





An Evaluation of the

Bright Spots

Programme

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April 2021

Contents

Acknowledgements	3
Chapter 1 : Introduction	4
Chapter 2 : Taking part	6
Motivation for taking part in Bright Spots	7
Undertaking the surveys	8
Chapter 3 : Policy and practice changes	.13
Relationships	.14
Resilience	.22
Rights	.26
Recovery	.29
Chapter 4 : Valuing Children and Young Peoples' Voice	33
Children and young peoples' participation	.34
Sharing findings and recognising indicators of low well-being	.39
Supporting children's subjective well-being	.43
Chapter 5 : Drivers, enablers, and barriers to improvement	.45
Bright Spots of practice	.45
Barriers to achieving change	.47
Other factors influencing improvements	.48
Evidence of change in LAs on the outcomes identified in the logic model	.49
Chapter 6 : Discussion	.50
Appendix 1 Method	.56
Appendix 2 Logic Model	.62
Appendix 3 Bright Spots Domains and Indicators	.63

Acknowledgements

We would like to thank the six local authorities that took part in the evaluation especially their staff and the young people that took part in interviews and focus groups. Thanks also to the Coram Voice team, Linda Briheim-Crookall, Susanna Larsson, Jenny Humphreys, Claire Baker and Rosie Miller.

We are also grateful for the funding from the Hadley Trust that made the evaluation possible.

Chapter 1 : Introduction

Summary

The evaluation focused on understanding whether involvement in the Bright Spots Programme had directly or indirectly led the local authority (LA) to make changes to their policies and influenced practice.

Method: Collaborative outcomes reporting (Dart and Roberts 2014); a participatory approach with six steps beginning with the development of a logic model.

Sample: Six English local authorities took part.

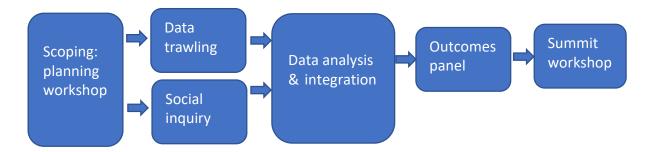
Data Collection: Information came from three sources: (1) documents evidencing how the LAs had incorporated changes from Bright Spots into policy, (2) interviews with senior managers, social workers and professionals, and (3) from focus groups with children and young people in four of the six LAs. The evaluation took place between September 2019 and November 2020.

Data analysis: Using all the information, a spreadsheet was created to build a picture of which of the outcomes from the logic model had been met by LAs and where there were gaps.

The purpose of the evaluation was to understand whether involvement in the Bright Spots Programme had directly or indirectly contributed to changes in local authority (LA) policies and practice for children in care. Ethical approval for the evaluation was granted by the Ethics Committee at the University of Oxford (R66551/RE001). The methodological approach taken was a participatory one of collaborative outcomes reporting¹. It is a mixed method approach with six steps (more details of the method are in Appendix 1).

¹ Dart, J., & Roberts, M. (2014) Collaborative Outcomes Reporting. Better Evaluation. Retrieved from <u>http://betterevaluation.org/plan/approach/cort</u>

The Six Steps of Collaborative Outcome Reporting



The first step involved developing a logic model during a planning workshop attended by the Bright Spots team from Coram Voice and the Rees Centre, University of Oxford (Appendix 2). The next steps of social inquiry and data trawling took place in six LAs where 57 social care professionals were interviewed, and documents and policy papers were collected that corroborated or challenged the interview findings. We also held focus groups in four of the six LAs involving 19 young people to understand whether, from their perspective, they had seen the survey findings and had noticed changes. We were unable to complete the final two stages (the outcome panel and summit workshop) due to Covid-19 lockdowns and restrictions.

All the data were examined against the intended outcomes of the logic model and a table mapping the available evidence against the outcomes was created (page 49).

The following chapters report the findings, beginning with why LAs wanted to participate in the Bright Spot Programme and their experience of taking part.

Chapter 2 : Taking part

Summary

Motivation: LAs participated in the Bright Spots Programme because:

- A core principle of the Programme is the focus on what children and young people say about their lives and what is important to them
- It is underpinned by academic research and linked with a University
- The analysis and reports are independent enabling the LA's results to be benchmarked against other LAs
- The LAs' own performance can be compared over time if the survey is repeated.

Achieving successful surveys: LAs had better response rates when they spent time preparing for the survey. For example, carrying out a mapping exercise to identify how they could get the survey to all their children. For a successful survey, LAs had to identify when, where, and with who, the child would complete the survey.

Some local authorities held events where young people were encouraged to complete the survey alongside fun activities or eating together. These events were popular with the young people who attended the evaluation focus groups.

Difficulties arose when: LAs did not complete the preparatory work before starting the survey; children were asked to complete other surveys at the same time; the LA had a focus on reaching target sample sizes and lost sight of the needs of the child. Children were reported to have been distressed when the adult chosen by the LA to help the child complete the survey was not well known to them.

All LAs are required to ascertain the voices of children and young people in their care and they use various mechanisms to do so, such as Children in Care councils. So, we were interested in what had motivated professionals to take part in the Bright Spots Programme alongside or instead of their in-house methods. We also wanted to know what they had found helpful and how the Programme might be improved.

Motivation for taking part in Bright Spots

Senior managers and those who had been part of the initial planning and survey set-up meetings in LAs were asked what had motivated their LA to take part. They stated they had taken part because: the child's voice was central to the Programme, the Programme was underpinned by academic research and linked to a University, they liked the independence of analysis and reports, and they could compare their own LA performance each year and benchmark against other LAs. Managers said:

There's nothing like the children's voices. We can pretend we know, and we can speak to foster carers and we can speak to schools ... but children's voices are the most important. (Service Leader)

Because it sits outside of [the LA] completely external to the work that we do. I think it gives a much more genuine opportunity to get young people's views really, and a better sense of the things that we should be doing more of. (Leaving Care Team Leader)

We looked at Bright Spots and thought it's probably the best way to systematically get all the views of our children and young people or as many as we could possibly get. And the benefits of that is what comes with it, so it's not just the survey: - it's the report, it's the links with wider research against your peers. ... To be able to have the reports and stuff produced was excellent. The fact that it was a well-recognised scheme ... it had university backing... the detail and the practice behind the survey itself, was what appealed as well. (Service Leader)

An acting service leader, who had been involved during the piloting of the surveys described how the use of children's focus groups to develop the content of the Bright Spots surveys had made it meaningful for them:

It's just much more real for me. You can tick as many boxes as you want from a kind of political and process perspective, but actually, it's about the impact on the children. I was there at the very beginning and I loved it. (Acting Service Leader)

Professionals also spoke about the importance of being able to compare their performance and progress against that of other local authorities in their Bright Spots report. The report provides a comparison of an individual LA's results against the average response of looked after children in other participating LAs and to peers in the general population. Where the LA's performance is better, a Bright Spot appears in the report and where the results are poorer, the finding is marked so that LAs can easily see where improvement is needed. An Assistant Director thought that the comparative results were a key reason their LA had chosen to use the survey:

I think that is another thing that's really helpful ... the way that when you get that report it does that cross-referencing and comparative stuff. I like the fact that obviously the more local authorities that take it up, you get that benchmark across other local authority and care populations. So, we have done various kind of survey type work ... but not anything that's ever compared to other local authorities. (Assistant Director)

Interviewees were asked about whether the concept of subjective well-being was one they felt comfortable with and promoted. Workers from two different LAs said:

It gives you that evidence base on how children feel, which is the true measure on how you're doing as a local authority isn't it? (Development Officer)

It's all about their well-being ... and making sure that they are ok, because sometimes young people don't always say how they feel. (Team Leader, Pathway Team)

Undertaking the surveys

Part of the preparation for the survey involves the setting up of a working group where staff from Coram Voice meet with the local authority to help plan their local approach. While working flexibly, certain parameters are always set. The survey is anonymous, all questions are optional, and children should be asked whether they would like to take part. Each local authority is asked to identify 'trusted adults' who can help children (especially younger children) to complete the survey. These trusted adults should not be the children's social workers or carers because there are questions about them in the survey and the intention is for children to be able to complete the survey honestly.

Each of the LAs in the evaluation carried out the survey slightly differently, with differing emphases and expectations. Some worked through the virtual headteacher and others

through the independent reviewing officers (IROs). When facilitated through the virtual headteacher, the surveys were completed by children in school and when using the IRO service, children completed before their care review meeting.

The LAs that used the IROs thought they were able to reach children who were usually more difficult to engage, such as children placed outside of the LA or in residential settings. Other LAs used a combination of working through the virtual schools with surveys being completed in school supplemented with IROs and other staff such as deputy team leaders and participation workers helping to reach those not in education or placed outside of the LA.

Interviewees spoke of realising, particularly the first time they took part, that to reach <u>all</u> their children was an undertaking and required everyone within the LA to be aware of the survey and to promote it. One service leader spoke about the first time they took part:

I think the first time we did it, whilst there was a number of people sat around the table, I don't think people envisaged how much work would be involved from our part. I think we just thought ... there's an organisation, they're going to get our children's voices and give us some information that we can then act upon. But it wasn't quite like that. I mean certainly, it was definitely valuable and as valuable as I thought initially, but our return rate to start was very poor, and that's because we didn't put in as much effort, as we could have done. (Service Leader)

The preparations needed for a successful survey were not always achieved. For example, in some LAs, foster carers were not informed and voiced concerns when children came back from school talking about the survey or specific social work teams were not engaged. Social workers could be sceptical as one commented, *"Initially it was like, 'Oh my goodness, more questions for our young people!'"* There were concerns about the multiple questionnaires some children were being asked to complete, particularly in LAs that ran Bright Spots alongside other surveys. Some staff within LAs seemed to become too focused on meeting targets for the percentage of children completing the surveys and lost sight of the child. Professionals gave a few examples of children being pressured to complete the survey or being taken out of class to complete it. A social worker said:

I had one child who said to me, "Do you know what I've just done [LA survey] and this other new thing [Bright Spots] you've brought in, and I've just answered 125 questions." They've had to do [LA survey] at the same time as Bright Spots because of the timing... and that's a lot of questions for a young person. (Social Worker, Children Looked After Team)

Another LA took a different approach, emphasising that children's participation was voluntary, and still achieved a high response rate. In that LA, the IRO would remind the child about the survey but not help them complete it (unless requested).

As IROs we would go outto young people and just gently say, "You know that form is there to be filled in." But we can't do more than that, we can only say. (Team Leader, Independent Reviewing Team)

The interviews also highlighted that in LAs where workers sat with the young person to support them to complete the survey, the choice of which adult was significant. The Bright Spots surveys were designed for a reading age of 7 years, but, as the lowest age range for completing the survey is four years old and other children have special educational needs, it was expected that help would be needed. The guidance given to LAs is that a child should be able to choose a trusted adult, who is not their carer or social worker, to help them. An IRO explained how she supported children who she worked with, but the LA also hired an additional person to help, and this person was asked to support children she did not know. This led to some problems.

The IRO first described her own experience: *It was much easier doing it with the children* [on my caseload]. The children felt completely fine and there were no problems about explaining why we were there... generally, the children were quite comfortable.

She then compared her experience to that of a colleague: *She'd go and visit some children that had never met her before, [but] she didn't have the context of the background... and in more than one case the children were distressed because some of these questions were difficult.* (Team Leader Independent Reviewing Team)

The second time around, most of the LAs were better prepared for running a survey. Some undertook a mapping exercise and significant preparations before the surveys went 'live', listing all their children and identifying who could support the child to complete the survey.

We worked as a group really to look at who would be the most appropriate people to do the questionnaire. I think that was really important, in thinking, "What setting do we think they [children] would do it?" (Participation Manager)

Other LAs had found creative ways of encouraging young people to complete the survey. In two LAs, participation teams were involved in running events where they had activities with staff members available if help was needed to complete the surveys. The young people who attended the evaluation focus groups stated that they had enjoyed these events especially when food was provided. Events such as these might be a useful way of increasing the survey response rates.

Professionals recognised that some of the children and young people who did not complete the survey were also the ones most likely to be struggling and have low well-being. One social worker gave an example of a young person who had screwed up the invitation letter and put it in the bin.

That particular young person who had screwed up the paper is actually out of full-time education. He's not actually engaging with his foster carers at the moment. So, the likelihood is he wouldn't have had ... the support for him to complete it. (Social Worker)

Interviewees gave examples of how they had tried to reach all their young people. For instance, in one LA, a social worker described how the deputy team leader ensured that children and young people who were placed outside of the LA were visited and supported to complete the survey if they wanted to participate.

Three of the four LAs who had run the survey more than once had an improved response rate the second time they ran the survey. However, one LA had a reduction in the percentage of their young people completing the surveys. Teachers in that LA expressed concerns that children were being asked to leave the class to complete the survey. A lot of schools said they ... didn't have a mechanism where they could get children to complete it without identifying those children as different, and so, therefore, they didn't feel it was the right environment to be doing that. (Virtual Head teacher)

It should be noted that the Coram Voice guidance to LAs is that children should not be taken out of class just to complete the survey. There was a rather different view from the participation worker in the LA who felt that the lower response rate was due to a range of factors, including a difficult relationship with a school that had a high number of children looked after, and some competing priorities, which reduced the time he had available to support the survey. This example shows the importance of prior planning to ensure that the professionals agree on how the survey is going to be carried out and that managing the survey is a team effort rather than relying on one person.

Chapter 3 : Policy and practice changes

LA staff were able to identify policy and practice changes that had resulted either directly or indirectly from their involvement in the Bright Spots Programme. Some changes were small and easy to implement whereas others were bigger and strategic. The participation workers and the Children in Council were often at the heart of considering the survey findings and setting the priorities for action.

Relationships: LAs focused on the recruitment and retention of social workers and some changed their team structure to reduce changes of social worker. Involvement in Bright Spots indirectly led to new models of practice being introduced that were intended to improve relationships between social workers, foster carers, and children. Some LAs had focused on findings that related to the contact between the child and the family while others developed new ways to support young people with friendships.

Resilience: Virtual schools also played a key role. They focused on the survey findings that were specifically about children's enjoyment of school, support for education in the home and bullying. Access to hobbies and activities was also improved.

Rights: Two LAs focused on improving children's involvement in decisionmaking especially in the care planning process and reviews. Some LAs introduced 'social worker profiles' to help children know who their social worker was, but other LAs had difficulties implementing these. LAs also tried to address children experiencing stigma, particularly in schools.

Recovery: LAs responded to findings that children did not know why they were in care in different ways. Self-esteem and mental health were addressed through activities such as a fashion show or dance workshops, and one LA recruited mental health workers to work in children's social work teams.

Interviewees were asked if they could give examples of changes that they attributed in part or wholly to taking part in the Bright Spots Programme. Many commented that the information presented in their survey report was not always new, but when many children were all saying the same thing, findings became more powerful. Professionals felt that when the same issues were being raised by many children they could not be minimised so easily, and findings could be used as a lever for change. Changes identified ranged from small modifications usually requiring few resources to wider strategic and organisational transformations. Some of the findings in the surveys led LAs to investigate further; conducting 'deep dives' to develop a better understanding of the issues children were raising before developing action plans. Other findings confirmed concerns that were already being acted upon. The next section sets out the changes identified from the analysis of documents and those described by interviewees. The chapter is structured around the Bright Spots well-being interacting domains of relationships, resilience, rights, and recovery that support well-being (see Appendix 3).

Relationships

We found evidence of LAs undertaking activities to improve children and young people's relationships with their social workers, carers, family members, and their friends.

Improving relationships with social workers

The Bright Spots surveys ask children and young people (age 4 to 18 years) if they trusted their social worker and ask young people (age 11 to 18 years) how many workers they had had in the previous 12 months. There was variation across the six LAs in their children's responses to the two questions. For example, the percentage of young people with three or more social workers in the year varied from 22% to 67% by their local authority.

LAs wanted to reduce the number of changes children experienced and improve staff retention not only because children disliked constant changes, but also to reduce their costs and improve the overall working environment. One LA gave an example of restructuring their 'intake teams' to ensure fewer changes of social worker between the child's initial referral and movement into a long-term team. Another LA had focused on "growing their own" social workers through supporting unqualified or newly qualified social workers.

The team leader thought they were seeing the benefits of this approach and said:

We've got a really good reputation for growing our own, so we'll take the students most of the time. They'll come as ASYE's [Assessed and Supported Year in Employment] or we'll just take them newly qualified ... the only way they ever move on is because they want a higher position. (Team Leader, Children Looked After)

Managers also noted that staff recruitment and retention was affected by their Ofsted inspection reports. A rating of 'needing improvement' led to difficulties in recruiting social workers and the use of more agency staff. Conversely, when Ofsted reports and ratings were good, recruitment was easier. However, the high turnover of social work staff remained a problem for most LAs.

We've been through Ofsted and we're now a good rated authority... and we've brought a good recruitment and retention package in for social workers.... that should help. But there will always be some children that have too many changes of social workers. (Assistant Director)

Introduction of new models of social work practice

Children and young people were asked in the survey whether they trusted their carers and whether their carers noticed how they were feeling. One way in which some LAs tried to improve relationships between young people, social workers, and carers was through the use of relationship-based and strengths-based models of practice. Two LAs were using the Mockingbird model (https://www.thefosteringnetwork.org.uk/policy-practice/projects-and-programmes/mockingbird-programme) or drew on the concepts in the Signs of Safety model (https://www.signsofsafety.net/). Both models have been found to improve staff retention and job satisfaction². The decision to choose a more 'trauma-informed' and therapeutic model of practice was described as being informed by listening to children's voices heard through the Bright Spots surveys. The interventions used with children, carers, and families drew on theoretical concepts from dyadic developmental psychotherapy (DDP) such as Playfulness, Acceptance, Curiosity and Empathy (PACE)

(http://www.danielhughes.org/p.a.c.e.html). One LA had introduced a strengths-based

² https://www.gov.uk/guidance/strengthening-families-protecting-children-sfpc-programme

approach. It influenced how practitioners worked, included team restructuring to give children fewer changes of social worker, and changed recording so it was written to or with the child (<u>Child-centred care plans</u>). Although the introduction of this approach was not solely the result of taking part in Bright Spots, a participation worker believed that Bright Spots had influenced the decision to change practice:

You mustn't under-estimate how much Bright Spots has been a part of adding to that broader narrative that we have to change our behaviour. ... what actually motivated that change has been the whole collaborative narrative, but Bright Spots has been a very important aspect of it. (Participation Worker)

Improving relationships with carers

Interviewees recognised that to improve children's relationships with their carers they needed to improve placement stability. All the LAs were already acutely aware of their own 'number of placement moves' statistics, which were reviewed regularly at strategy meetings. Children's written comments, in the Bright Spots surveys, expressing their distress at being moved gave additional impetus to improve placement stability, as a manager explained:

We've seen placement moves as a 'number' in our strategic meetings. We know it's something we need to focus on. Bright Spots [findings] come back and gives you those beautiful qualitative [comments] and connects to the ... human element. This is actually about children. (Principal Social Worker)

Interviewees spoke about the need for all the departments within the local authority to work together to support foster carer recruitment and retention. One LA described the introduction of data-driven methods of tracking moves in care.

We have a tracker of children who need to move or who are likely to come into care or who are moving on. I think we are much more aware of the moves ... and actually doing it in a more planned and timely way with joined-up working. (Social Worker, Fostering team) The relationship-based models of social work practice had also influenced the criteria for selecting foster carers and in the support provided to placements. Workers felt they were seeing improvements and said:

We're recruiting the right people for fostering now. We're being a bit choosier ... We're looking for people who are warm and nurturing and who are prepared to engage in other ways of parenting our young people ... It's all focused on relationship, the importance of relationships. (Social worker, Fostering team)

In another LA, there had also been a specific focus on improving relationships between young people and foster fathers, as a result of children's comments in their Bright Spots survey. One of the changes had been trying to ensure male carers were included in the visits made by the supervising social worker and were present at the annual review.

We're trying to make sure we work with men as much as we work with female carers now. Primarily men are the second carers. (Assistant Director)

Positive outcomes for children are also achieved through permanence outside the care system – an outcome not measured in the Bright Spots surveys. Greater use of adoption, special guardianship and Staying Put arrangements provide greater stability for children and young people compared with remaining in care. However, success in this area does result in a reduction in the number of available foster carers and hence more recruitment efforts are needed.

We are doing increasingly well at securing permanence for children, and of course, once we secure permanence for children from care, they won't appear in your cohort of children who answer the Bright Spots survey ... Obviously, some of our foster carers are those that have taken the Special Guardianship Orders and some of them have adopted. That's a great result for those kids that get permanent homes outside of care with the foster family that they lived with before It's an extra challenge because we have to recruit extra foster carers to replace those (Assistant Director).

Improving young people's relationships with their family members

There was some evidence of LAs implementing changes designed to improve young people's relationships with their family members. A key feature of one LA's practise has been to change the language from 'contact' to 'family time' in their policy documents. The change seemed to have become embedded, as the term was used by those being interviewed in the LA (<u>Changing the language</u>). The term 'family time' had been adopted in three of the six LAs and there was a general view that family time should be reviewed regularly, and plans tailored to meet the needs of each young person. It was not clear whether the LAs had used the term as a direct result of taking part in Bright Spots (as the term 'family time' is used within the survey itself) or because of a wider recognition of the importance of language. The reports to the LA of findings from their survey had encouraged LAs to think about their use of language.

There's been a bit of back and forth in terms of what would the young people like us to do and some language is being approved... for the council to adopt a different language, and it's all around being as least identifying as possible. So, if we're talking about contact with family, we won't use that language it will be, "You're going to visit your mum." (Participation worker)

In another LA, professionals thought that children's perceptions of whether the LA valued their contact with family also affected children's willingness to build trusting relationships with their carers.

I think for children to feel trusted, for them to trust their foster carers, there is a sense that It goes along with the respect that foster carers show to the child and the young person's birth family. It's about the value they give to the child ...and that's through ... the foster carers sitting and doing their homework with them, wanting to know how they're doing at school or who their friends are, ... friends coming over for tea.... All of those things build a family life which builds trust. I think the local authority have worked really hard to get that for our children looked after whilst recognising that they have families elsewhere. (Team Leader, Independent Reviewing Team)

One LA thought that the implementation of the Mockingbird programme had improved relationships with the child's wider family and viewed it as, *"very much about involving"*

families and maintaining those relationships for children, so it's a big feature in our service, in general, promoting those relationships with children." (Team Leader, Fostering Team)

However, there were also examples of some professionals expressing concern that the Bright Spot survey questions on family time could be distressing, particularly for young people who had none or very little contact with family members. Workers commented that improvements in family time were difficult to implement, as a lack of contact might be outside the LA control because of a court order or because of parental behaviours. However, it was also recognised that the findings on family time could open up conversations with children and young people about their views on family time:

Social Worker 1: Even if there's not something we can do about it ... at least we know about it and can understand how they're feeling.

Social Worker 2: It's the knowledge of knowing that... it's actually being able to recognise, and thinking, "Do I not talk about contact enough or too much?"

One LA had developed a Bright Spots action plan on family time after reading their children's comments. The plan set out a commitment to support and improve family time by making each child's contact plan specific to that child's needs, be child-led and to be reviewed regularly. However, there was no evidence that the plan had been implemented probably because of many senior staff changes. Senior staff had a key role in championing and monitoring changes in practice.

Supporting Friendships and Community Links

Interviewees thought key strengths of the Bright Spots surveys were the power of the collective voices of children and how the findings had helped to strengthen and shine a light on the importance of friendships. Survey results found that some children did not have one good friend, felt they could not do the same things as other children, and were isolated when placed outside of the LA, and wanted to meet with other looked after children.

All the LAs had taken some action to recognise the importance of and support children's friendships. An interviewee from a LA who had a Bright Spot in the area of children's friendships (this LA had only a few children without a good friend and almost all had a trusted adult) thought their positive result had been achieved by a) having a long-running

Children in Care council³ and b) members of the pathway team visited every child who entered care. In another LA, action had been taken to enable children to invite their friends back for dinner or to play.

Individually social workers have been complaining that foster carers often don't invite kids home for tea We've all complained about it and it all gets dealt with individually ... There's always a reason why [inviting friends around] can't happen Bright Spots helped us to say, 'No, ...We need to set the standard and our expectation [of carers], "You will be promoting, supporting, enabling friendships. This is what we expect." ...From a strategic perspective it allows you to go back to the problem ... This is what [children] say. This is what we're doing. (Principal Social Worker)

Some improvements in children's friendships were thought to be quick to implement, such as incorporating questions on friendships into the looked after reviews.

We've got a lot of our young people that are struggling to make friends, so as IROs ... we are asking specifically, "Do they belong to any clubs? Do they do any activities? Do they have any friends? Who do they think they might like to be friends?" We would target those areas. (IRO Team Leader)

Another LA ran an activity week, where children were offered a residential trip. This was set up as a consequence of a child in their care being excluded from a school residential trip. Whilst not initiated in response to Bright Spots, the trip addressed a number of the indicators including giving all children a chance to be trusted, addressing stigma and developing friendships:

³ Some of the participation groups did not like to be referred to as a 'Children in Care council' and used a different name. However, to maintain confidentiality, all such groups are referred to as 'Children in Care council' throughout this report.

In terms of children being individual and unique, last summer we had the 'Big Activity Week' in which we took 76 children in care on a week's residential.... It was split up into age-groups and we did year 6, 7, 8, 9 We were very clear that the rule was everyone could attend, so we weren't saying, "You're not stable in your placement you can't come." It was very much everyone can attend ... We didn't want to question the children, we didn't want results at the end, but it was just about a group of young people getting together and building confidence and having fun. (District and Participation Manager)

The worker thought that the building of friendships was an important aspect of the week. She reflected on how the residential element of sleeping in a dorm had helped children to share their experiences of being in care: "... there was nothing forced upon them, it was very natural but they [the children] started talking about shared experiences." The LA had planned to build on the success of the activity week by having a 'Big Camp' that would include foster carers. Due to Covid-19, planning for the next camp had to stop but it was an activity that the LA wanted to continue as soon as possible. Whilst the young people attending the focus groups set up for this evaluation were not in the age group that would have attended the residential week, one younger child had attended an activity day facilitated by the LA. She said she had enjoyed this day and talked about the different activities she had done. It had also enabled her to spend time with cousins who were also in care and whom she met at the event. Within the same LA, the virtual school had also done some work to improve friendships by using the Bright Spots findings to expand a school peer mentoring programme. She described the 10% of children in her LA who felt that they did not have a good friend as a "stark statistic" resulting in action.

One of the outcomes of the survey was that we trained up 10 further schools. So, we had about 50 more mentors across those environments. And I think that's incredibly worthwhile because that has a bigger impact than just on those young people who maybe feel like they haven't got a good friend in school ... there are people [in school] that can get alongside them or support them. The young people who have been trained up to be mentors really, really, benefit ... The whole school environment is improved ... but also should help to support some to make friends or learn how to make friends. (Virtual Deputy Head teacher)

Resilience

The questions on resilience in the Bright Spots surveys ask children and young people aged 4 to 18 years whether they: like school, have a trusted adult in their lives, have fun or can follow their hobbies and interests at the weekends. There are additional questions for those aged 8 to 18 years asking if they are given opportunities to be trusted, have access to nature, opportunities to practise life skills and if they are given a second chance if they make a mistake. Building resilience and promoting positive relationships are interlinked.

Supporting Education

A consistent finding across all the LAs was that most looked after children and young people liked school: a surprising finding, as generally educational results are poorer compared with peers. While academic results for looked after children are generally not as good, that did not stop children liking school. The finding on children liking school led the Children in Care council in one LA to recommend the rewording of a question in the Personal Educational Plan (PEP), as it had been worded in such a way that assumed children might dislike school. The virtual school took up the recommendation and said:

We've used the results of the Bright Spots questionnaire to change our... section of the PEP, which is gathering the child's voice. There was one bit in there about children not necessarily liking school, so we actually changed our document... to ask them if they **do** like school, and ... if they're saying 'No', we look into that a bit further. (Virtual School Worker)

Interviewees thought that the role of the virtual school was important in providing a link between Children's Services and schools. Virtual schools could disseminate Bright Spots findings in schools and facilitate planning discussions.

Building on their Bright Spots findings education was identified, through a working group set up by the corporate parenting board, as an area an LA wanted to prioritise. The Virtual Headteacher said: When they got all the findings ... what the LA did was divide it up into different priorities. We were given all those that link to education.... We worked with the Children in Care council to see what they wanted us to focus on, and what they wanted to do. That's how we got to 3 main priorities so that we could make an impact rather than doing little bits of everything and that's worked really well. (Virtual Headteacher)

The priorities agreed were to a) encourage learning and support for Maths and English in the home (foster care and residential placements) and b) develop a more creative curriculum. They also focused on tackling bullying which is described later.

It came down to support for Maths and English in the home, and that's in residential homes as well. There's a big thing about people taking an interest at home and work sort of flowing between home and school ... And the creative curriculum is really an interesting one, because that came from a bit of everything: the bit about having a key person that understood them, about having support at home ... and then we started a conversation around ... the best way of learning ... it was really a sort of mixture of all the things that they're wanting pulled into one. (Virtual Headteacher)

Bullying in school

The Bright Spots survey asks children if they were ever afraid to go to school. Some children were afraid and they felt this was because they were looked after and perceived as different. Virtual schools were involved in addressing children's worries about bullying in school, with the PEP form used as a mechanism for discussion during the PEP meeting. In one LA, there was a decision to change the PEP and ask children if they were experiencing bullying or harassment <u>because of</u> being in care. The virtual headteacher thought this had been a successful strategy, as children were now recognising that what they were experiencing was a form of bullying and could 'name' it as such. Another LA had chosen to add a question to the PEP as the virtual head teacher explained:

With regard to bullying and youngsters not having friends... as a consequence of that there is going to be a direct question [in the PEP], which will ask them basically, "Are there reasons why they're worried about going to school?" We purposely don't use the word bullying. (Virtual Headteacher)

Again, the power of the collective voice of many children writing that they felt afraid to go to school was beneficial in asking schools to address bullying. A service leader in another LA describing her discussions with schools said:

I was able to say this percentage of young people feel that they were bullied in school and then they'd [say], "But we need the details ... How can we do something about it unless you know who it is?"' And I said, "No you don't ... children are saying this is how they feel in school, so this is what you need to address. You don't need any more information than that." Which was quite hard for education to take on board but ... they have to own it ... because that's what these young people have voiced, and that's what they need to address. (Service Leader)

Having a trusted adult

Research on resilience has highlighted the key role of a trusted adult in children's ability to recover after traumatic events. The Bright Spots surveys ask children if they have a trusted adult in their lives. Interviewees in two LAs thought that participating in the Bright Spots Programme had introduced a new priority of "ensuring every child has a trusted adult available." The concept was seen to have been integrated into policy documents and interviewees thought that language within social work teams and in some schools had changed.

it's all about trusted adults where people feel safe ... and that's become part of our everyday language. ... We're much more mindful of how children feel ... that is part of our conversation in a way that I don't think it was. (Development Officer)

In another LA, the virtual school had delivered training to designated teachers and foster carers. The virtual headteacher explained:

That phrase 'trusted adult', that's something that we use more widely than we did before Bright Spots... It was agreed following... getting the results from the Bright Spots... we had that discussion about how we all needed to be using the same language, so we made sure through training that we were using that phrase 'trusted adult'. (Virtual Headteacher)

A third LA (where their survey found that a larger percentage of their children had no parental contact compared with other LAs), made efforts to ensure children did have a trusted adult in their lives. An IRO said, *"There is a massive drive to ensure children have independent visitors and advocates."* However, it was unclear whether the policy change could be attributed to the survey findings or whether the changes were already in train.

Taking part in hobbies and activities

LAs recognised that taking part in hobbies and activities was associated with better wellbeing. One LA had decided to give leisure cards to young people in foster care and the carer's family. The Service Leader explained the rationale for the decision:

We introduced the free leisure cards... as other LAs have done for children in care and care leavers up to 25. But we also gave it to their carers ...and also all the children in their household up to the age of 25. What we didn't want to do was just say, "Well, you know drop them off at the leisure centre." What we want is for carers to fully engage in the whole process. (Service Leader)

Another LA planned an event bringing different community organisations together to introduce young people to a wider range of potential activities. Unfortunately, the event had to be postponed because of Covid-19 restrictions. The service leader said:

We had planned a market event over the summer holidays for young people to come and see representatives from different groups and hobbies, so young people could see what was available... but also ... the event would raise the profile of looked after young people in [the area], and the profile of what's available in the community - just to broaden young peoples' imagination around what's possible and what's around. (Service Leader) Another LA had developed activities to encourage children's connection with the green environment and access to nature. One of the activities developed by the fostering team was a sunflower growing competition, which young people were said to have really enjoyed. The LA also had an allotment that they started as a result of taking part in Bright Spots, which was used as a base for lots of activities with young people (<u>Running an accessible</u> <u>allotment</u>).

Rights

The Bright Spots surveys have questions on children's rights that are drawn from the articles in the United Nations Convention on the Rights of the Child (1991). Questions ask about feelings of safety, inclusion in decision-making, freedom from bullying and discrimination. There are additional questions on whether children in care know who their social worker is and know they have a right to speak to them in private. Ensuring children's rights are respected was a challenging area for many of the professionals who participated in the evaluation. Children's negative response to a question on whether they knew who their social worker was troubling for professionals and cut to the heart of social work practice. Some participants doubted the accuracy of a finding that some children did not know their worker. Although one LA had fewer children than the average reporting that they did not know, workers still chose to act on the finding. Social workers expressed their surprise that any child would not know:

There's a little bit ... that came back in terms of "Do you know who your social workers are?" and ... some were saying "We don't." ... From our team that would be really surprising to get back, but what we did do was validate that by actually making a profile for our social workers ..., but I mean that would never happen. (Social Worker, Children Looked After Team)

In a different LA, the service leader explained the shock when she first heard that not all children knew who their social worker was and described her action:

The stark thing I remember was when they didn't know who their social worker was, that for me was a real sort of "I can't believe that.". … We need to be honest and open and clear and that allows us … to look at all our practice, and not just assume that everybody is doing the same, as what I would do. (Service Leader)

In all the LAs who had taken part in the Programme, there was a proportion of their children who did not know who their social worker was. The average percentage for each age group 'not knowing' was for age 4 to 7 years (19.5%), 8 to 10 years (10%) and 11 to 18 years (6%). Three of the LAs who took part in the evaluation had implemented social worker profiles to address these findings and the case study (<u>Social worker profiles</u>) is one example of how this was done. Another LA had produced a credit card-sized leaflet with details of key workers and space for the social worker profiles had not gone well. For example, a Children in Care council had launched profiles, but they were met by resistance from social workers as explained by the participation worker.

The Care Council have done ... a little booklet introducing your social worker to you. It's like a photo of them, what hours they work, what days they work, how to contact them, their mobile number, little bits about them because the kids were saying they just felt like their social workers were coming out asking them loads of questions and yet they knew nothing about them. ... Launching that booklet... was an absolute nightmare. The kids launched it, senior management said, "That's fine. Let's do it," and then I don't know what happened ... I don't know how it was promoted. But the social workers got their unions involved because they didn't want to put their names on it, didn't want to put their age on it, and it made them feel vulnerable.... Then at a conference, the young people spoke to them and said, "If you draw a cartoon of yourself or anything, but ... this is why we've done it" ... and to this day... it's really patchy. (Participation worker)

Similarly, attempts to introduce social worker profiles in another LA were also met with resistance, as workers did not want a photo on their profile.

Experiencing stigma and discrimination

LAs were keen to challenge the stigma and discrimination that children and young people reported. Young people had left comments in the surveys that they often found parent's evenings difficult as they were asked questions by other young people about their foster carers or teachers drew attention to their looked after status. One LA had changed their policy to ensure that foster carers and children agreed on the names they would call one another at the placement meeting, and this was re-visited at looked after children reviews. A participation worker described work that she was undertaking in a primary school with children:

[The children] felt that ... there was a lot of stigma around them being looked after... so they've created a storyboard around what these questions mean ... 'What is a PEP?' and they explain what a PEP is. But also, to educate the teachers - Don't come into the class in front of everyone and say, "You've got your PEP now." That isolates that young person. And we're hoping to show it in all schools across the country that our looked after children are in, so I'm hoping that will help with some of the stigmas in school. (Participation Worker)

Similarly, another LA chose to focus on stigma because of their Bright Spots findings and at the request of their Children in Care council. The children were working with the virtual school and a design team to create materials for school assemblies challenging myths about children in care for all the schools in their area (<u>The assembly squad</u>).

Feeling involved in decision-making

Being given information and having a say in decisions that affect your life is known to support well-being and mental health. Its importance is recognised in Article 12 and 13 of the UN Convention on the Right of the Child (1991). Interviewees spoke about reviews for children looked after, and how they had tried to improve how they involved children in the process. In some LAs, young people were encouraged to chair their looked after reviews and to get involved by helping to plan the meeting:

In a very early Bright Spots report, children looked after told us that they didn't like surprises at their reviews. They liked to know who was going to be there ... We [now] ask them who they want at their meeting and where they want their meeting and then do that. ... The review itself is very much for the child; it's about the child. (Independent Reviewing Officer Team Leader)

In another LA, the review and care planning documents were revised and made more childcentred. The meeting itself also became more child-led (<u>Child-centred care plans</u>).

Recovery

The survey questions ask whether children and young people feel: settled where they live, the reasons for care have been fully explained, have opportunities to do similar things to their friends, are supported with their worries and have carers who are sensitive and notice their feelings.

Understanding the reasons for being care

There were many positive examples of LAs making changes to increase children and young people's chances of recovery. All six LAs had responded to the findings that many children and young people did not fully know why they were in care. The average percentage for each age group 'not knowing' was for age 4 to 7 years (57%), 8 to 10 years (34%) and 11 to 18 years (21%). One LA had been shocked when they first undertook the survey and found out that more than half of the children aged 4 to 7 years old did not know why they were in care. The team leader described how she began by auditing all the case files and found that, *"some social workers were not being honest with children."* Following the audit, there were discussions with teams to dig deeper into what was happening:

There was then a discussion with social workers as a group about, "Why don't you?" and some were sort of saying about [difficulty] in finding the right words and ... what to say, and [the children] are traumatised anyway. (Service Leader)

Consequently, the LA set up 'Finding the right words' training (<u>Finding the right words</u>). Social workers who attended this training spoke very positively about it, reporting that it helped them to pitch adult concepts at the right level. Social workers in the children looked after team felt that there were some ongoing benefits from the training, as life story work was now, "part of the conversation" within their team, but there was a concern that the benefits may not be sustained. Since the interviews for the evaluation, the LA has re-started and extended the training developing a storybook about a bear who needs different care. The book is designed to be used as a starting point for life story work and the aim is for each child to receive a bear with the book when it is rolled out. The books will be individually tailored as pages can be changed to reflect the different reasons for admission to care.

Another LA had employed an art therapist to work with children and young people on their life story and also established a therapeutic story writing group. A third LA had a different approach and had designated specific months where 'understanding' was the focus of social work visits to young people:

We've just kind of targeted months twice a year where we've tried to make that the focus of any visits or discussions that we have with young people, to just try and make sure they are aware that actually there's an opportunity for them to ask any questions. (Service Leader)

However, whilst this approach could be beneficial there was also a need for flexibility as social workers found that some young people were not ready for the topic to be raised:

The only challenge I've had was the bit about reviewing every 6 months about why you are in care, because for us with some of our long-term looked after children ... that we've worked with for years and years and years, actually, they can be quite clear with us they don't want us to keep raising that... So, you have to be a little bit careful in sort of having strict guidelines on how often you're going to mention it. (Social worker, Children Looked After Team)

Self-esteem

Another area that LAs focused on was self-esteem and improving young people's body image. The Children Society's 'Good Childhood Report'⁴ has raised awareness of the increasing number of young people who dislike their appearance. There were similar

⁴See <u>https://www.childrenssociety.org.uk/good-childhood</u>

concerns about appearance expressed by young people in care. Overall, 13% of looked after young people (11 to 18 years) were dissatisfied with their appearance in comparison with 10% of 10 to 17 years old in the general population⁵.

One LA encouraged greater self-esteem through a dance workshop (Dance workshop). Body image was also an area that a Children in Care council chose to focus on, organising a fashion show designed to encourage children to *"love themselves"* for who they are. The show was attended by approximately 40 children and carers (Fashion show). While some LAs had made efforts to improve how children felt about their self-image, there was also a recognition that it was a relatively new area for them, and they would appreciate more support and guidance:

I think what we probably struggled most with is around the positive self-image. We did a bit of 'This Girl Can' We've improved our emotional health offer for children in care and across schools generally. (Service Leader)

Professionals in two different LAs highlighted that there was a lower tolerance of children's challenging behaviour in schools in their more affluent areas. It was reported that children too compared themselves unfavourable to more affluent peers and it was thought that the comparison had a negative impact on well-being. Schools, especially academies, were not always understanding of children's circumstances, as an interviewee explained:

Some of our affluent areas, in our schools, their standards of education are extremely high. But what that also means is their expectations for behaviour [are extremely high] ... We face real challenges in terms of our communication with them around giving people second chances, showing some compassion, showing some understanding. (Principal Social Worker)

Improving emotional and mental health

Interviewees in two LAs thought that the survey findings were also influencing the delivery of health services. In one LA, the designated nurse sat on a health and well-being sub-group of the corporate parenting board. She described how the Bright Spot findings had led to a more holistic view of children's health and influenced the commissioning of services:

⁵ Selwyn, J., Magnus, L. and Stuijfzand, B. (2018) *Our Lives Our Care Looked after children's views on their wellbeing in 2017.* University and Bristol and Coram Voice

In terms of statutory health assessments, the impact of [Bright Spots] has led on to how we train our specialists to complete those assessments. They don't just think about, 'Have you've had your immunisations?' or 'Have you had your hearing checked?' It's bigger, how we talk to young people about leisure and activities, about how they feel about themselves, it's all incorporated into that health assessment. We've done some training ... for all specialist staff.... We're just moving on to look at SALT (speech and language therapy) screening, so we can ensure that communication to the person coming in is in place and is addressed appropriately, so we get the true voice of the child. (Designated Nurse)

Another LA was using their Bright Spots findings to influence the provision of mental health services:

We're using the findings at the moment in terms of the transformation of our CAMHS service, so the findings from our Bright Spots surveys have been really helpful in informing, 'What do children need and want from a service that supports their mental health and emotional well-being?' So rather than just design a clinical pathway, actually it's about "Is that going to meet what children say is their lived experience?'"(Strategic Development and Commissioning Manager)

The participation worker in that LA also sat on the transformation board for mental health and emotional well-being and could bring influence. The worker was able to remind professionals that the services were for children and young people, use the Bright Spots findings in discussions, and reflect the views of the Children in Care council to the board. The LA had also appointed mental health workers to be able to respond to need and work directly with children rather than having to refer to other services that generally had waiting lists. The participation worker stated that the appointment of the mental health workers was in response to the LA's Bright Spots findings along with a call for more support for mental health from their Children in Care council.

Chapter 4 : Valuing Children and Young Peoples' Voice

Risk factors recognised: LAs had different ways of identifying young people who they thought were at risk of having low well-being. Many LAs were focusing on older adolescents who were not in stable placements.

Children, foster carers, and staff know about the survey: Young people felt that they were given opportunities to take part in the survey. They did not feel pressurised and knew that they could choose not to participate. Not all staff knew about the survey or the findings, particularly those in fieldwork teams or in LAs where there had been a lot of staff changes.

Children have seen the findings: survey findings were shared with children through the Children in Care council, engagement or activity events, or were cascaded down through schools or social workers. One LA wrote to all children in care including the summary findings ('You say We will' feedback sheet) that had been prepared by the Bright Spots team, ensuring that findings reached all their children.

Children feel their voices have been heard: There were some positive examples of Children in Care councils feeling that participation in Bright Spots had led to greater recognition of their views and that their voice was listened to. In some LAs they had been supported to run projects that they planned, as a response to the findings.

Cultural change: Four of the LAs demonstrated some level of cultural change with an increased focus on valuing and prioritising children's voices.

In this chapter, we will consider whether there was evidence in the evaluation that children and young people were able to take part in the surveys, knew about the findings and felt they had a voice in key decisions. The evidence on whether children and young people felt they had a voice and a say in how services are delivered comes from the 19 children and young people who attended the focus groups. As focus groups were not held in two of the six LAs, documentary evidence was also used including the minutes of Children in Care Council meetings, and information on a Children in Care council website that outlines the projects established to address the Bright Spots survey findings. We will also consider whether survey findings were shared with young people's carers and social workers.

Children and young peoples' participation

The Bright Spots surveys aim to give all children looked after (aged 4-18 years old) the opportunity to express their views and feelings. The early piloting and testing of the surveys found that most children could understand the questions except those with severe disabilities. To support the running of the survey, Coram Voice staff meet with the LA before the survey goes live to help them consider how all their children might be reached and which children might need extra help such as needing a translator or help with reading the questions. The return rate for the surveys is generally good (averaging 34% across all LAs). All the questions are optional but there is little missing data.

Children and young people who took part in the evaluation focus groups knew about the Bright Spots surveys and described them as "*easy*" to complete. In addition to decisions made by LA managers about children's eligibility, individual social workers also had a view. Social workers made professional judgments about who they thought should be asked to complete the survey and had not asked those who they thought might become distressed. For example, a social worker said:

If a child's going through a particularly difficult time, or they find it difficult visiting, or they're permanent and they don't get that many visitors ... sometimes we need to think about the question and if it's appropriate. (Social Worker, Children Looked After Team)

The questions about seeing members of the birth family were perceived by some social workers as sensitive and potentially distressing. Analysis of 'missing data' has shown that satisfaction with the frequency of contact with fathers has the most skipped responses of the family time questions.

Disseminating the findings to children and young people

LAs had used a range of methods to feedback the findings to children. One LA wrote to all their children in care using the children's feedback sheets, '*You said, We will*' that are prepared by the Bright Spots team. The feedback sheets summarise the findings and ask LAs to state what they are going to do in response: We write to the children with the feedback and say, "This is what we're going to do ...". (Strategy and Policy Development worker)

Another LA had held a fun day combining sharing the findings with activities. Although few attended, the participation manager hoped for better attendance in the future as, *"The carers and young people that attended thought it was quite a relaxing day and they enjoyed all the participating and the work from it."* Three young people in the focus group recalled attending this event and taking part in a drama activity. Another LA had held an engagement day, where findings were presented to professionals and their Children in Care Council. Findings had also been discussed with the Children in Care council in another LA and followed up during their participation activity week that was attended by many more children and young people.

Another LA asked team leaders to cascade the survey findings, relying on social workers and IROs to share the findings with children and young people. Due to staff changes, not all social workers were aware of Bright Spots and therefore this method appeared less reliable. Young people in three LAs confirmed that the findings had been discussed with the Children in Care councils. In another LA, children and young people could not recall seeing the findings but confirmed that they had been involved in changes that were linked to the findings.

Having a say in decisions

Participation was taken extremely seriously. All young people valued having a say in decisions that affected their lives but had different ideas on how this was best achieved. Some young people wanted to speak in reviews or chair their own meetings whilst others chose not to attend. One young person said, *"I can get across what needs to be said"* but a care leaver felt that workers talking about her made her feel, *"Angry as if I wasn't a person."* There were also differing views on the form that young people are asked to complete just before their children looked after statutory review. Young people in two LAs viewed the form as very important whilst young people in the other two LAs thought it was unimportant.

There was also a difference in how involved young people felt in decisions about service provision. One LA did not have a Children in Care council. Instead, young people became 'care ambassadors' for specific projects and services. The rationale behind the use of ambassadors was to give a greater number of children and young people the opportunity for involvement in decision-making. However, the young people in ambassador roles were less engaged in strategic changes to documents and saw such changes as of less importance compared with those who were part of the Children in Care Councils. In some of the other LAs, members of the Children in Care Councils had played a key role in initiating and changing PEPs, as a response to their survey findings. Young people in one focus group felt that their requests for change had carried greater weight because they were able to use the evidence from their surveys.

Young people's views on the changes made by LAs

Young people were asked if they had noticed and experienced the changes and innovations that had been identified by the professionals in their LA. They were asked to carry out a Qsort activity (see Appendix 1 for detail) to rate the changes in order of importance. Each focus group had a different list of changes, but there were some common themes.

- Knowing why they were in care was identified as very important by three of the four focus groups. In one LA, all the young people reported they had been offered life story work. There was a suggestion that workers needed to persist in offering support around life story work as some young people were not ready to begin and understanding was a continual process with views changing as young people got older. One care leaver reported that she would like to talk about this, but her Personal Adviser (PA) never discussed it. Another reported that she had seen her files when she was 18, but as she has moved around a lot this personal information was scattered in different locations.
- Factors that had an impact on the quality of relationships with social workers including knowing who your social worker is and having fewer changes of social worker were also rated as high importance. Keeping the same social worker was an issue for young people in the focus groups. One young person described having four different social workers in 12 weeks. Young people also wanted to emphasise the importance of the participation worker who was often the consistent professional in their lives, as social workers changed so frequently. Young people in one LA had seen the leaflets describing who

their social worker was. Young people in another LA were asked if they knew whether social workers explained who they are to children and young people. They all reported that they knew their social worker and how to contact them. In another LA, young people were asked about whether they knew that teams had been changed so that young people had fewer changes of social worker. They were unaware of this change. A younger child within this LA had only ever had one social worker, who had also been her social worker since before she went into care. Young people suggested that relationships between young people and their social worker/ PA could be improved by more contact and receiving birthday presents from the social worker.

 Being involved in decisions around family time was another area that young people saw as important, with young people recognising that this could be 'complicated' due to individual experiences. Young people within one LA reported that their social workers had involved them in decisions around family time, but it was unclear whether this occurred as a result of taking part in Bright Spots. In another LA young people were not sure whether their views around family time were revisited during their reviews.

Areas of medium importance included factors to do with school, such as stigma, bullying and changes to the PEP form.

- Bullying Young people recognised the efforts that had been made to address bullying, but bullying was not a concern for those that attended the focus groups. It may be that young people who choose to attend focus groups or are members of Children in Care councils are more confident and able to speak out. Other young people in care are likely to be less confident and may feel unable to express their fears.
- PEP and schools Young people within one focus group recognised the changes in the PEP that the professionals had talked about in their interviews. They liked the change in the wording of questions and the changing of pictures. One young person stated that it was still difficult to talk openly at his PEP meeting as a staff member attended.
- Stigma and schools. Young people did not like attention drawn to their 'looked after' status. One young person complained about being asked to leave a lesson because their social worker wanted to speak to them. Having to leave lessons to speak to social workers or to attend reviews was a frequent complaint from young people who

completed the Bright Spots surveys. They asked that meetings be held outside school hours.

- Discrimination and friendships. Young people complained that their carers could not give consent for 'sleepovers' or ordinary events that the vast majority of their friends could do. Young people felt having to seek permission detrimentally affected friendships and were stigmatising and discriminatory. Young people who attended the focus groups felt that while their LAs had made improvements to support friendships, more needed to be done. One young person commented that '*One form should be signed for everything*'. Having to return to the social worker for permission made him feel different, '*My mates are asking but I can*'t come around.' Although the young people's concerns had been taken to the corporate parenting board there had been no resolution. In another LA, young people had similar views, '*Foster carers should be able to decide everything*'. In one LA, a care leaver highlighted how important the 'Come Dine with Us' group was: a group that prepared and ate meals together, ('<u>Come dine with us'</u>). It encouraged her to go out at a time when her confidence was low, and she was feeling socially isolated.
- Self-esteem and body image. Two of the focus groups knew about the work their LA had done to address these concerns. Young people had participated in the dance workshop and fashion show activities that had happened after the Bright Spot findings.
- Areas such as accessing hobbies and nature were viewed as some of the least important changes by those attending the focus groups, although some young people did value these opportunities. Young people knew about the leisure cards available in one LA and made use of them. In contrast in a different LA, care leavers experienced a disparity in funding to access leisure facilities and gyms. One young person received some support while another reporting having to self-fund. Young people felt that physical health had positive benefits for well-being with one young person stating that going to the gym helped her to "channel my emotions positively." Young people in other focus groups reported that hobbies were difficult for young people that moved around a lot. They also highlighted the disparity in the experiences of children in care and care leavers, with opportunities that were available to children in care not always offered to care leavers. Some of these they thought would be simple and inexpensive to continue, e.g., the

fostering team could work with the Pathway team to open a sunflower competition up to care leavers, as well as fostering households.

- Young people also spoke about the need for professionals to talk with them about why the reasons for care on multiple occasions, recognising that young people's perception and understanding changed as they got older. They wanted to be offered multiple opportunities to talk about these issues, as some young people stated that they would often say, "No" even if they did have questions or wanted to do something.
- In one LA which was using a strengths-based practice model, young people were asked if they had noticed whether their social workers had become more willing to discuss the positives, as well as the challenges in the young person's life. They confirmed that their social worker did talk about good things that were happening in their lives. A younger child within this LA reported that she liked her social worker and that her social worker (who had known her since before she entered care) talked about good things with her.
- Moving towards leaving care Young people were given the opportunity to raise areas that they felt should be changed that hadn't been mentioned by professionals. Young people mentioned a desire for support around getting older, for example in specific areas such as preparation for leaving care and especially help with career choices.

Sharing findings and recognising indicators of low well-being

Findings were usually shared with social workers in a variety of ways, including at LA social work conferences or away days, discussion at team meetings and through staff newsletters. As one social worker stated:

I think because [the LA] have really embraced the Bright Spots survey we've got some true advocates for it ... It's always talked about so everyone's now aware of it; you come into the local authority you're aware of the Bright Spots survey (Social Worker, Children Looked After Team)

The majority of those who worked in the fostering and children looked after teams were aware of the Bright Spots surveys and findings. But some workers were sceptical of the findings, particularly if they were new to the Bright Spots Programme. The data we got from when we did it was relatively good, but I think again it's subjective to what's happened for that child on that day ... because ... it sometimes might not get the information that we actually think is correct. (Social Worker, Children Looked After Team)

Another social worker felt that the same information could be provided in other ways:

Looked after children are one of our most vulnerable client groups, so we need to make sure we're getting it right and collecting all this information. But actually, we know because of the experience of the team how to collect that discretely sometimes when we need to, or from other sources. (Social worker, Children Looked After Team)

In some LAs, staff acknowledged that about half of the children in care had a worker based in a fieldwork team and these social workers had less knowledge of the survey compared with those in the dedicated looked after teams. Fieldwork teams work with children and young people when they first enter care, up until a care plan has been agreed by the court. If the plan is for them to remain in care long-term, the responsibility for the child is transferred to the looked after team. A fieldwork team leader in one LA noted that there needed to be further work on disseminating the findings within the fieldwork teams:

There was ... a launch... in response to the findings of the survey... but in [the children in care team] it is more focused, and they brought that into their service day and team meetings.... I think in fieldwork... we need to focus that a bit more, in terms of disseminating [findings] more in team meetings (Team Leader, Fieldwork Team)

In one LA, there was a communication gap as the findings had not been shared with those who had helped facilitate the surveys including the participation worker and IROs. It was also unclear how the results had been shared with the children.

Most of the LAs shared the survey findings with foster carers. One LA held an annual conference for foster carers and always shared the results at that event. Another shared findings during the monthly meeting for foster carers, with a guest speaker and time to network, which was regularly attended by professionals including the participation worker and members of the virtual school. Another LA shared findings with foster carers and young

people at a 'fun day'. However, in one LA social workers in the fostering team were unaware of the survey findings.

Findings in two of the six LAs, suggested that a few of the younger children (aged 4 to 7 years) were unhappy and might have low well-being. Interviewees spoke much more confidently about addressing the well-being of older children whereas few mentioned how the needs of the younger children might be addressed. They noted that the responsibility for younger children was often not held within the children looked after teams, or that legal decisions had not yet been made, and that could make children feel insecure and unsettled. In one LA, the children looked after team stated that they were, "going out to the intake teams and reminding them... our looked after children at that age are saying this, "What are we doing about it?" (Team Leader, Children Looked After Team).

Virtual schools also ensured that they fed findings back to schools and designated teachers. One virtual headteacher described the range of methods she used to feedback the findings, including sending out regular email updates to schools and focusing on aspects of the findings in termly designated teacher sessions. In addition, two LAs shared their findings with health professionals who undertook the looked after children's health assessments or provided services commissioned for children looked after.

The theory of change set out in our logic model anticipated that an outcome would be that LAs would be alerted to the indicators that were associated with vulnerability and put strategies in place. Some of those interviewed were concerned that young people with low well-being could not be individually identified, as the survey was anonymous; it was also thought that some of the most vulnerable might not have completed it. Others thought that the anonymity of the survey was useful. First, it encouraged social workers to think about <u>all</u> their children and consider if they were working with any of those who had given many negative responses. It also encouraged discussion of the findings in team meetings. The virtual school agreed and thought that teachers too had to consider how to address bullying and stigma for all, and not just in response to a specific incident. Maybe the positive side of this is, that it would refresh the practitioners to think, 'Is it any of my youngsters?' It makes you think. I think it's good that it is anonymous ... Practitioners think about who they've got on their caseload, and think, "Maybe we'll explore that one a bit further." (Team Leader, Pathway Team)

Interviewees thought that young people who had more complex circumstances and who were less likely to be in stable placements were already recognised as a vulnerable group. One LA had several children's homes that were involved in a model that supported adolescents on the edge of care. In this innovative approach, each children's home becomes a multi-agency hub designed to support those living in residential care and those young people on the edge of care. The Assistant Director described how the service works:

They're still registered children's homes... but the workers also do edge of care work ... Each hub has got a full-time psychologist, a half time speech and language therapist and a police officer.... you don't have to go to loads of different services and get an assessment and a referral to get those services... it's about a different way to get multi-agency services to young people. (Assistant Director)

While participating in Bright Spots was not directly related to establishing this model, the findings from the LA's Bright Spots surveys were being used to make the case to extend the multi-agency hubs. The Assistant Director highlighted a finding from their Bright Spots survey that 20% of young people (11 to 18 years) felt unsettled in their placements and said:

I think our real area for growth and improvement is that 20% who feel unsettled... they'll be our complex teenagers and we're working on that. We haven't got a sufficient number of placements for those kids but we're working on it... those multi-agency children's homes... I'm just scoping out a business case to open another, partly in response to we need more high-quality stuff for older children with complex needs, and also partly as a response to what we think will be an increased demand from the impact of Covid. (Assistant Director) One LA also took part in the Children's Society Good Childhood Survey, and they found that this was a good tool alongside the Bright Spots survey to try and identify the vulnerable cohort of children that appeared in both surveys:

The Children's Society findings mirror this in a way, in that the majority of children in care and the majority of children who haven't experienced care generally feel safe and feel happy, have good self-esteem. But there's a minority of children both in care and who haven't experienced care who actually have multiple negative experiences and feel ... less safe We can start to filter down to a cohort of very vulnerable children both in care and not in care, that actually perhaps these surveys could help us understand better. (Commissioning Manager)

Supporting children's subjective well-being

The evaluation explored whether participating in the Bright Spots Programme had led to LAs giving greater priority to valuing and respecting children's participation and promoting wellbeing. LAs were on different stages of this journey. All the LAs thought that they valued and promoted children's participation: their willingness to engage with the Bright Spots Programme was evidence of that. There was also evidence that a determination to engage with the findings (which were sometimes uncomfortable) had led to further changes in four of the six LAs. One LA had been involved in the programme since the pilot stage and was committed to repeating the survey each year. An example of how their involvement led to cultural change is given in the case study on the use of language (<u>Change of language</u>.) Other LAs were at earlier stages. The participation worker in one LA felt that the culture was changing to focus more on the voices of children and young people, but this change was slow:

I feel that we are at the end of the beginning of... a massive cultural change, and that's why it's really hard... I'm impatient... for the outcomes we desire.... It's taken ages to get to this point... and it feels at times extremely unsatisfactory. But it's just the truth of being in a big organisation and cultural change is very slow... but meaningful change is occurring. (Participation Worker) Another LA felt that taking part in the Bright Spots Programme had led to a change in how the LA prioritised listening to the voices of young people. They had set up a panel of care experienced young people, and different strands of their corporate parenting board were expected to work with this panel to identify what they were going to do as a response to the Bright Spots findings. This led to a cultural shift in terms of how the LA responded to children's voices. The participation manager explained why this was an important change:

The ... consideration of what children want across the service, it's right at the forefront now of everybody's thought, right from director level right down to workers working directly with children and young people. I feel like Bright Spots has broken down the resistance that there was in some areas to listen to children and young people, not that they weren't doing before, but there was some resistance in some areas.... For me Bright Spots has absolutely thrust into the forefront of everyone's mind... what children and young people want and therefore has made things that we try and do to improve the lives of children and young people... has made everybody more receptive to it. (Participation Manager)

Another LA used Bright Spots as one of the ways they collected the views of children and young people (alternating yearly between the children in care and the care leavers survey). Survey findings were explored in greater depth within the Children in Care Council and during a '*Have Your Say*' week before creating an action plan to address the findings. Bright Spots has therefore become embedded within the participation strategy of the LA. The participation worker gave an example of how this worked in practice:

We try and use all of those main pillars to get the best feedback from young people on what's got to be done, and there's quite often interplay between those pillars too. So, for instance, in the past when Bright Spots has spoken about identity or understanding why you came into care... it went to [the Children in Care council] and was also discussed at 'Have your Say' week in terms of fully understanding what it was that we could do about it to improve things. (Participation Worker)

We were able to identify factors that enabled LAs to introduce and make changes. These are explored in the next chapter.

Chapter 5 : Drivers, enablers, and barriers to improvement

Overall, the evidence from the interviews was that Bright Spots of practice occurred where there was:

- A stable workforce
- An established Children in Care Council
- Support from senior management, particularly from the Director
- The inclusion of the senior participation worker within the senior management team
- The involvement of the virtual school and
- A culture that encouraged challenge and reflective practice.

Barriers to achieving change included:

- A high level of staff turnover, particularly at senior management level
- The key person for Bright Spots within the LA having insufficient authority
- Poor transitions between social work teams
- The participation team only having a peripheral role within the LA.

The size of the LA, preparing for inspections, or difficulties in working with other agencies could also have an impact on the LA's ability to implement change.

Bright Spots of practice

The individual reports that LAs receive, from Coram Voice and the Rees Centre, identify for each of the key well-being indicators whether the children's responses are in line with the LA average or responses are more positive or negative. Areas of children's lives where an LAs is doing better are flagged up in the reports as 'Bright Spots.' We asked interviewees:

a) why they thought their LA was doing better in some areas and not others and

b) what enabled or prevented their LA from tackling areas of concern.

Those that achieved better than average Bright Spot results or were able to implement changes tended to:

• Prioritise and acknowledge the importance of listening, taking seriously, and acting upon the voices of children in care. Senior management support was very influential in raising

the profile of children in care and drawing in others such as elected members. Examples given were of regular meetings between the principal social worker and the chief executive to discuss progress on actions around Bright Spots findings; "*There's a really* good link from senior management and from elected members ... a very proactive corporate parenting group ... excellent lead member, who is really keen to ... promote and progress the needs of children in care and care leavers ... Almost like knocking on an open door... the chief exec's completely on board."

- Have a Director who set the tone and the culture. For example, "The Care Council have got a really strong relationship with ... the director of children's services because she just comes to every third meeting and joins in. They just see her as an adult in their lives that really cares about them and that they can talk to. And I feel that since she's been in post, the care council's profile and the work that they do is just really well received and well heard because she sort of sets the tone I think for other senior managers."
- Value and integrate the participation service into the LA management structure "[The director] has changed our role, as a project we're mainstreamed now. I'm part of the senior management team which I wasn't before... changes like that make quite a big difference." (Participation Team Manager)
- Children valued the consistency of participation workers.
- Have a stable social work team with relatively little workforce churn. The stability of the management team was particularly noticeable in keeping participation high up the agenda.
- Have a history of involving young people in participation and an established Children in Care council. The LAs who were able to make changes had structures already in place for listening to children and young people. The Children in Care councils played an important role in the decision-making about which of the Bright Spots findings their LA should prioritise and worked with professionals to develop action plans. Young people who had been involved in the care councils and contributed to our focus groups recognised the changes that had been made and felt empowered because of their involvement. Bright Spots gave the Children in Care council a greater sense of legitimacy in suggesting particular changes, as they were acting upon a greater range of voices.

- Have participation workers who were able to represent children's views and constructively challenge. They were instrumental in supporting and building relationships between the Children in Care councils and senior management, especially with the corporate parenting board.
- Demonstrate a willingness to be on an improvement journey; "I think we're still on that journey I suppose. I would be lying if I told you we'd done it all... but we certainly are trying to respond... you never finish, do you, trying to improve?"
- Identify a key champion who promoted Bright Spots within the LA and encouraged its take-up. Where LAs had done this successfully, the need to promote diminished as the whole LA became involved; "It doesn't feel like it's mine anymore if you see what I mean, it's not just mine it's very much [name of LA], it's embedded."
- Have good relationships with the virtual school and the virtual school was engaged in the Bright Spots work. For example, the virtual school provided training and fed back the Bright Spots findings to schools and supported them to make changes.
- Encourage reflective practice. Findings could be uncomfortable, as they challenged managers and workers' understanding and feelings of how they thought practice was being delivered, "It makes you challenge yourself as much as to look at how the service is structured." Those LAs that gave space for reflection were able to work with their social workers to change practice: "I think it is very personal here, and I think that's why some of those Bright Spots messages are so hard to read and they're so hard-hitting when we don't get it right."
- Show a willingness to make changes and then assess whether it had made the difference they expected.

Barriers to achieving change

Some LAs found it more difficult to implement improvements and one LA found it difficult to maintain and sustain the changes. In these LAs the factors impeding improvements were:

- The Bright Spots champion had insufficient power and status. "I am not the one who can make the difference, I'm not that person. I haven't got the level of authority."
- Staff changes particularly in the senior management team "I think [the LA] has had so much change in the last couple of years since we did [Bright Spots]. Senior managers

have changed, middle managers have changed, team managers have changed, significant turnover of social workers ... Quite a lot of the social workers and managers that are around at the minute are interims. I think it needs a steady and consistent workforce if it's going to be really impactful, so everyone gets the training, so everyone gets to hear the messages."

- Poor handovers and transitions when children moved from the intake or fieldwork teams to the children looked after teams, usually once and care proceedings had been completed and they had a plan to stay in care long term. For example, high staff turnover and agency workers resulted in life story work starting but not continued or passed onto the next social worker.
- Lack of engagement with all the stakeholders in the LA. Participation workers did not occupy a central role and their work was on the periphery.

Other factors influencing improvements

In addition to the factors above, some factors were outside of the control of the LA. For instance, the size of the LA was thought to have an impact on how easy it was to implement change. One director of children's services, who had had responsibility for two LAs, thought that it was much easier to make changes in a smaller LA. However, smaller LAs could also experience difficulties for instance having more children and young people placed outside of the LA due to a shortage of foster carers.

A focus on statutory duties and preparing for inspections could take the focus away from implementing changes. The result of Ofsted inspections could result in staff having to prioritise new action plans and the Bright Spots development work put on hold. Difficulties with joint working were also cited in barriers to achieving change. For example, accessing support from the Child and Adolescent Mental Health Service (CAMHS) was very difficult even for those LAs who had many Bright Spots of practice. Academy schools could also be resistant to working with children's services, especially those that were part of Multi Academy Trusts (MATs) as one interviewee explained; "working with education is increasingly challenging because we have such little influence with those partners." Key: blank = no evidence of change, * = some evidence of change and **= strong evidence of change.

LA number		Evidence of survey findings being used to improve policy and practice across the domains of well-being					Risk factors are recognised	Children know about the survey	Children have taken part & seen the findings	Staff value voice	Children feel that they have a say in decisions
	1	Relationships	Resilience	Rights	Recovery	Well-being					
	Documents	*	*	*	*	*	*		*	*	
1	Interviews	*		*	**			*	**	*	
	Documents	*	*	*	*			*			
2	Interviews	*	*	*	*	*		*	*	*	
	Focus groups	*	**	**	*	*		**	**		**
	Documents	**	*	**	*			*	*	**	
3	Interviews	**	*	**	*		*	**	**	**	*
	Documents	*		**	*		*	*	*	*	
4	Interviews	**	*	**	*		*	*	*	*	*
	Focus groups	*		*		*			*		*
	Documents	*		*					*	**	*
5	Interviews	*	**		*	*	*	*	**	**	*
	Focus		_					_			
	groups	*	*	*	*			*	*		*
	Documents		*	**		*		*	*	*	*
6	Interviews	**	*	**	*	*	*	*	*	**	*
	Focus										
	groups		*	**	**	**		*	*		**

Chapter 6 : Discussion

This evaluation set out to understand the impact of the Bright Spots programme. At the start of the evaluation, a logic model was created with an anticipated range of short, medium, and longer-term outcomes (Appendix 2). The outcomes from the logic model are set out in a chart (page 49) along with where we found evidence of LA's achieving those outcomes. The evaluation found that some LAs were able to make small immediate changes to policy and practice in response to findings, but others required more strategic longer-term planning to address issues such as placement sufficiency and improving social worker retention.

The findings suggest that the LAs in the evaluation were making changes across all the Bright Spots domains of relationships, resilience, rights, and recovery. The domain where LAs had focused most was on children's rights, followed by relationships, then recovery and resilience. There was some evidence of cultural change with young people's well-being and listening to young people's voices being given a greater priority. Changes were seen in the language and terminology used in policy documents and participation team managers being included in senior management teams. However, more sustained changes to policy and practice were dependent on factors such as having a stable senior management team and senior management valuing child participation. In a LA where there had been a high level of staff turnover, including at a senior management level, changes that were made as a result of their Bright Spots findings were not sustained.

Many of the Bright Spots findings were not surprising to LAs, who already knew their statistics on placement stability and social worker retention and knew that children looked after were at higher risk of bullying and less likely to have a good friend. However, what the findings did do, was provide an evidence base allowing professionals to present the findings to corporate parenting boards and use the evidence to make a case for change. The survey also allowed LAs to focus on areas of well-being such as having a pet or promoting positive body image, which they had not previously recognised as important.

In some LAs, an unintended outcome was that participation workers and Children in Council members felt that their voices were given greater weight in the LA's decision-making. Some participants felt that Bright Spots had strengthened the work of the participation team

because the surveys were linked to Coram Voice and developed by university researchers with young people.

Some LAs were already demonstrating Bright Spots of practice in specific areas even before they used the survey with their children. Stability, particularly at senior management level, and an established participation team and Children in Care Council were common in these LAs. Frequently the same participation worker had been running the Children in Care Council for many years. Senior management support of participation, particularly at director level, 'set the tone' for how participation was viewed within the LA. The involvement of the virtual school, health services and a social work culture that encouraged reflective practice were also present in LAs that were able to make changes.

Achieving better outcomes could be hindered if social workers were not 'on board.' Some professionals were concerned about the survey questions, particularly around family time, as they felt that these could be distressing for children and young people. Further exploration within these LAs might be useful to explore how family time is planned, arranged, and discussed with children and young people. High staff turnover also prevented progress. Those LAs where participation was on the periphery of services also found it harder to sustain changes. Where change did occur, some participants felt that this happened too slowly and changes could take too long to implement, particularly in larger LAs.

It was unclear whether the intended impacts reached all beneficiaries. In some LAs there were clear structures in place for sharing the Bright Spots findings, and clear communication about changes to policy and practice as a result. Findings were reflected upon and discussed at team meetings, with social workers encouraged to think about all the children on their caseloads. Fostering and placement social work teams were also aware of the findings and social workers discussed the findings with foster carers. However, in other LAs findings were not communicated clearly. One LA had implemented changes as a result of Bright Spots, and young people who attended the focus group were aware of these changes, but some of the social workers in the same LA were unaware of the Bright Spots Programme or the findings. Another gap in dissemination was to the fieldwork teams who could be responsible in some LAs for up to 50% of all the children in care. There were difficulties in disseminating findings to fieldwork teams due to competing priorities, court deadlines, and greater staff turnover.

However, it was acknowledged by those interviewed that many of the findings in Bright Spots were very relevant for fieldwork teams. It would be beneficial for the Bright Spots team and LAs to consider how best to share findings with these teams.

We wondered whether contextual factors such as running the survey over multiple years or other parallel LA interventions were likely to have influenced outcomes. However, as only six LAs took part in the evaluation, due to the impact of Covid-19, it is difficult to evidence whether running the survey over multiple years had any influence. Two LAs had committed to running the survey on an annual or biannual basis, and those LAs demonstrated a level of cultural change. However, there was also a LA whose children had completed the survey once where there was evidence of cultural change and another who had used the survey twice but had not managed to make sustained changes. Another LA had used the survey on one occasion but had plans to repeat it. They viewed repeating the survey as an important step in sustaining improvements. Therefore, whilst running the survey multiple times might be indicative of improved outcomes, the small sample size meant that it is was not possible to fully address this part of the research question.

Four LAs were also using other new interventions alongside Bright Spots. While the LAs selected for the evaluation were based on a range of criteria, the ones who eventually took part might have been those who were more interested in service development and improvement. The LAs in the evaluation were moving towards a more therapeutic way of working with children and young people through the use of evidence-based approaches. Some professionals felt that the focus on the child's voice in the Bright Spots Programme led to a more therapeutic and relationship-centred way of working in their LA. For other LAs, Bright Spots findings had been used to make the case for increasing spending on existing provisions or interventions.

Impact of Covid-19

The fieldwork started in January 2020 and was due to finish in May. Interviews and focus groups had been arranged for March, April and May but had to be cancelled due to lockdown. Interviews and focus groups recommenced in July 2020 and moved online finishing in September. Covid-19 had an impact on how many LAs were able to take part in the evaluation and the number of young people who participated in the focus groups.

52

Interviews with professionals from 3 different LAs took place after lockdown and inevitably the impact of the pandemic was discussed. Professionals described development work that had begun in response to their Bright Spots findings as being paused. Planned events had been cancelled, such as the camp to promote friendships or a marketplace event to encourage hobbies. Some Children in Care councils had moved to meet online, but in other areas, they had stopped meeting. Face to face meetings between children and their birth families had been cancelled during lockdown and moved online. Some young people found it difficult to communicate with their social workers online and reported that they were not replying to their messages.

However, there were also positives reported. As family time was moved online, foster carers became more involved in facilitation. Whilst there needs to be support in place for foster carers and careful consideration of the views of the child, in some cases this has led to carers now being willing to supervise time between the child and family members and children felt it had made family time feel more informal and 'natural'. Some young people also responded positively to online communication with their social worker or PA. One team leader spoke about how the move to online took the pressure off some young people at reviews and meetings, and they were much more communicative. A participation worker described how one young person 'found her voice' through using the chat function in Zoom, where previously she hardly spoke. Moving online had also allowed children who were placed out of the local area to become involved in group activities that they would not previously have been able to attend, if they had been in person. LAs had created innovative ways to keep activities going for children and young people. One LA provided young people with a bag of ingredients and did a cook-along via video. Another LA had set up online quizzes and activities for children and young people.

Improvements

Professionals and young people were asked about how the Bright Spots Programme could be improved. One suggestion that was made by professionals in different LAs, was that the survey could be adapted to be accessible to children with complex disabilities. One professional also felt that the needs of unaccompanied asylum seekers could be further explored, although careful consideration would be needed on how this could be achieved without those young people feeling stigmatised. One professional suggested that Bright

53

Spots would be improved by a follow-up holding in-depth focus groups to explore young people's perceptions. However, this suggestion was already something that several LAs were already doing by using the Children in Care Council or participation events to delve further into specific findings.

Professionals were predominantly positive about the Bright Spots programme; they appreciated the weekly updates and positive communication from Coram Voice whilst they were undertaking the surveys. They spoke positively about the work that Coram Voice had done with them around the results including focus groups and feedback events for professionals and young people. Professionals liked the positive approach of Bright Spots, and how it highlighted strengths in addition to areas of improvement.

Young people also spoke positively about Bright Spots, they reported finding it 'easy' to complete the survey. Their suggestions for improvement were to ask fewer questions and to put the Bright Spots logo onto the survey.

Conclusion

The evidence of outcomes chart (page 49) illustrates where we were able to find evidence of change. There was evidence to support claims of changes to policy and practice in the Bright Spots domains of relationships, resilience, rights, and recovery, with the highest number of changes taking place in rights and relationships. Organisational drivers and enablers of change were also evidenced in some LAs that were already achieving some Bright Spots of practice. Unsurprisingly, there was less evidence of improvements to overall well-being, as the impact of policy and practice changes would be likely to take some time to have an effect. There was also less evidence on how LA's had responded to indicators of risk of low well-being. LAs seemed to have a better understanding of risk factors for adolescents but less understanding of the factors that affected younger children. There were very few examples of strategies or actions which targeted children under 11 years.

We did find evidence that in most of the LAs, children and young people, foster carers, and professionals knew about the survey and that children and young people had the opportunity to complete the survey and see the findings. There was also evidence of the value staff placed on the child's voice and most young people and children who were in focus groups felt they had a say in decisions and how the services they received were run. The evaluation showed how even when professionals knew about and were acting upon the areas that needed improvement, the Bright Spots findings were powerful in providing additional evidence that was used to gain additional funding or to advocate for change. The evaluation found that participating in the Bright Spots programme has led to culture change in some LAs, resulting in a change of language and attitude in how to deliver services, with children's voices taking a much more central role.

Appendix 1 Method

The evaluation set out to understand the overall impact of the Bright Spots Programme and to answer the following questions.

- What was the impact of the Bright Spots Programme on the outcomes as set out in the logic model and were they likely to be sustainable?
- Were there particular features of the Programme that made a difference or had no effect? What helped or hindered outcomes to be achieved?
- Did any impacts reach all intended beneficiaries?
- What contextual factors such as running the survey over multiple years, or other parallel LA interventions were likely to have influenced outcomes?
- What unintended impacts (positive and negative) did Bright Spots produce?
- How were LAs who were already demonstrating Bright Spots of practice achieving them?

Three different types of data were collected: documentary evidence, interviews with professionals in six LAs and focus groups in 4 of the LAs with looked after children and young people. Due to the impact of Covid-19, interviews after March 2020 and the focus groups were held online.

Sample

Due to Covid-19 restrictions, six LAs participated in the evaluation. They were selected based on the following criteria:

- Were already demonstrating three or more Bright Spots at the time they engaged with the Programme.
- Had very few Bright Spots and lots of areas where they were doing worse than other LAs when they engaged with the Programme.
- Had undertaken the Bright Spots surveys on only one occasion or had taken part on several occasions.
- Had shown improvement between surveys.

The LAs selected included a small rural, a large county, and city councils and were located in the North, Midlands, and South. They also ranged in their most recent Ofsted rating: four

had been rated as 'good' or 'outstanding', and two LAs 'required improvement' in their provision of services for looked after children.

Within each of the consenting LAs, a 'champion' was identified who acted as a key contact. The champion helped to identify the most appropriate professionals to be interviewed and these included: policy and development workers, principal social workers, service leaders, social workers and team leaders (in children looked after, leaving care and fostering teams, and one team leader of a fieldwork team), independent reviewing officers (IROs), virtual head teachers, education welfare officers, learning co-ordinators, a designated nurse for looked after children, participation managers, and participation officers.

Data collection

The fieldwork started in January 2020, was put on hold in March 2020 due to Covid-19, and recommenced in July 2020.

Documentary evidence was assembled from a range of sources, including:

- Correspondence between the LAs and The Rees Centre or Coram Voice that recorded planned or actual changes.
- Examples of work that the LAs had undertaken e.g. feedback on days held with Children in Care Councils.
- Minutes of LA meetings held to reflect on findings or action plans.
- Documents where findings from Bright Spots had been included or that highlighted changes to policy or strategy e.g. Virtual School annual report, Corporate Parenting reports, pledge to children looked after, participation team annual report.

Interviews with professionals (n=54) Individual interviews were carried out with 54 professionals in six LAs. In one of the LA, a looked after team meeting was attended to gather eight social work views. The purpose of the interviews was to document the very individual ways in which the LAs had responded to their Bright Spots reports. The method of interviewing professionals chosen was the Success Case Method. The method combines, "the ancient craft of storytelling with more current evaluation approaches of naturalistic inquiry and case study."⁶ It employs purposive sampling focusing the bulk of its inquiry on a

⁶ Brinkerhoff, R. O. (2005). The Success Case Method: A strategic evaluation approach to increasing the value and effect of training. *Advances in Developing Human Resources*, 7(1), 86-101. Page 91

relatively small number of individuals. The method is based on the idea that we can learn best from those who have been most successful in implementing a policy/practice change and from those who have been the least successful.

The Success Case Method is useful, as it allows participants to describe in detail what they feel is the most significant impact of the Bright Spots Programme, and the drivers or inhibitors of change. The critical dimensions of success or failure can also be explored and documented. In the Success Case Method, issues that contribute to success or otherwise are grouped into the following 'buckets' (Table 1).

What was used	What results	What good did	What helped?	Suggestions
that worked?	were	it do?		
	achieved?			
How?	What is the	What was	What	What might have
With whom?	measurable	achieved?	contributed to	increased the level
When?	difference?	Why was this	the success?	of success even
Under what	How do you	important?		further?
circumstances?	know – what	What negative		
What was the	evidence?	outcomes were		
most helpful?		avoided?		

Table 1: The Success Case Method Interview 'Buckets'

Professionals were asked about their involvement with the Bright Spots Programme, and how the survey findings had been used. Individual interviewees were asked to identify a change that was made and why this was important to them. The 'interview bucket' questions then explored these changes in more depth, asking how the change was achieved and the difference it had made. Those interviewees who felt that there had been no change were asked why they thought there had been no effect, the challenges they faced, and what support was needed.

Davies, R and Dart, J (2005). The 'Most Significant Change' (MSC) Technique: A guide to its use. April 2005.

It was not possible to use the Success Case Method effectively in all interviews. Some LAs wanted social workers to be interviewed together, which prevented a detailed exploration of each individuals' views. In some interviews, professionals found it hard to identify a positive or a significant change and focused on the negative findings of the survey. Despite this, professionals were able to identify successes and the 'interview buckets' were a useful tool in exploring these in greater depth. The method was also extremely useful for those interviewees who felt that there had not been any successes, as it allowed for an exploration of the barriers to change sensitively.

Focus groups with children (n=19)

The six LAs were asked to help organise focus groups with their children in care. One LA, which did not have a Children in Care Council, was unable to recruit any young people willing to participate, and another did not respond to our requests. Online focus groups were carried out in four LAs between July and September 2020 and led by Jenny Humphreys from Coram Voice and Dr Shirley Lewis. Focus groups were held after the interviews with professionals had been completed.

Each group was individual to the LA, but followed the same outline:

- Consent
- Ice breaker
- Questions about Bright Spots survey and findings
- Questions around changes made within the LA
- Q sort activity
- Improvements to Bright Spots
- Confirming consent

In total, 19 young people participated (age 7 to 24 years) most of whom were teenagers. Young people were given a £15 voucher to thank them for their help with the evaluation. Fewer young people took part than we had hoped. Turnout was lower in LAs that did not have a Children in Care Council or where it had not been meeting online during the lockdown. For example, one LA who before lockdown had agreement from 22 young people for a face-to-face focus group, was only able to assemble 7 young people when the group had to be rearranged and go online. The focus groups were tailored to each LA, but all followed the same format. The structure of the focus group is outlined in the box below. All focus groups were asked whether they knew about the Bright Spots survey, had the opportunity to complete it and whether they had seen the findings. They were then asked whether they recognised the changes in their LAs that had been identified in the interviews with professionals. Next, they undertook a Qsort activity, ordering the changes from most important to least important. This activity was originally planned as a practical exercise with young people physically ordering cards. To adapt it to an online format, a software programme called Miro was used (https://miro.com/). The participation worker from Coram Voice led this activity, by sharing her screen which had 8-10 post-it notes with short statements linked to the changes the LA had made. Young people then told her where to position each statement in order of importance. There were also some blank post-it notes for young people to add their suggestions to the board. The Q-sort activity was selected because it is participatory, and, as it asks the children to sort a series of statements, it can approach sensitive issues without the need for children to share sensitive stories of their own⁷. After completing the Q-sort activity, the young people were also asked if there were any ways that Bright Spots could be improved. The focus group was designed to be participatory, however in some of the focus groups the activity was still predominately led by the participation worker, whilst in the more established groups there was greater conversation between the young people. There was also a difference in the groups depending on whether they had met online during the lockdown, with one group who had been meeting regularly via zoom generating a lot more discussion and making use of the chat box in a way that other groups did not.

Data analysis:

Data from all the sources (documents, interviews and children's focus groups) were used in the analysis. Evidence of the impact of the Bright Spots Programme was assessed against the following outcome indicators from the logic model:

• Children and young people, foster carers, social workers, and other professionals know about the Bright Spots survey.

⁷ Ellingsen, I. T., Thorsen, A. A., & Størksen, I. (2014). Revealing Children's Experiences and Emotions through Q Methodology. Child Development Research, 14, 1–9.

- All children have been given the opportunity to take part and have seen the findings. Children and young people feel that their voices have been heard and that they have a say in decisions about their lives and feel involved in decisions about how the services they receive are run.
- LAs demonstrate how they used survey findings to improve policy and practice. Risks to low well-being are recognised, and strategies put in place to address them.
- The LAs can identify some of the organisational drivers that promote good practice.
- Staff within the LA value, respect and support the concept of children's subjective wellbeing (cultural and organisational change).

A spreadsheet was created for each LA, and findings from documents, interviews and focus groups were plotted under each outcome (pg. 51). This helped to triangulate the data and build a picture of which outcomes had been met by LAs, and where there were gaps.

Limitations:

The research took placed in 2020, as the first wave of the pandemic and lockdowns were occurring. Data collection had to pause and change to online rather than face to face resulting in fewer young people taking part and the 'outcomes panel' not being able to meet. The method used cannot establish a causal link between the Bright Spots Programme and subsequent outcomes, due to differences in how the Programme was implemented in LAs and the multiple interventions that occur in LAs at the same time. Instead, the evaluation focused on factors that were perceived to have been significant in achieving change.

Appendix 2 Logic Model

Problem Statement

Children's views are not central to service delivery or development. Using available data, we could not identify LAs whose children say they have had a good care experience.

