

Transitions Policy

Good Practice Guidance

in

Moving children to Adoption

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**The Context: What we know from research**

**Stats for 2019**

78,150 children were in the care of local authorities on 31st March 2019, up 4% on the previous year.

3% (2,190) were placed for adoption

3,570 looked after children were adopted during the year ending 31 March 2019

The vast majority of adoptions are to strangers.

When children move from foster care to adoption this has typically happened within a tight timeframe of 7 – 14 days and it has been common practice, once the child has moved, to not see their previous primary carer for several weeks, if not months (Boswell and Cudmore)

There have been concerns regarding this practice model. Research (Selwyn, 2015, Neil, Young and Hartley, 2018) shows that in some cases, these rather abrupt moves are distressing for children and for adopters and foster carers. In these cases, there may be links to poorer child outcomes and even disruption. Professionals have expressed uncertainty about how to plan and support these moves in a more child focused way.

Following a practice development project facilitated by the University of East Anglia (UEA) between 2016-2018 the Moving to Adoption model for supporting children’s moves to adoption was developed by Elsbeth Neil, Mary Beek and Gillian Schofield.

The model has been presented at a workshop to a number of RAAs and LAs. Adoption West facilitated a workshop in February 2020 and are consequently promoting the model as best practice.

Although practice in this area has developed over the last year or so, it has been in an organic way rather than a consciously adopted regional model.

More work will be necessary to promote and develop the practice across Adoption West and our six LA’s, particularly with the fostering providers. Practice guidance and information for foster carers has been produced by UEA

[S:\All\_Shared\Adoption West\FamilyFinding-Children\Transistions\Moving to Adoption Key Principles Leaflet for foster carers and adopters.pdf](file:///S:\All_Shared\Adoption%20West\FamilyFinding-Children\Transistions\Moving%20to%20Adoption%20Key%20Principles%20Leaflet%20for%20foster%20carers%20and%20adopters.pdf))

[S:\All\_Shared\Adoption West\FamilyFinding-Children\Transistions\Foster carer training - preparing a child for adoption and supporting the move.pptx](file:///S:\All_Shared\Adoption%20West\FamilyFinding-Children\Transistions\Foster%20carer%20training%20-%20preparing%20a%20child%20for%20adoption%20and%20supporting%20the%20move.pptx)

Fundamentally the transition from foster care to adoption needs to be considerably longer than traditional plans, with on-going contact with the primary carer post placement. This concept has been positively received by Adoption West and fostering services.

**The key principles**

* Opportunities for the foster carers and adopters to build a positive relationship should be promoted at an early stage in the moving process, as this is helpful to the success of the move.
* The child and the adopters should be given opportunities to become familiar with each other though play and observation prior to adopters undertaking any caregiving tasks.
* All arrangements and timescales should focus on the needs of the child.
* The child’s feelings about the move should be held in mind and responded to sensitively.
* Some continuity of foster family relationships and environment will support the child in managing the loss of the foster family and building trust in the adoptive family
* There should be flexibility in the planning, in consultation with the child, the families and the social workers, to allow for emerging circumstances and needs.

**Stages of Transitions**

**Stage 1 Getting to Know each other**

Stage 1 refers to a period of time after the match between the adopters and the child has been identified. The aim of Stage 1 is to prepare for the intense period in which the child makes the move to the adoptive home (Stage 2). Stage 1 involves a gradual process of familiarisation in which the foster carers and the adopters, and similarly, the adopters and the child, can get to know each other and begin to build trust, without the adopters taking on caregiving tasks for the child.

Stage 1 should begin with some face to face contact between the foster carers and the adopters, providing opportunities to get to know each other as adults and to begin the process of working together to support the child through the move i.e. meet for coffee, phone calls, emails meet at the foster home without the child present.

The plan should then progress to the observe and play sessions which should be considered against the child’s needs.

*Case example Stage 1:*

*Getting to know each other Observe and play visits for Toby (9 months) Toby had been in foster care for 6 months. He had recently developed a selective attachment to his foster carers and was reluctant to accept care from anyone else, even familiar adults. His foster carers and social workers felt that he would need additional time to become familiar with his prospective adopter before they began caregiving tasks for him. A series of Stage 1 visits were planned, over 5 consecutive days, as follows:*

*Day 1 The adopter and the foster carer meet for coffee without Toby*

*Day 2 The adopter spends a morning with the foster carer and Toby, observing all of the foster carer’s caregiving tasks and play activities*

*Day 3 The adopter spends an afternoon with the foster carer and Toby, observing all of the foster carer’s caregiving tasks and joining in some play activities*

*Day 4 The adopter spends a morning with Toby, taking a lead in play activities*

*Day 5 The adopter spends an afternoon with Toby, playing and accompanying the foster carer to the park where they play with Toby on the swings and in the sand pit*

*These daily visits helped Toby to become familiar with the adopter and to see them as a person who he could trust enough to engage and have fun with. They also enabled the adopter to feel confident in taking the next steps of caregiving tasks for Toby.*

*Case example Stage 2:*

*Getting to know each other Observe and play visits for Alfie (5 years) Alfie had a history of several moves and changes of caregiver. A previous adoption placement disrupted after three months. Alfie was moved to a new foster home where he settled well. After 9 months, new prospective adopters were identified.*

*Alfie was well prepared for his new family by his social worker and foster carer. They worked together, showing him photographs of the home and family, giving him simple information and answering his questions. He said that he was worried because he didn’t know the adopters and he didn’t know what his bedroom would be like. He was reassured when he was told that he would get to know them a bit at a time, while still living with his foster family, and that he would visit the house and his bedroom with his foster mother before he moved.*

*The ‘observe and play’ sessions for Alfie spanned Christmas and covered 30 days, as follows:*

*Day 1 Adopters visit foster home (1 hour)*

*Day 2 Adopters attend Alfie’s 5th birthday celebration at local park*

*Day 4 Adopters visit foster home after school, to observe and play (2 hours)*

*Day 6 Adopters visit foster home after school, to observe and play (2 hours)*

*Day 7 Adopters send card to Alfie*

*Day 9 Foster carer takes Alfie to adopters’ home, for lunch*

*Day 11 Adopters visit foster home after school, to observe and play (2 hours)*

*Day 12 Adopters visit foster home after school, to observe and play (2 hours)*

*Day 13 Adopters attend Alfie’s school play with foster carers*

*Day 15 Adopters visit after school and take Alfie out to tea, with foster carer*

*Day 19 Adopters attend school assembly and ‘goodbye from class and teacher’ ritual with foster carers*

*Day 22 Adopters visit for afternoon (observe and play)*

*Day 23 Christmas eve – adopters visit in the morning and visit local park with Alfie*

*Day 24 Christmas day – Facetime call*

*Day 25 Boxing Day - Facetime call*

*Day 28 Adopters visit foster home 10am – 4pm. Play, make lunch for Alfie and foster carer*

*Day 30 Local trip out •*

*These observe and play sessions enabled Alfie to become very familiar with the adopters and to feel confident and happy that they would become his parents.*

*• The visit to the adopters’ home after the first week of contacts was effective in reducing Alfie’s anxiety. After the visit he frequently referred to his new bedroom, the family cat and other elements of the house and he was able to ask more questions and begin to anticipate the reality of the move.*

*• The schedule enabled the adopters to be present for key events in his life (his birthday, the school play) and to be part of the process of letting go of his life in the foster home (attending the school farewell assembly). • Some sessions involved the foster carers and the adopters sharing enjoyable activities (the school play, a restaurant meal) conveying a shared commitment and interest in Alfie and his well-being.*

*• The schedule included face to face contact but also contact when apart (the adopters sent a card when there was a gap in the visits, facetime calls were made) – demonstrating that the adopters were continuing to hold him in mind even when he could not see them.*

**Key principles at Stage 1**

• Opportunities for the foster carers and adopters to build a positive relationship should be promoted at an early stage in the moving process, as this is helpful to the success of the move.

• The child and the adopters should be given opportunities to become familiar with each other though play and observation prior to adopters undertaking any caregiving tasks.

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**Stage 2 Making the Move**

Stage 2 covers the period of more intensive visits and contacts that culminate in the child’s official move to the adoptive family. Stage 2 begins after the Stage 1 contacts have occurred. Two indicators will determine when it is time to begin Stage 2. Firstly, the foster carers and the adopters will have established some trust and rapport and will feel ready to work positively together on the moving plan. Secondly, the child will feel comfortable in the presence of the adopters, enjoying their company through playful activities, with the foster carer remaining near at hand.

The aim of Stage 2 is for the adopters to feel confident in caring for the child on a day to day basis and for the child to indicate trust in the adopter’s ability to meet their needs.

The time frame for this period is generally between 7 and 15 days maximum depending on the age and child’s needs.

**Key principles at Stage 2**

• All arrangements and timescales should focus on the needs of the child.

• The child’s feelings about the move should be held in mind and responded to sensitively.

• There should be flexibility in the planning, in consultation with the child, the families and the social workers, to allow for emerging circumstances and needs.

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**Stage 3 Supporting relationships after the move**

Stage 3 of the model covers the period from the placement day through to the first statutory review. The full range of relationships are significant through this stage – including those between the adopters and the child, the foster carers and the child, the foster carers and the adopters, and those of the social workers between themselves and with the child and the families. In some cases the child/ adopters’ relationships with birth family members also need to be supported.

The frequency and nature of the foster carer’s post placement visits need to be highly individualised, primarily according to the needs of the child but it also shaped by the capacities of the foster carers to support the adoptive family and the relationship that has developed between the foster carers and the adopters.

For example, a child with a history of anxiety may benefit from daily contact for the first few days and reducing over a period of four to six weeks whereas an older child may manage with regular planned Skype calls and some visits.

**#Key principles at Stage 3**

• Some continuity of foster family relationships and environment will support the child in managing the loss of the foster family and building trust in the adoptive family.

• The child’s feelings about the move should be held in mind and responded to sensitively.

• There should be flexibility in the planning, in consultation with the child, the families and the social workers, to allow for emerging circumstances and needs*. (Moving to Adoption Practice Handbook)*

See the full guide here:

[S:\All\_Shared\Adoption West\FamilyFinding-Children\Transitions\Moving to Adoption UEA Practice Programme Handbook.pdf](file:///S:\All_Shared\Adoption%20West\FamilyFinding-Children\Transistions\Moving%20to%20Adoption%20UEA%20Practice%20Programme%20Handbook.pdf)

**What happens before panel?**

*Refer to Adoption West Family Finding Policy July 2020*

*[S:\All\_Shared\Adoption West\Policies and Procedures\Family Finding\AW FF Policy july 2020 final.docx](file:///S:\\All_Shared\\Adoption%20West\\Policies%20and%20Procedures\\Family%20Finding\\AW%20FF%20Process%20Dec%202019.docx)*

**The Linking Meeting/Discussion**

The decision for the potential match rests with the local authority and Adoption West will provide a consultation role. However, in the spirt of partnership working this should include an equal voice and all parties should be able to provide critical challenge when it is in the child’s interest.

Currently the process for agreeing the link between the child and adopters is different in each local authority.

The process for deciding upon a link should include, the relevant LA social worker and family finder involved in the family finding visits and the SW manager and AW senior practitioner or manager.

The meeting should:

* use the Matching Grid to analyse the information from the family finding visits
* agree the family who can best meet the needs of the child.
* consider the child and adopters support needs that will form the basis of the Adoption Support Plan
* confirm the date the proposed match will be presented to Adoption Panel
* agree tasks and responsibilities in the preparation of the adopters prior to presentation at Adoption Panel

*The completion of the Adoption Placement Report will be the joint responsibility of the child’s social worker and the adopter’s social worker, assisted by the family finder where necessary.*

**Information Sharing with Adopters**

Adoption West will be responsible for ensuring the adopters have access to the information about the child that will assist their understanding. This will include a meeting/telephone discussion with:

* the child’s medical advisor
* any relevant medical specialist
* the education provider
* foster carer
* other key people identified by the social worker and family finder
* arranging a Child Information Meeting

**The Child Information meeting**

The purpose of these meetings is to bring together individuals who have significant knowledge and experience of the child, with the purpose of sharing this with the adopters, thereby increasing the chance of a better outcome for the stability of the placement. It collates a chronology and contextualised life story for the child. Also bringing together the factual and emotional chronology of the child’s life and assists in identifying areas that may require support going forward.

The meeting will be held for all children aged over 3 years or defined as “hard to place”. These meetings will be chaired by an Adoption West FF social worker/DTM or TM.

**Who is involved?**

Each **Child Information Meeting** is a unique event relevant to the particular circumstances of the child or children.

Key people who will always be present are;

* Prospective Adopters
* Current Foster Carer
* Child’s Social Worker and any other relevant LA social worker
* Adoption Social Worker

Other people who may contribute are;

* Teachers/Nursery staff
* Children’s centre workers
* Contact supervisors
* Health visitors
* Previous social workers
* Housing/Mental Health/Drugs and Alcohol workers

**What are the potential benefits of the meeting?**

* To support the transition of a child to a permanent placement.
* To provide prospective adopters with information about a child’s past which may not be recorded in more formal reports.
* To receive information about a child’s siblings from people who are involved with them now.
* To give prospective adopters a more rounded picture of birth parents from people who have been involved with them.
* To consider & analyse the current impact of early life experiences on a child and how this could change following a move to an adoptive placement.

**How will the meeting be organised?**

A chairperson will be responsible for coordinating the meeting and ideally there will be a note taker. The chair will aim to create an informal atmosphere to allow a frank sharing of information and an opportunity to ask questions.

A Child information meeting takes time to prepare, however they are incredibly valuable for the child and their adoptive family.

The meeting will take place in a comfortable, private venue and refreshments should be provided. There will be a core group of people who will attend the whole meeting. This core group is likely to be made up of the child’s current carer/s, the child’s future adopters, the child’s social worker and Adoption social worker. Other people invited to the meeting may be given appointment times if they are not available for the duration of the meeting. Reports will be requested from people who are unable to attend.

People invited to the meeting will be asked to bring any significant memories, anecdotes, photos and items. People will also be asked for permission to have their picture taken to form a record of the day and to provide wishes and memories for the child/ren.

The day will be summarised by focussing on the potential impact of the child/ren’s experiences to date on their adoptive placement and future development. Following the meeting a recordof the meeting will be shared with the adopters, this should include any pictures and other information which was on display. (See Appendices for Agenda and invite proforma)

**Meetings between prospective Adopters and children pre adoption panel eg Play Dates**

Further Adoption West guidance is required for managing Play Dates (sometimes referred to as Bump intos). These have taken place for a number of children across Adoption West on an individual basis and it has been agreed these meetings can be considered on a case by case basis but not routinely for all children, until there is agreement and guidance about how to prepare children, foster carers, adopters and panel members. If meetings do take place prior to panel there should be a maximum of two Play dates.

**What happens after panel?**

***Adoption Placement Planning Meetings***

Prior to the Adoption Panel the family finder and/or adopters’ social worker, in consultation with the foster carer and their Supervising social worker, adopter’s social worker and relevant LA social worker for the child, will draft a transitions plan and share with all parties.

The Adoption Placement Planning meeting will be convened for a date as soon as possible after the ADM decision. The meeting will ensure the Adoption Placement Plan is completed and agree the placement and transitions plan. This meeting will be chaired by an Adoption West Manager for the adopters or the Family Finding Manager for children being placed with another agency. (to be reviewed in April 2020)

A minimum of one review meeting will take place during the transitions process in order to

* review the progress of the transition plan,
* make any necessary changes to the plan,
* consider any additional support needed for the placement
* agree the placement date and sign the Adoption Placement Plan.

Given the transition period is significantly longer than traditional plans, it is suggested there are at least two review meetings to review the plan, albeit via Skype or telephone, and agree the placement date. The fist review is held before progressing from stage 1 to stage 2 of the transition plan as outlined in this guidance and before progressing to stage 3 placement of the child.

It should be noted that the shape of transitions has evolved, informed by the UEA research and LA practice models. It is anticipated that with the support of the Local Authority Adoption Service Leads and working alongside fostering services this model will be accepted an adopted across the region.

Appendix 1



**Agenda for Child Information meeting**

1. Attendees

2)Introduction and confidentiality

**Introduction**

The purpose of the meeting is to bring together individuals who have significant knowledge and experience of ------------- with the purpose of sharing this with the adopters thereby increasing the chance of a better outcome for the stability of the placement:

It collates a chronology and contextualised life story for the child

It brings together the factual and emotional chronology of the child’s life and assists in identifying areas that may require support going forward

1. Who is the child? Current presentation
2. Pre birth care and information – 10 weeks
3. First year of life Where/who/health/observations?
4. Pre school – Personality/likes/dislikes etc
5. Starting school - Transition/peers
6. Activities/clubs/hobbies
7. Final observations/comments/areas for support

**Childs History**

Health

Ethnicity

Culture

Religion

Language

Disability

Knowledge of extended family

Loss

Attachment

**Child’s journey in care**

Consistency of care

Contact

Loss of continuity

Health Physical and Emotional

Friendships

Behaviour

**Resilience and community**

Friendships

Activities

Resilience

**How the child will be prepared**

Direct work

Contact

Lifestory

Appendix 2



**Health Visitor**

Thank you for agreeing to attend the Childs Information Meeting. Below are some suggested questions/topics you may find helpful to guide you when speaking to the prospective adopters about the child:

* What is the role of a health visitor?
* How would you describe the child?
* How long have you known the child? At what point did you become involved with them?
* Discuss the child’s development; is he/she meeting her milestones? Are there any issues with regard to attachment?
* Have you seen any changes in the child since you have been their health visitor?
* What is your experience of the child like? How does the child respond to you?
* Do you know the child’s birth family? What were the birth parents like? What was your interaction with the birth parents?
* Are there any concerns about the child’s future development? Does the child have a particular diagnosis? Do you feel the child has any additional needs?
* Does the child have any outstanding appointments or are any follow ups required?
* How do you ensure all the medical information is transferred to the prospective adopter’s GP/ health visiting team?