style="list-style-type: none"> Can you briefly describe what practice offer this family has received? | |

- How has usual practice worked?
- What impact do you think usual practice has had on this family's progress and outcomes?
- Is there anything else that could have helped this family?

5. Final observations

2 minutes

- What impact (if any) do you think it has had that staff have known which families were referred for Family Group Conferences and which were not?
 - In terms of decisions about whether to proceed to court
 - In terms of outcomes for the child(ren)

6. Close interview

5 minutes

- If there anything else you would like to tell me about?
- Do you have any questions?

End interview and thank participant for their time.

Explain next steps of evaluation

Offer to put on list to receive email when report is published in 2022

Family Group Conferencing at pre-proceedings stage: process evaluation

Topic guide for follow-up interviews with local authority staff – month 15-17

| 1. Introduction | 5 minutes |
|---|------------|
| <p><i>Introduce yourself, Coram and the evaluation</i></p> <p><i>Explain interview purpose and timings, including fact that local authority is being paid to take part in the evaluation (c. 60 minutes)</i></p> <p><i>Check consent and reassure confidentiality (if phone interview, check if in private meeting room)</i></p> <p><i>Check if happy to have the interview audio recorded</i></p> | |
| 2. Background | 5 minutes |
| <ul style="list-style-type: none"> • Please can you tell me briefly about your role? <ul style="list-style-type: none"> - What is your job title? - When did you start working at the local authority? - What is your remit? - What is your role in relation to FGCs? | |
| 3. FGCs in the local authority | 15 minutes |
| <ul style="list-style-type: none"> • Were there any challenges to implementing FGCs at pre-proceedings stage? <ul style="list-style-type: none"> - Yes, what challenges? - How were these mitigated? • What were the key successes with project implementation? • How easy or difficult has it been to implement the Daybreak model of FGCs at pre-proceedings stage? <p><i>Interviewer to recap on baseline/application statement of current practice in the LA</i></p> <ul style="list-style-type: none"> • Were any changes made to practice as the project progressed? <ul style="list-style-type: none"> - Probe changes to the model of practice, staff • How has usual practice worked? <ul style="list-style-type: none"> - Were any changes made after the intervention started? • If applicable: The local authority's application for this programme stated that it uses Family Network Meetings. <ul style="list-style-type: none"> - What form do these take? Probe process, people involved, stage and timings etc - How do these differ from FGCs? Could a family receive both? - Has the offer of Family Network Meetings had any impact on FGC provision? • Families know whether they are referred for a FGC or not, as do staff. What, if any, difference do you think this has made to how staff work with families? | |

| | |
|--|-------------------|
| 4. Family experience (may not be applicable to all staff) | 10 minutes |
| <ul style="list-style-type: none"> • What do you think families gain from the FGC? (Confidence, better relationships etc.) <ul style="list-style-type: none"> - What do you think they found difficult or didn't work well for them? - How is this different to usual practice? - Have there been any unanticipated or unintended consequences? • Do you think FGCs have affected the pre-proceedings experience for children? <ul style="list-style-type: none"> - Probe: <i>connected persons/potential carers identified earlier, process has been faster, less stressful</i> • Did any families not receive an FGC that you think would have benefited from one? <ul style="list-style-type: none"> - Yes/no, why is that? - Conversely, did any families get allocated an FGC who you think it was not needed/inappropriate for? • Are you aware of any families having turned down an FGC? <ul style="list-style-type: none"> - If yes, what were their reasons for this? | |
| 5. Families and placement stability | 10 minutes |
| <ul style="list-style-type: none"> • Please can you tell me about any differences you have seen between families that accept the FGC offer and those who have not received one? • What kinds of solutions do FGCs generally come up with? <ul style="list-style-type: none"> - Do you know what happens to the children afterwards? - What do you see? (E.g. stability, relationships, sense of identity). - Do you have any examples? • Have there been families for whom it might have been better not to have had the FGC? • Has there been a difference between the type of placement, and placement stability, for those children who have had an FGC and those who have not? | |
| 6. Impact | 10 minutes |
| <ul style="list-style-type: none"> • What impact has this project had on practice here in [local authority]? <ul style="list-style-type: none"> - Probe: whole-of family way of thinking/working, focusing more attention on getting pre-proceedings right, ways the LA uses other kinds of meetings with families, changes to usual practice • And what perceived impact has it had on families (both intervention and control group) and their outcome? <ul style="list-style-type: none"> - Probe outcomes: care status, perceived inclusiveness, sustainment of outcome, court diversion, time spent in care, any other outcomes | |
| 7. Close interview | 5 minutes |
| <ul style="list-style-type: none"> • If there anything else about FGCs in your local authority that you would like to tell me about? | |

- Do you have any questions?

End interview and thank participant for their time.

Explain next steps of evaluation

Offer to put on list to receive email when report is published in 2022

Family Group Conferencing at pre-proceedings stage: process evaluation

Topic guide for interviews with parent / carer / other adult family members – month 6-8

Notes for interviewer: this interview much be approached sensitively. Do not insist participants answer a question if they appear reluctant. If participant appears upset at any point, pause the interview and ask if they would like to continue. If participant appears very upset or distressed, close the interview and check if they have anyone they can call or speak to, or offer details of Samaritans helpline (116 123) and Mind helpline (0300 123 3393).

| Section | Timings / notes |
|---|-----------------|
| Introduction | |
| <ul style="list-style-type: none"> Researcher to introduce self: <i>Thank you for speaking with me today so I can hear your views about [name of young person's] care and what work their social worker [name of social worker] is doing with them and your family. We already spoke to [name of social worker] but we want to hear your own story. Have you read the information sheet, or had this read to you? Would you like me to read it to you?</i> Interview length: <i>This will take about 45 / 60 minutes but we can stop at any time.</i> Confidentiality: <i>I won't tell anyone else what you tell me – unless you tell me anything which suggests that you or someone else may be at risk of serious harm. What you tell us will not be reported back to your local authority.</i> Consent: <i>We will be talking about the support your local council and [social worker] have provided you and your family and how this has helped or not helped.</i> You don't have to answer anything you don't want to, can stop at any time, and do have to not say why. There are no right or wrong answers. Reporting: <i>We will be writing a report with our findings from this research, but no names will be used. No one will not be able to identify you from what you tell us. Are you OK to start the interview?</i> <p>CHECK: consent form has been signed</p> <ul style="list-style-type: none"> Is it OK if I record what we say? If unsure explain why/explain data security safeguards/offer to take notes instead <p>CHECK: <i>do you have any questions before we start?</i></p> | 5-10 minutes |
| Background: all participants | |
| <p>a) Please can you tell me a bit about yourself? (prompts: occupation, where they live and who with)</p> | 5 minutes |

| Pre-proceedings and care-as-usual: all participants | |
|--|------------|
| <p>a) When did you receive the pre-proceedings letter from [local authority] / when did pre-proceedings start?</p> <p>b) Did anyone explain to you what is pre-proceedings and what would happen?</p> <p>c) What support have you received from your LA? - Prompt: you personally? other members of the family? - If applicable: <i>we will discuss the family group conference later, but would like to know more about any other support you received from the local authority or social worker</i></p> <p>d) Do you think you were treated fairly?</p> <p>Care-as-usual specific questions: ask participant about the usual practice model as outlined in the local authority baseline data</p> <p>e) How helpful or unhelpful has this support been to your family? - Probe: why? - How much support was provided to you to explain what was being asked of you? - How much support was provided to you to explain the concerns professionals had in respect to your family?</p> | 15 minutes |
| If family was referred for a FGC and received one | |
| <p>a) When did the family group conference take place?</p> <p>b) How was the family group conference organised? - Who explained what it was to you (social worker, family group conference coordinator) - When did the coordinator get in touch with you? - Was the purpose of the meeting clearly explained? - Did you have the opportunity to ask questions?</p> <p>c) Who attended the family group conference? - How was it decided who would attend?</p> <p>d) Please can you tell me about your experience of the family group conference? - What happened at the family group conference? - What went well during the family group conference? - What did not work well? Why?</p> <p>e) Did you find the family group conference helpful or unhelpful for your family? Why?</p> | 15 minutes |

| | |
|---|--|
| <p>f) What has happened to the family plan agreed at the family group conference?</p> <ul style="list-style-type: none"> - What changes has it made e.g. to your child's care? - How is the plan working so far? | |
| If family was referred for an FGC and did not receive one | |
| <p>a) The local authority referred your family for a family group conference. Why did this not take place / Do you know why this did not take place?</p> <ul style="list-style-type: none"> - Probe: was it your decision, someone else's? - What were the barriers to this happening? Probe: finding a time/location, getting other family/friends to attend <p>b) <i>If family chose not to have a FGC:</i> What was it that did not appeal to you / other family members? Could anything have changed your / their mind?</p> | 5 minutes |
| Overall local authority contact: all participants | |
| <p>a) How would you describe how your local council has worked with you and your family since [month of pre-proceedings letter]?</p> <p>b) Were you able to attend all the meetings professionals asked you to attend?</p> <ul style="list-style-type: none"> - How able did you feel to share your thoughts with professionals during meetings? <p>c) How much do you think professionals have listened to what you have to say?</p> <ul style="list-style-type: none"> - How involved do you feel you have been in what will happen to [name]? - How involved have other family and friends been? <p>d) What impact do you think the support you have received from the council will have on what happens next?</p> <p>e) Is there any other support or information that you think would be helpful to receive?</p> <p>f) Is it clear what will happen next (at the end of pre-proceedings)?</p> | 15 minutes |
| Close interview | |
| <p>a) Is there anything else important that we haven't discussed that you would like to tell us about?</p> <p>b) Do you have any questions for me?</p> <p><i>Thank participant for their time and check they are ok to end the interview</i></p> <p><i>Explain next steps of evaluation</i></p> | <p>2 mins</p> <p>Close interview and thank</p> |

| | |
|---|--|
| <i>Offer to put on list to receive email when report is published in 2022</i> <i>Hand over envelope containing voucher</i> | |
|---|--|

Family Group Conferencing at pre-proceedings stage: process evaluation

Topic guide for interviews with children/ young people – month 6-8

Notes for interviewer: this interview must be approached sensitively. Do not insist participants answer a question if they appear reluctant. If participant appears upset at any point, pause the interview and ask if they would like to continue. If participant appears very upset or distressed, close the interview and check if they have anyone they can call or speak to; refer to phone number of Childline helpline (0800 1111). Childline is available for anyone under 19 years of age.

| Section | Timings / notes |
|--|-----------------|
| Introduction: all | |
| <ul style="list-style-type: none"> Researcher to introduce self: <i>Thank you for speaking with me today so I can hear your views about your care and what work [social worker] is doing with you and your family. We already spoke to [name of social worker] but we want to hear your own story. Have you read the information sheet, or had this read to you? Would you like me to read it to you?</i> Interview length: <i>This will take up to 30 minutes but we can stop at any time.</i> Confidentiality: <i>It's important that you know that I won't tell anyone else what you tell me – unless you tell me anything which suggests that you or someone else may be at risk of serious harm. Does that make sense?</i> Consent: <i>We will be talking about your family and [social worker] and how they have helped you and your family. Is that ok? You don't have to answer anything if you don't want to and you don't have to say why. There are no right or wrong answers.</i> <p>Reporting: <i>We will be writing a report with our findings from this research, but no names will be used. Are you OK to start the interview?</i></p> <p>CHECK: if the young person is aged 16+, ask if they consent, if so sign the consent form. If the child is aged 15 or under, consent from their guardian/responsible adult must be collected (signed consent form).</p> <ul style="list-style-type: none"> Is it OK if I record what we say? If unsure explain why/explain data security safeguards/offer to take notes instead <p>CHECK: <i>do you have any questions before we start?</i></p> | 5-10 minutes |
| Background: all | |
| <ul style="list-style-type: none"> <i>Aim to build rapport, start with easy question</i> <p>a) To start please could you tell me a little about yourself? Could you tell me about your school? And what do you like to do outside of school, any hobbies?</p> | 3 minutes |
| Usual practice: all | |
| <p>a) Does your social worker, [name] talk to you about your situation?</p> <ul style="list-style-type: none"> Do you feel that they listen to you? Why or why not? <p>b) What sort of things have they helped you with?</p> | 5 minutes |

| | |
|--|---------------------------|
| <p>c) What could they do better?</p> <p>d) Do you think you were treated fairly?</p> | |
| <i>If child or young person attended a FGC meeting</i> | |
| <p>a) Did you go to the Family Group Conference? This was a meeting with lots of people in your family [earlier this month/last month in (venue)] and they talked about what will happen to you in the future.</p> <p>b) Did anyone explain to you what would happen during the FGC?</p> <p>c) What happened at the meeting/FGC?</p> <ul style="list-style-type: none"> - Did you have a chance talk and say anything? - Do you think people listened to you? <p>d) Do you think the FGC/meeting was helpful for you and your family? Why?</p> <p>e) What has changed since the FGC/meeting?</p> <ul style="list-style-type: none"> - Probe their care, where they are living, different family members helping more <p>f) How much of a say did you have in these changes?</p> | 5 minutes |
| <i>If there was no FGC meeting</i> | |
| <p>a) Has anything changed about your situation recently?</p> <ul style="list-style-type: none"> - Probe their care, where they are living, different family members helping more <p>b) How much of a say did you have in these changes?</p> | 2 minutes |
| <i>If there was a FGC meeting but the child or young person did not attend</i> | |
| <p>a) Did you go to the Family Group Conference? This was a meeting with lots of people in your family [earlier this month/last month in (venue)] and they talked about what will happen to you in the future.</p> <p>b) Do you think the FGC/meeting was helpful for you and your family? Why?</p> <p>c) Has anything changed about your situation recently?</p> <ul style="list-style-type: none"> - Probe their care, where they are living, different family members helping more <p>d) How much of a say did you have in these changes?</p> | 4 minutes |
| Close interview | |
| Is there anything else important that you would like to tell us about? | 2 mins Close interview |

| | |
|--|----------------------|
| <p>What are your plans for this week? [refer back to hobbies etc., finish the interview on a positive note].</p> <ul style="list-style-type: none"> • <i>Thank participant for their time and check they are ok to end the interview</i> • <i>Explain next steps of evaluation</i> • <i>Offer to put on list to receive email when report is published in 2022</i> • <i>Hand over envelope containing voucher and phone number of helpline</i> | <p>and thank</p> |
|--|----------------------|

Consent form for interviews with adult family members

Please tick the boxes

| | Yes | No |
|--|--------------------------|--------------------------|
| I have read the information sheet or have had someone read it to me | <input type="checkbox"/> | <input type="checkbox"/> |
| I have been able to ask questions about the information sheet | <input type="checkbox"/> | <input type="checkbox"/> |
| I understand that my participation is voluntary and I can stop the interview at any time without giving a reason | <input type="checkbox"/> | <input type="checkbox"/> |
| I agree that the information collected (what I say) can be used for reports/articles or at conferences/events. No names will be used and all information will be anonymised (cannot identify someone) | <input type="checkbox"/> | <input type="checkbox"/> |
| I understand that my data will be stored securely | <input type="checkbox"/> | <input type="checkbox"/> |
| I understand that the information I provide will be confidential unless the researcher has concerns about my or another person's safety or wellbeing. If this happens, the information will be passed on to the relevant professionals | <input type="checkbox"/> | <input type="checkbox"/> |
| I understand that I have the right to withdraw from the evaluation study even after taking part, by contacting research@coram.org.uk by the end of October 2021 | <input type="checkbox"/> | <input type="checkbox"/> |

.....
Name

.....
Signature

.....
Date

Consent form for interviews with young people aged 16+

Please tick the boxes

| | Yes | No |
|--|--------------------------|--------------------------|
| I have read the information sheet or have had someone read it to me | <input type="checkbox"/> | <input type="checkbox"/> |
| I have been able to ask questions about the information sheet | <input type="checkbox"/> | <input type="checkbox"/> |
| My participation is voluntary and I can stop the interview at any time without giving a reason | <input type="checkbox"/> | <input type="checkbox"/> |
| I agree that the information collected (what I say) can be used for reports/articles or at conferences/events. No names will be used and all information will be anonymised (cannot identify someone) | <input type="checkbox"/> | <input type="checkbox"/> |
| I understand that my data will be stored securely | <input type="checkbox"/> | <input type="checkbox"/> |
| I understand that the information I provide will be confidential unless the researcher has concerns about my or another person's safety or wellbeing. If this happens, the information will be passed on to the relevant professionals | <input type="checkbox"/> | <input type="checkbox"/> |
| I understand that I have the right to withdraw from the evaluation study even after taking part, by contacting research@coram.org.uk by the end of October 2021 | <input type="checkbox"/> | <input type="checkbox"/> |

.....
Name

.....
Signature

.....
Date

Consent form for interviews with young people aged 10-15

Please tick the boxes

| | Yes | No |
|---|--------------------------|--------------------------|
| I have read the information sheet or have had someone read it to me | <input type="checkbox"/> | <input type="checkbox"/> |
| I have been able to ask questions about the information sheet | <input type="checkbox"/> | <input type="checkbox"/> |
| I understand that their participation is voluntary and I can stop the interview at any time without giving a reason | <input type="checkbox"/> | <input type="checkbox"/> |
| I agree that the information collected (what they say) can be used for reports/articles or at conferences/events. No names will be used and all information will be anonymised (cannot identify someone) | <input type="checkbox"/> | <input type="checkbox"/> |
| I understand that my data will be stored securely | <input type="checkbox"/> | <input type="checkbox"/> |
| I understand that the information I provide will be confidential unless the researcher has concerns about their or another person's safety or wellbeing. If this happens, the information will be passed on to the relevant professionals | <input type="checkbox"/> | <input type="checkbox"/> |
| I understand that I have the right to withdraw from the evaluation study even after taking part, by contacting research@coram.org.uk by the end of October 2021 | <input type="checkbox"/> | <input type="checkbox"/> |

.....
Name of young person

.....
Date

.....
Name of responsible adult

.....
Signature

Researcher use

| | Yes | No |
|---|--------------------------|--------------------------|
| Has the young person provided verbal consent to participate in their own interview? | <input type="checkbox"/> | <input type="checkbox"/> |

Evaluation by children's charity Coram

Information sheet for adult family members

We would like you to take part in our evaluation study. Before you decide, it is important that you understand what the evaluation is and what it would involve for you. Please take time to read this information, and discuss it with others if you wish. If you would like more information or if anything is unclear, please contact Coram (contact details at the bottom of this leaflet).

What is the evaluation about?

Coram, a children's charity, are running an evaluation project to look at the different ways councils work with families during care pre-proceedings and how this affects the chances that children live with family or friends, or go into care. We would like to speak with families like yours in England to find out more about the support from your council. We aim that this project will help to improve public services in future for all children and families.

We have been funded to carry out this work by What Works for Children's Social Care. This project has received ethical approval from Coram's research ethics committee and from your council.

Your council is helping us to arrange interviews with families, but your participation in the evaluation is voluntary. Coram does not work for your local council and they will not find out what you tell us for this evaluation.

Who is Coram?

Coram is a children's charity based in London. We work with lots of young people and help to support families. More information about Coram can be found here: www.coram.org.uk

The research team at Coram is running this work. Coram is not part of your council.

How would I be involved in the evaluation?

You are invited to take part in the evaluation because you have been involved with, or care for a child who has been involved in care pre-proceedings. The research team at Coram would like to hear about your experience of pre-proceedings and what support the council has provided you and your family.

A Coram researcher will arrange a time to visit or call you for a 1:1 interview. This will be at a time and location convenient for you (this could be at your home) and last up to an hour. The conversation would be relaxed and you do not need to answer all the questions the researcher asks if you do not want to.

As a thank you for taking part, you will receive a £30 voucher from Coram.

Who else will you speak to?

We may speak with another adult member of your family, your child / the child you care for, and their social worker. This can be on the same day, but ideally we would speak with them separately to you. We have another leaflet for children and young people that gives them more information about the evaluation.

Will what I've said be shared with other people?

No. What you say to the researcher is confidential. The only time the Coram research team would share your information with other people is if you say something that suggests that you, or someone else, is at risk of harm. The researcher will let you know when they are going to share information with someone else.

The Coram researcher will make written notes about what you say. These notes will not have your name on them. The discussion will be recorded with your permission.

How will what I have said be used in the evaluation?

We will write a report at the end of the project in 2022 based on your answers and our analysis of data and other evidence. No names or identifying information will be used.

What if I have questions?

The Coram research team are happy to answer any questions. You can contact us by:

- calling 020 7520 0365 (week days, office hours 9am – 5pm)
- emailing impactandevaluation@coram.org.uk
- writing to Coram Impact & Evaluation, 41 Brunswick Square, London WC1N 1AZ.

Coram's research team promise

- What you tell us is private. We would only share what you say with others if we were worried about your, or someone else's, safety
- You do not have to answer the questions if you do not want to
- All information you give us will be stored securely and your name will not be used
- You can withdraw from the evaluation at any time without giving us a reason
- If you do not want us to collect and analyse your family's data for the project, please contact us using the contact details above. If you do this by the end of 2021, your data will not be included in any later analysis or reports.
- Your involvement in the research will not affect the support you receive from the local council or other services.

I'm happy to take part, what do I need to do?

That's great news! Next, **please get in touch with us on the any of the contact details above** or let your main contact at your council know and they can contact us. Someone will then get in touch to arrange a time for Coram researchers to visit you and your family.

Your feedback will help to improve support that councils provide to families who enter pre-proceedings.

Evaluation by children's charity Coram

Information sheet for young people

We would like to speak with you to find out more about the support you and your family have received from your social worker and council.

Before you decide if you would like to speak with us, please read this leaflet which explains what our research is about and what you would need to do. You can talk about this leaflet with other people if you want to, such as a family member.

If you have any questions or would like more information about this research, please speak contact Coram (our details are at the bottom of the next page).

What is the evaluation about?

Coram, a children's charity, are speaking with families and young people to understand the different ways councils work with families and to decide who should look after young people. We hope that this project will help to improve the support for other young people and their families.

Who is Coram?

Coram is a children's charity based in London. We work with lots of young people and help to support families. More information about Coram can be found here: www.coram.org.uk

The research team at Coram is running this work. Coram is not part of your council and we do not work with your social worker.

How would I be involved in the evaluation?

A Coram researcher will arrange a day and time to visit or call you and your family. We would like to speak with you to hear about your experiences. This can be by yourself or with an adult you trust.

This conversation would last for up to 30 minutes. The conversation would be relaxed and you do not need to answer all the questions the researcher asks if you do not want to.

As a thank you for speaking with us, you will receive a £15 voucher from Coram.

Who else will you speak to?

We will speak with your parent/carer and or other members of your family, and your social worker. We are also speaking with other young people and families like yours in England.

Will what I've said be shared with other people?

No. What you say in to the researcher is private. The only time the researcher would share your information is if you say something that suggests that you, or someone else, is at risk of harm. The researcher will let you know when they are going to share information with someone else.

The researcher will make written notes about what you say. These notes will not have your name on them. The interview will be audio recorded with your permission.

How will what I have said be used in the evaluation?

We will write a report at the end of the project in 2022 based on your answers and our analysis of data and other evidence. No names will be used in any reporting.

Coram's research team promise

- What you tell us is private. We would only share what you say with others if we were worried about your, or someone else's, safety
- You do not have to answer the questions if you do not want to
- All information you give us will be stored securely and your name will not be used
- You can withdraw from the evaluation at any time without giving us a reason
- If you do not want us to collect and analyse your family's data for the project, please contact us using the contact details below. If you do this by the end of 2021, your data will not be included in any later analysis or reports.
- Taking part in the research will not affect the support you receive from the local council or other services.

What if I have questions?

The Coram research team are happy to answer any questions. You can contact us by:

- calling 020 7520 0365 (weekdays, office hours 9am – 5pm)
- emailing impactandevaluation@coram.org.uk
- writing to Coram Impact & Evaluation, 41 Brunswick Square, London WC1N 1AZ.

I'm happy to take part, what do I need to do?

That's great news! Please let your parent or carer or social worker know and they can contact us.

Your feedback will help to improve support from your council so that they can help families and young people like you in the best way possible.

Fieldwork: Family interviews

Date:

Location:

Time:

Attendees:

| Activity | Identified risks | Risk rating | Potential impact/ outcome | Risk management / actions |
|----------|------------------|-------------|------------------------------|------------------------------|
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Risk Assessment: Manager's Action Plan

| Action required | By who | Risk level | Target date | Comments | Date completed |
|-----------------|--------|------------|-------------|----------|----------------|
| | | | | | |
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| | | | | | |
| | | | | | |

Managers signature:

Position: Head of Impact and Evaluation

Date:

Review due date:

Actual review date:

Additional information:

Annex: table to record any protocol deviations

Any changes to or deviations from this protocol after its publication will be recorded below. Coram will share the table with the project management group at each meeting, if any additions have been made to it since the last meeting.

| Nature of deviation | Date | Reason |
|---|----------------|---|
| References to 24 original sample members edited to 22 | 14 April 2020 | Drop out of Blackpool and Merton from the sample |
| References to start date of 1 April 2020 edited, and consequential edits | 14 April 2020 | Delay of project start due to Covid-19 pandemic |
| Addition of data fields to Annex 2, (asking how many attend FGC, of which, how many in-person) | 1 July 2020 | To enable tracking of impact of Covid-19 pandemic on FGC delivery |
| Addition of HHJ Carol Atkinson to list of advisors thanked in acknowledgements | 15 July 2020 | Addition of HHJ Carol Atkinson to project advisory board |
| Full details of process evaluation plan added as an annex | 26 August 2020 | Final approval given to plan by Coram trustees |
| Postcode district edited to postcode in table 'child outcomes data fields we will request from local authorities' | 21 June 2021 | To enable finer-grained deprivation analysis |
| Minor edit to description of fidelity assessment exercise | 21 June 2021 | To reflect latest plans for this exercise |