

Bright Spots Project - Local authorities delivering positive care experiences for young people they look after

Summary

Introduction

Listening to children and young people's wishes and feelings should be universal, but it isn't. First-hand experiences of what amounts to a 'good' care journey should be collected directly from children and young people, but it's often not. In fact, it is most often adults - carers and professionals - who share their own interpretations of what a positive care system does and should look like. Yet there is an urgent need for local authorities to understand how their services have an impact on the children who use them, and how well the needs of children are being met.

Recent progress in this area has shown that children's views are increasingly being sought and reported to feed into policy and practice development (e.g. The Children's Rights Director for England, Ofsted, Munroe). The expansion of advocacy services and the creation of the new rights based Children's Commissioner for England, also signals a commitment to promoting the effective participation of children in services that affect their lives, and to upholding the United Nations Convention on the Rights of the Child (1991). These are just a few examples, which signals that now is the right time to find out directly from children and young people how children's services can improve their lives for the better.

Vision and Aims of the Project

The Bright Spots project is a joint partnership between Voice and the Hadley Centre for Adoption and Foster Care Studies at the University of Bristol, which aims to give local authorities a better understanding of the practices that contribute to a positive care experience. The project, which is funded by the Hadley Trust, is unique as it gives children and young people the opportunity to share, from their own perspective, their experiences of what makes a good care journey.

Once the indicators of a 'good' care journey have been established, the aim will be to use this learning to improve children's services and to share the learning to influence national policy on children in care.

Phases

The project will be delivered in four phases. The first three phases are estimated to take up to 24 months, at which point we will review the project before commencing phase 4.

Phase 1 - setting up the project

We will spend most of phase 1 undertaking an international literature review to establish what is already known about children's views of their care and the way systems currently measure 'good' outcomes. The challenge will be to find research that reports on children and young people's views and system measures that take account of those views, and which are not based on adult interpretations.

We will identify 7 to 10 local authorities to be recruited to participate in the project. These authorities will be selected to ensure we will have access to children and young people in the North, Midlands, South West, South East and London regions. Within each local authority, a senior manager will act as project 'champion' and be the key contact for the project team.

A young people's project advisory group will be created (through membership of Voice's current projects) to advise on the materials produced for the project and to share their views at key stages e.g. focus group session planning.

Phase 2 - identifying the key indicators

Phase 2 will identify the indicators of a 'good' care journey by collecting the views of children and young people, views of professionals and the findings of the literature review.

There will be 12-15 focus groups: one for each local authority participating in the project across England, aimed at a diverse range of children to include the views of children and young people with disabilities, mental health issues, unaccompanied asylum seeking children, children in residential care, children under 10 years old and care leavers aged up to 28. The aim of the focus groups is to test out the literature findings of a good care journey, and for children and young people to share their experiences of a) what is important to them and b) how it could be measured.

A child-friendly leaflet with information about the project will be sent to the participating local authorities to distribute to their children in care councils, participation workers and social workers. Children and young people who have indicated an interest in participating in the focus groups will have to complete a consent form, and an opt-out form and information letter will be sent to the parents (or whoever has parental responsibility) of any child under 16 years old who is deemed not to be 'Gillick competent'.

A roundtable meeting will also take place bringing together the knowledge and expertise of key stakeholders in the voluntary, statutory and public sectors, to ascertain what they think improves a child's journey through care, and how these can be effectively measured. This event will be an opportunity to promote the project even further afield.

Phase 3 - developing key indicators and identifying bright spots

Phase 3 will analyse the indicators and test them out. This will involve using the qualitative material collected using the findings of the literature review, views and experiences of children and young people and views and expertise of professionals. From this analysis, key indicators of a 'good' care journey will be established.

We will then use the key indicators to identify the 'bright spots' of practice within local authority areas, and to identify the policies and practices they have in place that enables them to meet the indicators. Not all local authorities will have 'bright spots' on every indicator, but in this case we will approach other local authorities using information collated by the Dfe, Ofsted and the project teams' knowledge of the social care sector.

At this stage a report will be published including all of the key findings from the project. This will also give the project team an opportunity to review and refine the project.

Phase 4 - Dissemination

The final phase will be to roll-out and implement the project to share the learning from phases 1, 2 and 3 with other local authorities. We will approach several stakeholders to share the findings of the project through their professional links. This learning will then be used to inform national policy and the agenda on children in care.

The overall vision, which focuses on the positive, is that all local authorities should be enabled and encouraged to adopt best possible standards of practice for the children in their care, so that those children have a greater likelihood of reaching childhood being able to fulfil their potential and play a full role in society.

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