Sir Halley Stewart Trust

Parent-and-child foster care; an opportunity for change





A bit about me

- Teenage pregnancy midwife 2006-2009
- Volunteering with isolated women and groups in local community for young mothers
- Foster carer 2012-2016 started peer support group for mumand-baby foster carers.
- RCM Professional advisor for Public Health from 2015
- Other research projects mentoring scheme for pregnant teenagers and young mothers in Freetown, Sierra Leone

I said in the morning I was feeling pains, but my foster carer said she wouldn't be long, and anyway it was normal to feel a few pains at 37 weeks. The baby wasn't due yet, she said.

I was really scared – in the end I rang the ambulance cos the pain was so bad. By the time they got to the house I was pushing and I actually had the baby in the ambulance on my way to hospital. I could tell my foster carer felt bad about it.

I felt so guilty. But she was always complaining about aches and pains. Its been so long since I had my babies, you forget these things.

She told me I shouldn't pick the baby up when he was crying — that I would spoil him. I have to try hard not to but I feel so stressed when I hear him cry like that.

I know its hard for her, but the sooner she gets the baby into a routine, the better.

I did want to breastfeed but at least I know how much the baby is getting now.

Yeah, you were all over the place with feeding — I'm sure the baby wasn't getting enough. We know where we are now.





Effective parent-and-child fostering

An international literature review Nikki Luke and Judy Sebba



Why is this project needed?

The 2014 'Effective parent-and-child fostering, an international literature review' examines a wide range of parent and child fostering schemes in the UK and internationally. (Luke, N and Sebba, J, 2014)

Amongst recommendations for policy and practice:

'Providing more specialist parent-and-child placements with dedicated training and support, facilitating greater peer support, both for specialist carers providing parent-and-child placements and for the parents themselves' (page 20).

Where I started out

- Current training focusses on important issues of safe caring, recording skills, legal framework, assessment skills
- Less or absent training on healthy pregnancy, or promoting infant and mother's mental health
- Regarding peer support, lots of barriers to face-to-face support.
 Not currently an PAC-specific online group
- Research proposal to Sir Halley Stewart Trust. Qualitative study to inform additional training and support
- Interviews with parents, focus groups with foster carers and social workers

Are you a foster carer who has experience of parent-and-child fostering?

My name is Lucy. I'm a midwife looking into how parent-and-child foster carers are trained, so that their training can be improved.

I'm running focus groups in the NE, NW,
Leeds, Warwick, Reading, Milton Keynes,
Dagenham, SE and West Country and
would love you to come. Lunch and local
travel expenses provided.

Please contact me by email, a phone call, text, or Whatsapp if you are interested.

1 Ucy.november@kcl.ac.uk
07565768634
Thank you
Lucy November



Recruiting foster carers

- Recruited foster carers via Facebook, Twitter, local authority and through advisory group network
- Quickly in contact with 30 PAC carers. Generally very poor experiences of training and support
- Very keen to be involved. Between March and July, ran 10 focus groups with 36 carers (30 women, 6 men)
- Geographical spread
- Responder bias
- Almost all organised by a foster carer who then invited others. High level of buy-in from foster carers

Have you ever been in foster care with your child?

My name is Lucy. I'm a midwife looking into how parent-and-child foster carers are trained, so that their training can be improved.

I would love to talk to you about your experience. (£10 vouchers to thank parents taking part.)

Please contact me by email, phone call, text or Whatsapp

lucy.november@kcl.ac.uk
07962230124
Thank you
Lucy November



- Parents harder to recruit
- Aimed for 15 but only managed 8
- From own and colleagues' networks
- All mothers
- Age range of 16-34
- Range of experiences 2 had been in 2 PAC arrangements,
 1 had been in 3 with same child
- Two had had a child or children removed
- One had been in placement with her partner

Common issues for mothers

- Very late assessments and planning meetings. Often did not know the plan until the discharge planning meeting in hospital
- In nearly all cases, the mother had not met the foster carers prior to moving in, which was often just days after the birth
- Where the foster carer was a birth partner, this was not thought through for either woman
- Mixture of experiences of support, many not having the basic support we encourage all new mothers to set up prior to birth
- School run / co-sleeping

Major themes for training and support	Subthemes for Training	Subthemes for support
Quality of current training	Assumed knowledgeFocus on skills for assessment	
Unmet training needs	 Topics identified as important and currently lacking The importance of empowering communication 	
Training methods	 E-learning vs face-to-face learning E-learning as a group learning tool 	
Nature of current peer support		 Isolation and lack of face-to-face peer support Social media peer support networks 'Can just be a moan fest'
Support needs and options		 Unique stresses of PAC role Social media support options

Assumed knowledge

• My first placement ever was a mother and baby placement ... at that point I'd had no parent and child specific training at all. It was kind of 'you're sensible enough, you've been a mum. Come on, you can do this'.

• I was just using my personal way and experience but that was 35 years out of date.

Focus on skills for assessment

• Yes, a one-day course which they whittle down to 4 hours to be delivered within our agency, and it was all about documentation, writing reports. That's all that was in there.

• So in X we all have to do this 6 week - a day a week for 6 weeks - course. Observing, recording, kind of managing contact with family, legal framework. A little bit of the health stuff, but not really. No understanding breastfeeding. A bit of attachment I'd say, safe sleep, but not really.

Unique stresses of the role

- Putting your head above the parapet
- 'Colluding with the mother'
- Holding the social worker at bay
- I had a very disturbed mum when she first arrived, and for the first 3 days couldn't go into the kitchen to make the bottles, cos she was just so overwhelmed ... there was a massive history of DV, so she didn't want to go into the kitchen if K (carer's husband) was in there. And that was really difficult to overcome. I had to work really hard with her initially, and all you've got is a social worker coming and saying 'So, you're refusing to feed the baby'. You just think 'Back off!'. And a few days later, this same social worker just said 'Tell me when. Tell me when to pull the plug, and she's out!'. And that was his exact words. And I said 'No, no, give us some time, we're working on it.' And do you know, she went on to do 7 months and went home with the baby. But they were prepared to write her off.

Topics identified as currently missing

Initial thoughts on topics

- Smoking
- Breastfeeding
- Perinatal mental health
- Facilitating a supportive birth environment

Topics raised through FGs and Interviews

- How to manage endings
- Parenting support for women who have attachment difficulties themselves
- How to use logs in a positive way
- Working with mothers with LD and autism

Cross-cutting theme:

Positive, empowering, solution-focussed communication

Cross-cutting theme; positive, solution-focussed, empowering communication

- I take a person-centred approach ... you need her to learn to recognise what the baby's cries mean, what the different baby's cries are. We normally go through a process of saying 'I bet you've done all your checklist ... you've checked she's not hungry', assuming the best, and that would be the way I would approach it anyway. But did we have specific training on it? No!
- I used to kind of bank it until it was an appropriate time for when they were ready to listen; word it in a way that wasn't like 'you're doing this wrong, you're doing that wrong'. More thoughtful. 'I wonder if' ... that kind of thing.

That crying is driving me mad.
She just needs to stand up and walk around with him

Come here baby, lets stop that crying shall we? Let's give mummy a break.

Thanks Margaret

I'm sure he likes
Margaret more than
me. That's why he
always stops crying
when Margaret picks
him up

Imagine you've always been the primary carer of other people's babies.....

- You're a bottle feeding expert
- You know the importance of good routines
- You have your own baby bath methods
- Babies need to fit around your life with the other children you foster or your own children, and they usually do
- You've noticed your young mum isn't eating much and showering only when you remind her. Is she being lazy or is something wrong?
- When a baby cries, and its not your call whether to pick the baby up or not, this makes you feel anxious and stressed

This is the same time as he cried a lot yesterday. I wonder if Jo has noticed.

He's trying to tell us something isn't he Jo?
I wonder what he needs us to understand about his feelings

Oh, maybe he's got tummy ache again? Perhaps I should walk around with him.

Its good now I'm
getting to know what
his cries mean. I can
always ask Margaret if I
need help. She thinks
I'm a good mum

Next steps

- An E-learning, modular training scheme with opportunities to do pair or group reflection
- A closed Facebook group for PAC foster carers, run by a team with good moderation, clear guidelines, with a focus on informationsharing and positive support
- Opportunities for regional peer support activities, created by group members
- Raising the profile of the role, with more standardisation of practice (logs, familiarisation with FC before moving in, etc)

Thoughts to go away with

- Whether you get to leave the placement with your baby shouldn't be down to luck (the skills and training of the foster carer and social worker)
- Relationships work. Look at Pause. This might be this mother's first opportunity for a relationship with a stable, loving adult. Lets maximise on that!
- We need standardisation of best practice (use of logs, training)
- Some issues need to be addressed at a systems level timing of planning meetings, giving the mother a realistic time frame to address issues (for women with previous removals, would a placement started in early pregnancy be more appropriate?)

Lucy November lucy.november@kcl.ac.uk

