Pilot Study into the impact of allegations made against foster carers who accessed FISS or FosterTalk services.

Paul Dyson and Judy Sebba

Contact:
Professor Judy Sebba
Director Rees Centre for Research in Fostering and Education
University of Oxford Department of Education
15 Norham Gardens
Oxford OX2 6PY
judy.sebba@education.ox.ac.uk
Tel: 07788 724577
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1  INTRODUCTION.

Foster carers are sometimes the subject of allegations of abuse about children who are or have been in their care. This small-scale study was commissioned by FosterTalk. The following aims were jointly agreed between FosterTalk and the Rees Centre:

- To improve foster carer support following allegations;
- To improve handling by Foster Talk of support to carers who have received allegations;
- To document the impact upon the foster families who are the subject of allegations (both those who received face to face support through a dedicated worker and those who did not);
- To increase retention and recruitment of foster carers and reduce placement disruption following allegations which are not proven.

This is a small-scale pilot for use by FosterTalk to inform possible improvements nationally in services supporting foster carers and a future larger scale study.

2  SCOPE AND METHOD OF THE STUDY.

It was agreed that the focus of the project would be the impact of allegations made against foster carers who accessed FosterTalk and/or the Foster Carers Independent Support Services (FISS) and whose cases were closed as unproven or unsubstantiated between January and July 2013. 37 case records were reviewed and from this review it was agreed that the following number of cases would be identified for a telephone interview:

- 2 carers who continued to foster;
- 2 carers who resigned;
- 2 carers who were de-registered;
- 2 who haven’t received independent support

Ethical clearance was confirmed by the University of Oxford and a briefing on the research was written and given to interviewees to ensure they were able to give informed consent.

In the event only one case was identified who had not received independent support but was able to receive telephone support, through individual membership, from FosterTalk. So the final sample for interview consisted of 6 carers who received independent support and one who did not. Seven telephone interviews were undertaken; this is a small-scale qualitative study and the interviews produced rich data but only from the perspective of the foster carers.

3  CONTEXT.

There were 42,951 fostering households in England on 31.3.14. Between 1.4.12 and 31.3.13, 1856 allegations were made against carers. Of these 862 were progressed to section 47 enquiries. The national data do not record the number of those enquiries that resulted in the prosecution of carers. Carers who are the subject of allegations have a right to independent support as identified in the

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1 OFSTED,(2013) Fostering Services quality assurance and data forms 2012-13, OFSTED website.
2 Op. Cit. P.9
3 Refers to section 47 of the Children Act 1989 and relates to the local authority's duty to investigate child protection concerns.
National Minimum Standards (NMS) 22.12 whilst an allegation is being investigated. Many fostering agencies outsource this requirement and FosterTalk, through its Foster Carers’ Independent Support Services (FISS) is a major supplier of such an independent support service. The NMS are explicit about the nature of that support stating that it should provide information and advice about the process, emotional support and if needed, mediation between the foster carer and the fostering service and/or advocacy including attendance at meetings and/or panels. There is further guidance on the management of allegations against carers in The Children Act 1989 Guidance and Regulation: Volume 4 Fostering Services reinforcing the importance of independent support for carers and also the appropriate and timely provision of information about the allegations to carers.

4 ANALYSIS OF THE RECORDS.

FosterTalk keeps two sets of records – paper and electronic. The paper files held by FosterTalk were analysed to enable the identification of the sample for telephone interviews. The two records between them identified the type of fostering service (LA or IFA), the outcome of the allegation and sometimes the nature of the allegation. However, these are not designed to be full records of the progress of the allegation. The FISS worker supports the carer as required in the National Minimum Standard 22(12) and the whole interaction is carer led; the records are not formal case records and there is no case file, as such, since the records are for: a) Quality Assurance; b) Management Oversight and c) A record of quantity of work undertaken to report back to the commissioners what quantity of service is provided. This explains why there is variable detail in the records with minimal or no detail about the allegation and the children involved. FosterTalk’s policy and guidance on FISS Advisor case recording is to summarise the work undertaken with the foster carers. The content varies dependent on the FISS worker and they are written on a pro-forma designed to record the quantity of work undertaken for payment and audit purposes. The two tables below summarise key characteristics of the carers in the record sample.

| Approving Agency |
|------------------|------------------|------------------|
| **No of Cases**  | **Local Authority** | **IFA** | **Not recorded** |
| 37               | 23               | 11           | 3               |

| Outcome of Allegation |
|-----------------------|------------------|-------------|------------|-------------|
| **No of Cases**       | **Resigned.**    | **Deregistered** | **Continued fostering** | **Not recorded** |
| 37                    | 9                | 8           | 18         | 2           |

Two of the carers who continued fostering accessed the Independent Review Mechanism. Neither was available for interview but FosterTalk did provide a substitute, from carers who used FISS, who agreed to be interviewed.

6 Researcher telephone interview with Jackie Edwards, Professional Advisor, Foster Talk
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The telephone interview sample, described in paragraph 2 of this report, was devised from these records and sought to give a balance of fostering service and outcome.

5 THE INTERVIEW FINDINGS

Seven telephone interviews were undertaken. These included four Local Authority (LA) registered carers and three Independent Foster Agency (IFA) carers. Three continued to foster after the resolution of the allegation (2 IFA and 1 LA carers), two resigned (LA Carers) and one IFA carer was de-registered who successfully challenged de-registration through the Independent Review Mechanism (IRM) and at the time of the research interview was in the process of registering with a new IFA. The LA carer who continued to foster subsequently resigned in part because of the experience of the allegation. The interview was conducted using a semi-structured questionnaire with the opportunity to probe and explore answers; the questions are reproduced as appendix 1 of this report.

Allegations made against carers

<table>
<thead>
<tr>
<th>Nature of Allegation</th>
<th>No in sample</th>
<th>Alleged perpetrator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allegation pertaining to another adult in the house.</td>
<td>1</td>
<td>Son of carers</td>
</tr>
<tr>
<td>Emotional abuse by carers</td>
<td>1</td>
<td>Joint both carers</td>
</tr>
<tr>
<td>Physical abuse/allegation of assault or rough handling.</td>
<td>3</td>
<td>2 male 1 female carer</td>
</tr>
<tr>
<td>Sexual abuse</td>
<td>2</td>
<td>2 male carers</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>7</strong></td>
<td><strong>7</strong></td>
</tr>
</tbody>
</table>

This is a small sample and thereby not statistically significant but it does encompass a range of abuse allegations. At the time of the allegations all carers in the sample were married or partners in a male/female carer household. Male carers and one male member of a fostering household (The IRM case) comprised all but two of the alleged perpetrators. No male carer left the household for the duration of the investigation; one was asked to but refused and the investigating social workers settled for written agreement. There were a number of consistent themes concerning the allegations:

- The allegation ‘came out of the blue – there was a knock on the door’ (carer). All carers reported that there was no warning, the allegation just happened. This made it more traumatic.
- All but one family were not told about the nature of the allegation at the time of being informed. This was a major contributory factor to the overall impact of the allegation on the foster household. Not knowing, was reported time and time again, as a major stressor.
- Not only were carers not immediately informed of the nature of the allegation but the way that they were informed and the timing varied significantly.
- Four carers were interviewed by the police (one was arrested the others helped with police enquiries) and for those four carers that was the point at which they found out the nature of the allegation. The other two heard from their supervising social worker at different points in the process. The carer who went to IRM was not told of the concern about the male in her house for over two years because it only emerged when a CRB check was undertaken on the
individual; this had not been completed previously though he was 21. For the six carers who were the subject of contemporaneous, rather than historical allegations, the time varied from immediately (1 carer) to 9 weeks. The average was four to five weeks and as the carers reported in interview the point at which they were informed depended on the progress of the investigation into the allegation.

- On average it took 4.5 months for the allegation to be processed and resolved. The exception is the carer household who accessed the IRM. At the time of the interview the respondent stated that it had taken 2.5 years and was still not fully resolved.
- At the point of being informed about the allegation, there was also a lack of knowledge about both the way that the enquiry would be conducted and its progress. One carer stated that she had a clear understanding prior to the allegation about how enquiries would be conducted into concerns about foster carers. The rest were less clear; they stated the training focused on what they should do if a child in their care made an allegation of abuse by somebody outside of the carer household. Fostering Services did not, in their assessment and training, focus on allegations about carers. This led the carers to feel ill-equipped to deal with the situation.
- The carers stated that they felt they were judged to be guilty by both their own fostering service (no differences between LAs and IFAs) and had to fight to prove their innocence to the agencies involved. The carer who used the IRM felt that even after a successful appeal there was still a negative judgment of her and she is in the process of changing agencies. One carer summarized the situation:

  ‘The police were respectful it was the fostering service that I had issues with. It is still in mind every day. The service must improve.’

- From the point of allegation to the final resolution carers expressed a strong feeling of total isolation from their Fostering Service/Team, Supervising Social worker and the placing authority staff. They said that people just stopped communicating. In this small sample no significant differences in experience emerged between or within the different types of fostering service (i.e. LAs and IFAs). One carer said that the isolation during the process reinforced for her the feeling of guilty until proven innocent. Another said:

  ‘If you are the subject of the allegation what was clear you are alone’.

Impact of allegations on carers.

- Carers described a range of emotional, health and economic impacts on them and their households as a result of the allegations. The one consistent feature was that ALL of them described the impacts as being extreme The following quotes are typical of the comments made by carers:

  ‘It impacted on every aspect of life...I will never forget- it is always there. If somebody comes to the door who I don’t know I panic.’

  And

  ‘It was horrendous (we were) experienced carers (since 2005) our lives were turned upside down...’
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Emotional Stress.

The most frequently mentioned impact was emotional stress. Carers talked of crying a lot and feeling desperate at the allegation, but also at the removal of foster children who had nothing to do with the allegation. Some spoke of feeling mentally and physically ill. They noted the impact on relationships within the house, both with spouses/partners and any birth children:

‘I cried for days and weeks more horrendous because it was our only income. If that is suddenly stopped financial implications kick in so anxiety of allegation plus financial implications.’

And...

Basically I had regular headaches, sleepless nights (and was) on edge all the time.

- The looked after children placed with the seven carers in this sample were all removed on the day of the allegation or at the latest the following day to enable investigations to proceed. None were returned; one carer stated that she tried hard to negotiate a return unsuccessfully. Carers spoke warmly of the children placed and five of the seven would have been willing to have the children returned. The stress was exacerbated by the removal of foster children who had nothing to do with the allegation. The way that the children were removed caused concern and indeed anger and added to the impact of the allegation. One carer described the removal of a baby placed for fourteen months, who was asleep in bed:

The fostering staff just walked straight upstairs, just woke him up and really upset me. I said wake him gently but they just grabbed him.

- Other carers described children going to school and not returning. All of the carers found the decision to remove children traumatic.

- Carers were angry at the system rather than at the children who made the allegation. One carer was angry with the child who she felt had made a deliberately malicious allegation in an attempt to be returned home — and the anger was reinforced when the child did go home at the time that the allegation was made.

- Anger was expressed in many ways and directed universally at the social workers in the approving and placing fostering services. The degree of anger and frustration varied, and it seemed to be exacerbated by feelings of isolation and lack of both information and communication. There were expressions of anger about both supervising and children’s social workers from outright condemnation to an understanding of their position.

- Most of them understood, to varying degrees, that the allegation required investigation but they could not understand why there was silence from the fostering services. It was expressed most extremely by one carer:

‘They do not give a damn I absolutely loathe them…’

And another representing the views expressed by most of the carers interviewed said:

‘If the SWs had better communication with foster carers (it would be) better all round’.

- That said, there was variation in the overall judgment of social workers by carers. There was a distinction between the support they received prior to and after the allegation, and actually during the processing of it. The impact of the lack of support during it was not mitigated by the better experiences prior to the allegation; the allegation was all consuming.
Economic impact

- There was substantial economic impact following the allegations. One carer household’s income was solely dependent on foster caring income and the carer stated that the family had to consider selling their house. At the time of the interview the final impact was unknown since whilst the family was continuing to foster, they had not had any placements so their income was in jeopardy. Another said simply:

  ‘It (i.e. the allegation) wiped out our savings’.

- With one exception, there was a consistent understanding that children’s prior experiences might well have contributed to them making allegations but that understanding did not lessen the impact of the process. The exception was the carer who considered the allegation malicious.

Training

- Those carers that continued to foster all said that fostering services talked about further training. But they said that they had experienced variable levels of training prior to the allegation. When the interviewees talked about this they said that the safeguarding courses that they attended focused on children making allegations and/or disclosures about abuse outside of the foster home and how to handle that situation. They stated that there was very little discussion of what to do if they were the subject of an allegation. One carer had been invited to attend a specific course on the subject, but had not taken up the offer – and regretted that decision.

FISS and FosterTalk support.

- FosterTalk manages the Foster Carers’ Independent Support Services (FISS) to provide independent advice and support during the process of an allegation. The service is purchased by Fostering Services and the fostering service refers carers to FISS when an allegation occurs. The overwhelming judgment of carers about FISS was extremely positive. It was a lifeline during a dreadful period in their lives. All but one respondent talked about FISS in superlative terms. As one respondent stated:

  ‘The worker we had was fantastic she was clear about what she could do, she was able to give us the confidence that a lot of what we were doing was right’.

And another said:

  ‘(The) worker (was) absolutely fantastic I don’t know how I would have got through it without her; amazing, absolutely amazing I think I would have gone mad.’

- These quotes illustrate the high esteem in which FISS was held. One carer was sceptical about the FISS service because it was purchased by their Fostering Service and therefore was not seen by them as truly independent. But this carer did use the service.
- Five of the carer families were referred by the Fostering Service immediately that the allegation was made, or the following day by fostering service. The other two experienced some confusion on the part of the fostering service before they made the referral to FISS –
one was referred after three weeks and the carer that used the IRM service experienced a considerable delay, after the initial concern was raised of many months though was uncertain of the exact time delay.

Carers received FosterTalk/FISS support by:
- Telephone
- Face to face
- Email and Text

- Carers reported that the type of support provided sought to meet their needs at the various stages of the process. They noted that FISS workers contacted them immediately FosterTalk allocated the referral and they appreciated this quick response especially given their depth of isolation. The emotional support gained by having somebody ‘there for them’ was inestimable and they frequently made statements that they did not know what they would have done if it had not been for FISS.

- Carers appreciated the knowledge that FISS workers had about the system (it was clear from the descriptions of the carers that they had in-depth knowledge of the investigative processes). This knowledge appeared to offer some reassurance to the carers. The following quote summarizes the range of views expressed to reinforce the positive experience of the FISS service.

  ‘She (FISS worker) was there 100% she gave me her home number. (She was) very knowledgeable about the process and system. This was helpful we all like a shoulder to cry on but she was very knowledgeable. When she said she was going to do something she did it...’

- Carers were enormously appreciative of the speed with which FISS workers undertook tasks.

- FISS service was very helpful in negotiations, attending key meetings (panel) to support carers and ensuring that carers were aware of their rights and that they should get legal support in formal police interviews. Indeed some felt that without this intervention the process would have dragged on even longer. Events like Christmas become major issues because they add substantially to the delay in the perception of the carers – the objective reality may or may not be different but it is an observation they made and they perceived FISS as being able to cut through some, but not all, of that delay.

- The carer who could not use FISS deployed the same superlative terms for the FosterTalk service.

- There was a clear understanding by all carers of how FISS is funded – though that did not improve the image of the fostering services in the eyes of the carers – the devastating nature of the impact of the allegation seems to turn them against the fostering service. Carers were clear that the most significant improvement that could be made related to their fostering services. They understood that their supervising social worker could not talk to them about the process but did feel that somebody from their fostering service not directly involved could at least have kept them informed. The lack of communication combined with the enormity of the impact of the allegations were overwhelming and the lifeline was FISS or
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FosterTalk. One specific suggestion from two carers was that there ought to be automatic funding for however much independent support was needed rather than the process of FosterTalk having to negotiate with the providing fostering services for additional funding.

Conclusions

This pilot study analysing 37 records and interviewing seven foster carers against who unproven allegations were made suggests that the impact of allegations on foster carers is devastating and extensive. The implications were:

- Life changing – break up of foster family through removal of children and extreme stress on the marriages and carers’ birth children;
- Emotional – major stress, illness, long-lasting fear etc;
- Economic – reduction or removal of income.

Wider implications on national fostering services include:

- Resignations of significant numbers of foster carers where allegations are unproven;
- Severely damaged relationships between foster carers and their fostering services, and re-registering with different providers;
- Costs of investigations (which have to be balanced against the duty to investigate), de-registrations and recruitment of replacement carers;
- Potential for experiences of allegations to be communicated to potential carers and to contribute to putting them off fostering.

Recommendations

There would appear to be three areas in which improvements might be made:

1. Reducing the number of allegations
   There is little evidence from this small-scale study of what might prevent allegations and this should clearly be a major priority given the impact and costs associated with them. What evidence do we have if any, that the process of selection of carers, their training and subsequent on-going supervision and support of them might reduce the proportion of allegations? What do we know about the reasons why those making allegations do so and what might prevent them from making allegations?

2. Improving the process when an allegation is made
   This small-scale study does suggest that three major problems arise as soon as an allegation is made:

   2.1 The National Minimum Standards are often not being followed and arguably could be made regulatory. Neither the nature of the allegation, nor the process of inquiry is made clear to the foster carer – there may be good (mainly legal) reasons why the nature of the allegation cannot be detailed but this lack of information and the lack of understanding about the process of inquiry that will occur has unacceptable consequences for the foster carer and their family. Carers in this sample described little or no training on what would happen if
they were made the subject of an allegation. They all stated that their fostering service training was heavily weighted to learning about what to do if a child made an allegation either about their past or against an alleged perpetrator outside of the home. So they were inadequately prepared for the event of them being the subject of the allegation. Fostering Services should consider providing such training, perhaps post-approval. The evidence from this small sample is that it would be valuable, though not by any means eliminate the impact. The foster carer is immediately isolated by the fostering service usually withdrawing all contact, in particular the supervising social worker who may have been the key source of support – this exacerbates significantly the stress and confusion. An independent advisor should be made available immediately – in effect this is what FosterTalk provides to those whose fostering services who commission FISS but only once they are informed through a referral. The provision of independent support needs to be automatic and immediate for everyone who experiences an allegation;

2.2 The delay which occurs in some cases – in this study in two of the seven instances, carers experienced a significant delay which increased the negative impact of the allegation. This may reflect the needs of the investigation but also suggest lack of priority and resources allocated to this process and while improvements appear to have been achieved, there is room for further improvement.

3. Improving the support received
The overriding view of the foster carers in this study was that the FISS/FosterTalk service was exemplary. There were no major recommendations for improved practice or support from this service, only for the fostering services themselves. However, what independent support if any, is being provided to foster carers nationally who experience allegations and are not referred to FosterTalk/FISS?

Implications for future research
While there has been an excellent recent review of research on allegations (Biehal and Parry, 2010) and new research on the impact on the children of allegations being made (Biehal et al., 2014, NSPCC), we have been unable to identify any recent studies (Swain, 2006) on the impact of allegations on foster carers.

A significant study in this area would benefit from a thorough analysis of the characteristics of both foster children and foster carers involved in allegation cases and comparison to the fostering population at large in order to consider the significance of such factors as age of child, number of previous placements, years of fostering experience by the carers, training received and family structure in the fostering home. This type of analysis would necessitate analysis of large datasets e.g. the CLA data and the information held on carers by organisations such as LAs and IFAs, FosterTalk, BAAF and The Fostering Network.

Secondly, intensive interviews with perhaps 10-15 carers in each of the three groups identified in this pilot – continued fostering, resigned following allegation and were de-registered by provider – together with interviews with the fostering services involved so that carers’ self reports could be triangulated with other perspectives, would enable the testing out of the findings from this small
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The pilot study focused on a much larger number to give greater confidence in the findings. These data could be compared to interviews with those whose fostering service do not commission Independent support.

Significant progress might then be made on how to reduce the proportion of allegations made and how to improve the process and support needed to ensure that both thorough investigation and better outcomes for foster carers and looked after children can be achieved simultaneously.
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References


APPENDIX 1

Pilot Study into the impact of allegations on foster carers:

Interview schedule

NB: Ensure consent form signed and received and that respondent understands the project.

- Tell me about the allegation that was made in 2012/13
  Probe was there a gap between being informed about the allegation and detail of the allegation being explained.

- Were you made aware immediately that you were entitled to support?

- How long after the initial allegation was support made available?

- How long was it from the initial allegation to the resolution?

- What type of support was offered (e.g. telephone, face-to-face, information, emotional, practical, referral to other services including any from other sources than FosterTalk)?

- What impact did the allegation have on your life?
  - probe emotional, practical, job, income;

- What impact did the allegation have on your family
  - probe enforced separation from partner, children etc.

- In what ways did the support help?

- In what ways could the support have been improved?

- Is there anything else I haven’t asked about that you want to add?

Thank you very much for your help.