

# RESEARCH BRIEFING

## A STUDY OF FAMILY INVOLVEMENT IN SERIOUS CASE REVIEWS (SCR)



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**JUNE 2010 – JUNE 2012**

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**FUNDER** British Association for the Study and Prevention of Child Abuse and Neglect (BASPCAN)

## WHY IS THIS STUDY IMPORTANT

This study considers the experiences of families and professionals involved in case reviews where a child has died/suffered from serious harm as a result of abuse or neglect (these reviews are named differently in the 4 UK nations, but in England they are known as SCRs). There is a policy expectation in the four UK nations that families will be included in SCRs (Human Rights Act 1998, Working Together 2015) but little is known about practice and about family experiences. There is no clear statement in any of the national guidance about the purpose of family involvement in reviews. The nature of participation can involve family members helping to 'map' their networks and deciding who should be involved in the SCR process, negotiating the 'terms of reference' i.e. the type and process of involvement, contributing information such as family descriptions of experiences, and family evaluation of the process. This list is not exhaustive and the reality of participation is complex, not least because of the tension between individual rights (to be heard and to privacy) and the public interest as since 2010 there has been a requirement to publish SCRs in England. This study sought to develop recommendations for policy and practice on family involvement, drawing on the knowledge and experience of professionals and family members.

## AIMS OF THE STUDY

The study set out to answer the following questions:

1. What are the current protocols and procedures for family participation in case reviews in England, Northern Ireland, Wales, and Scotland?
2. What are the experiences of families who have participated in case reviews and what can we learn from these experiences?
3. What are professionals' experiences of family involvement?
4. What conclusions can be drawn for guiding effective practice?

## HOW WAS THE STUDY DONE?

The study consisted of five, interlinked stages:

1. A review and comparison of all published guidance across the four UK countries.
2. An initial series of expert focus groups to develop interview schedules for later stages and also to reflect on initial findings from the review of guidance and from pilot interviews with professionals and families.
3. Semi-structured telephone interviews with strategic managers and practitioners involved in the family participation aspect of the case review process to explore current practices, challenges and localised developments.
4. Relatively unstructured interviews with family members who had participated in case reviews, using pre-set

prompt questions where appropriate, to capture their experiences and reflection. The use of unstructured interviews allowed family stories to reveal anticipated and unanticipated themes.

5. A final series of consultation events across the four countries to explore the early analysis of data and to extend practice recommendations.

As this study was a qualitative exploration of emerging themes, each stage was informed by learning from the other stages. Professionals and families were interviewed using common schedules/prompts and each set of focus groups used the same frameworks and questions. The early focus group of experts assisted in the sampling process by identifying other professionals in their networks who had substantial experience of family participation. These other professionals were asked to participate in individual telephone interviews and then they identified other professionals with relevant expertise in a process called 'snowball sampling'. The sampling and interviewing continued in this way until responses were becoming repetitive and common data was being generated.

Participants were drawn from all four UK countries and from a mix of urban and rural locations. In total, 139 professionals were involved in the study (via interviews, focus groups or written responses). Professionals included report authors, board managers and chairs, policy makers, service managers and designated policy leads. Representatives from adults and young people from seven families, and two advocates for families whose children were the subject of case reviews, were interviewed. These interview data were analysed with a focus on learning for policy and practice. The researchers identified common themes in this initial analysis which were further refined through the reflections and suggestions of the focus groups and consultation events. Family interviews were undertaken throughout the duration of the project concluding only when the final stages of analysis were underway. Families also provided an internal reviewing process, reading and commenting on early drafts of the report.



## KEY FINDINGS

### Guidance and policy

- England and Wales had a presumption that family member would contribute to SCRs. In Scotland and Northern Ireland, Child Protection Committees and Safeguarding Boards respectively, consider whether family members should be invited to contribute to case reviews on a case by case basis. There is no clear statement in any of the national guidance about the purpose of family involvement. All four nations were revising their guidance at the time of the study.
- A website search of local policy documents about family involvement found that Scotland and Northern Ireland had no local policy to supplement national guidance. In England and Wales most LCSBs relied on stock phrases from the national guidance in *Working Together*. However, a minority of Boards had additional policies and special leaflets for families helping them to understand what to expect from SCRs.

### Professional reflections

- In terms of the purpose of family involvement, four themes emerged from the professionals;
  - A rights perspective: family members have the right to decide whether they are involved or not.
  - Good practice, a child-centred perspective: the family can offer specific material that gives the child a real identity, for example photographs, placing the child in the centre of the process.
  - A view that the family holds key information contributing to learning and the change process: Participation triangulates information and minimises assumptions made based solely on case records or agency reports.
  - An altruistic and cathartic element: Although professionals clearly understood that case reviews are not a therapeutic or support process for families, such reviews could help families cope with their feelings and the aftermath.
- Professionals thought that all relevant people should be involved including, foster carers, extended family and friends. However, professionals recognised that they have a duty of care to vulnerable participants, they need to be sensitive when family members have antagonistic relationships with each other, and that involving children needs very careful consideration.
- Professionals said that barriers to family participation included:
  - Practitioners/agencies could be over-protective of their reputations and credibility when managing the process of participation

- Professional fear of the responsibility of raw emotions, turbulence and resulting harm to participants
- Family members refusing to participate because of past negative experiences with agencies
- Families being involved in legal proceedings at the same time
- Publication of case reviews was not a requirement at the time but was on the policy agenda. Professionals were doubtful as to whether publication would be useful, feeling that change could be achieved without this. Professionals recognised the need for censorship of information to protect families but thought that there would then be a risk of partial reports which would defeat the object of conducting reviews.

### Family Experiences

- Most families found services and practices delivered immediately after the critical incident to be of poor quality, chaotic, confusing, and difficult to comprehend. This impacted on their approach to participation in the case review and subsequent interventions.
- Reasons for participation in case reviews varied but included, wanting to know more about the lived experience of the child, to understand the critical incident better, having a voice (including issues of justice), resolution and repair, and changing and influencing processes and practices.
- A number of themes arose in terms of the process of participating in the review including;
  - Families were often confused about the reasons for, and relationships between, different processes and procedures involved
  - There was tension between following processes and responding to families' emotional needs
  - The process for deciding how the family would be involved and the focus of their participation (who/how/when) is unclear
  - Families were concerned about how their information was used and how accuracy was ensured
- Families wanted to see a connection between their contribution and positive outcomes in their lives. They wanted to understand how their contributions would be used and published.

## KEY RECOMMENDATIONS FOR POLICY & PRACTICE

- Professionals should undertake a careful mapping of the family and their relevance to the review. The researchers suggest a framework for inclusion of "family and significant others" allowing for key individuals in the life of the child to participate. Decisions about inclusion need to be made on a case by case basis.

- Professionals must practice in a way that demonstrates care and recognises the realities of families' lives. Excellent interpersonal skills and careful communication are needed. Translators and interpreters should be used when necessary.
- Families need access to feedback about the learning and proposed change that results from their case review.
- Practice that is grounded in clarity, transparency, negotiation and inclusivity can help encourage family involvement.
- Policy makers need to be clear about the reasons for involving families in case reviews so that they can be involved in a way that does not cause further harm. LCSBs and their equivalents need to develop an information sheet guiding families through the process and what to expect. While the specific details of 'how, when and where' vary between cases, this information sheet needs to include general guidance for setting the terms of reference and allowing family and significant others to participate in this process.

## STRENGTHS & LIMITATIONS OF THE STUDY

### Strengths

The process of 'snowball sampling' used with the professionals meant that the research team were able to hear from those with specific and directly relevant expertise. This issue was studied from the perspective of both professionals and family members. Professional stakeholders were involved in the research process throughout: informing the study design, reflecting on findings and contributing to practice recommendations.

### Limitations

Whilst the research project was able to include young people and professionals who had experience of child participation in case reviews, the extent of child involvement in practice was impossible to gauge and it was therefore difficult to arrive at any firm conclusions. Further work is needed to understand the purpose and extent of child participation and to shape best practice in children and young people's participation in case reviews.



### FIND OUT MORE

**FULL REPORT** <https://goo.gl/p1AXdl>

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