

# The UK 'Looking After Children' Project

## Fit for 'out-of-home care' practice in Australia?

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*This paper, based on material previously presented at the ACWA Biennial Conference in Sydney, describes the design, development and implementation of the 'Looking After Children' practice and management materials in the UK. The paper traces the research and practice background to the trialing of these out-of-home care assessment and planning materials in the UK, where they are expected to be adopted and implemented by all statutory agencies by the end of 1998. The international interest in the Assessment and Action Record is supported by an exploration of the arguments for child-focussed assessment and planning for 'placement as a process – not an event'. Finally there is coverage of the three recently completed pilot projects in Western Australia. An argument is made for the adoption and adaptation of these materials as potential practice standards for the 'State as parent'.*

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This paper describes the design, the pilot project and the implementation of the *Looking After Children* practice materials over a research and development period of more than 20 years in the United Kingdom. The initial research effort was prompted by the crisis of professional and practice conscience and confidence provoked by the death of Maria Colwell in 1973. After the watershed enquiry, the government of the day introduced legislative change to 'prevent another Maria'. The new child care law impacted on services for families, particularly on the practice areas of foster care and adoption – and research funds were made available to monitor the legislative changes.

By 1985, twelve years after Maria's death, the nine research studies had been published (for details, see Appendix 1 on p. 20). Significantly, the senior civil servants in the Department of Health and Social Security (DHSS) (1985) attempted to enhance the quality of policy and practice by integrating and publishing the findings of the poor quality of parenting provided by the 'administrative parent'.

The *Looking After Children* project was triggered by these findings of institutionalised neglect, and the practice materials, particularly the *Assessment and Action Record*, consolidate research knowledge in child development, child placement and social work practice with disadvantaged children and families.

In this paper, the research background to the materials is described in some detail before the UK pilot projects are described. Finally, some attention is given to the efforts in Western Australia to introduce the materials to the child and family welfare agencies. Do the materials 'travel' and fit with multicultural practice in Australia? Are they potential practice standards for 'government as parent'?

### THE RESEARCH AND PRACTICE BACKGROUND

By the mid-1970s in the UK, a number of separate but inter-related public concerns about the nature and quality of child welfare policies and practices culminated in the introduction of the Children Act 1975. The Houghton Committee study of 'tug-of-love' scenarios in foster care and adoption reported to Parliament in 1972, while the 'Children who wait' research study of 2,812 children in the care of the local authority statutory agencies was published in 1973 (Rowe & Lambert) and coincided with the widespread media, public and political concerns identified in the Colwell Report (1974).

In important ways, on a number of conscious and unconscious levels, Maria Colwell's death touched public concerns. She was a 'tug-of-love' child who was under the supervision of her 'administrative parent', the Social Services Department and her case

manager, who failed to protect her despite many reported 'concerns'. As a result of this, the Children Act 1975 was launched with public and political expectations that 'there would never be another Maria'.

Important legal, policy, administrative and practice changes were introduced to shift the balance of the rights of the child in care, from the birth parents to the foster parents and the 'administrative parent' (the local authority Social Services Department). For example, if a child was in the care of foster parents for three years, the carers could apply to a court to adopt the child. The underlying practice principles of the Act were informed by such concerns as acting 'in the child's best interests' and the importance of time as a significant variable in the care of a child.

Research money was made available to monitor the impact of the new legislation on the various stake-holders in the care system. This resulted in nine research studies being commissioned to report to Parliament on the 1975 Act. The studies had been carried out in 49 Social Services Departments between 1979 and 1982 and involved a total sample of approximately 2,000 children in care. This major research effort's cumulative findings were both published and presented in a series of conferences and workshops to elected representatives, policy makers, agency managers and practitioners throughout 1985, four of which I attended.

The impact of these presentations was significant. The publication by the Department of Health and Social Security, *Social work decisions in child care: recent research findings and their implications* (1985), should be compulsory reading for all involved in child welfare as it provides research evidence and analysis to set against the ideology and rhetoric of policy and political assertions in some places. Have similar research efforts been made (or funded) to explore whether any such gaps between ideological assertion, professional principles and practice experience may be a feature of some Australian services? What do we know about the quality of professional planning and the outcomes of out-of-home care services in Australia?

## THE EVIDENCE

While the nine research studies covered a variety of policy and practice themes, the major focus was on the nature and quality of decision-making in child welfare practice. The cumulative impact of these studies provides valuable information about the delivery of services to vulnerable and deprived children and families. The feedback to the employers, supervisors and educators of social workers was consistent and disquieting – with the challenging assertion in the DHSS publication:

Social workers and their seniors are not offered the opportunity to acquire the sophisticated skills, knowledge and qualitative experience to equip them to deal confidently with the complex and emotive issues raised by work with children and families.

(DHSS 1985, p. 21)

I have written elsewhere about the educational implications of a sound preparation for learning, unlearning and integrating the necessary levels of knowledge and skills for such family-centred social work practice (Clare 1989, 1990(a), 1990(b), 1991(a), 1991(b), 1992). I have also addressed the implications for practice supervision of many child abuse enquiries and this research evidence of poor quality child welfare practice (Clare 1988, 1991(c)). In recent years, I have contributed to efforts in Western Australia to enhance the rigour and purpose of Social Work Practicum by developing a Fieldwork Syllabus and introducing a new Practicum Assessment Manual and Schedule into the B.Soc. Work program at the University of Western Australia. In all of this effort, the DHSS (1985) research publication has remained an important reference point.

Some of the major findings identified in the DHSS publication are presented below under five headings, namely:

- The over-emphasis on admission to care and the failure to address the attendant practice issues of loss and grief (of the child, the birth parents and the case manager).
- The passivity of the case managers who tended to 'wait and see'.

- The quality of professional supervision of the case practice.
- The need to rethink the purposes of care in support of disadvantaged families to include respite and 'shared care'.
- The primacy of maintaining the child's links with the birth family predicated on a detailed assessment of 'family as context' and 'family as client'.

## The over-emphasis on admission to care

Most decisions to admit children into care were found to have been made rapidly and often in a crisis so that the admission was unplanned, with insufficient information on which to assess the child's needs and the parent(s)'s ability, capacity and motivation to meet those needs. There was evidence of an increasing use of compulsory orders to admit children to care, suggesting that the desire to manage risk and avoid drift in care had led to confusion between 'control' and 'planning'. Controls were imposed but were often experienced as counter-productive so that the working relationships between the child, the 'family', the case manager and the carers were problematic if there was an assumption of contact and possible reintegration of the child and the birth family.

The research showed that case managers made strenuous efforts to prevent admission to care – almost 'at all costs' – even if they had already accepted the likelihood of admission. Any subsequent admission, often overnight by the police or Crisis Care, was unlikely to be planned and more likely to reinforce the damaging trauma of loss and separation. There looked to be clear evidence of a 'parallel process' between the case manager's feelings of failure, guilt, anger and disappointment at the stage of admission, and those of the birth parents. Admission is viewed as an 'event' – not as the start of a 'process'.

When this was also influenced by the case manager's pessimism about care as a damaging last resort, the DHSS publication observed that this 'only serves to increase the stigma, shame,

depression and passivity in families' (1985, p. 16).

### Passivity and 'wait and see'

For a number of reasons, including the consequences of a pessimism about admission to care itself, case managers perceived themselves as powerless at the bottom of both agency and multi-disciplinary hierarchies. From this perceived position of powerlessness they also felt themselves having to respond to the perceptions and demands of other agencies in the child welfare network. A major consequence of this mind-set was a 'prevailing picture of drift, passivity and lack of planning' (DHSS 1985, p.18). The paradox of having positional authority and exercising power and control, while not owning discretion and a pro-active capacity, led to a practice strategy of 'wait and see'.

The evidence from the Dartington study (Millham et al 1985) underlined the significance of positive planning for rehabilitation and return home when appropriate. Unless a child left care within six weeks of admission, there was a very strong chance of remaining in care for two years. But at what 'costs'? And to whom?

Importantly, the research seemed to indicate the absence of planning to maintain family links for the period in care, eg, exclusive fostering, lengthy and difficult public transport. While 36% of families in the Dartington study had specific access restrictions, 66% experienced the non-specific barriers of distance, restrictive rules about visits and unwelcoming attitudes. There was almost a planned no-win self-fulfilling arrangement with parents, eg, 'Wait until the child has settled before you visit', which could then provide evidence that the parent was not interested.

### The quality of professional supervision

Only two of the nine studies focussed on the quality of supervision and its impact on decision-making. Given the ambivalence about practice supervision within human services agencies (Clare 1991(c)), this may not be so surprising. Vernon and Fruin (1985) studied

Figure 1

Child 'A'	Child 'B'
<ul style="list-style-type: none"> <li>• Aged 5 to 9</li> <li>• no dependence on Social Security benefits</li> <li>• two parent family</li> <li>• three or fewer children</li> <li>• white</li> <li>• owner-occupied home</li> <li>• more rooms than people</li> </ul> <p><b>Odds are 1 in 7,000</b></p>	<ul style="list-style-type: none"> <li>• Aged 5 to 9</li> <li>• household head receives income support</li> <li>• single adult household</li> <li>• four or more children</li> <li>• mixed ethnic origin</li> <li>• privately rented home</li> <li>• one or more persons per room</li> </ul> <p><b>Odds are 1 in 10</b></p>

eleven Social Services Departments and reported that supervision sessions rarely occurred at the officially prescribed frequency. When supervision did take place, its content did not correspond to the researchers' expectations of supervision, with any initiative for case planning provided by the case manager.

These findings confirm an all too familiar picture of the practitioner's exposure to emotional and physical overload, likely to erode intellectual and emotional resources, morale and confidence. The potential for effective role-modelling by the supervisor with an alertness to the likely parallel process impacting on the practitioner is absent or ignored, resulting in:

... the apparent ineffectiveness of supervisors in achieving better planning or offering the kind of support which could enable social workers to get alongside client's grief, pain and loneliness and stay with them through it. Supervision, as seen in these studies, did not seem to offer real support or appropriate control.

(Vernon and Fruin 1985, p. 19)

### Rethinking the purposes of care

'Care' is clearly not a unitary concept. The studies reveal an under-emphasis on 'shared care' involving planned and creative use of short-term care as part of family support strategies. When we remember the negative attitude amongst case managers about care as a resource and a service for vulnerable and deprived families, we can see early arguments for a rethinking of the balance between child protection and

family welfare. Packman (1986) made the distinction between 'volunteered' (family service), 'victim' (child protection) and 'villain' (protection of others), which offers greater clarity about the purposes of care and the need to develop planning and practice principles congruent with these distinctions for children and families using care services.

A second important summary of research findings, *Patterns and outcomes in child placement*, was published by the Department of Health in 1991. Recent research findings were presented on the impact of policy and practice changes in the areas of partnership work with parents and decision-making at both the case and the agency/policy levels.

As with the DHSS (1985) publication, valuable practice tools for case managers are included, particularly for the necessary preparation for leaving care. The links between deprivation and admission to care are drawn explicitly in the opening chapter by the comparison of the life chances of two children of similar age shown in Figure 1 (Department of Health 1991, p. 6).

### Maintaining the child's links with the 'family'

The research studies revealed poor quality family assessments, both in terms of exploring the child's family system and neighbourhood networks as a potential resource for help, and in recognising the potential strengths and resources within the birth families themselves. There were few records of adequate assessments of the family systems. As a result limited efforts

were made to identify the arguments for future work with the child and the parents. The pessimism about care appeared also to be a pessimism about the potential for 'family preservation' and/or naivety about a contract for 'reunification'.

One possible explanation for this pessimism, suggesting the potency of dynamic conservatism within child welfare agencies, is the impact of a legacy from the era of child rescue services and the fantasy of a 'fresh start'. By their practice of dealing with an event rather than a process, case managers and their supervisors seemed to devalue the importance of the child's links with parents and their extended family. There needed to be more systematic attention to the personal community of the child in care as part of the initial assessment, as well as in the completion of a 'Life Story Book' with photographs, letters and 'news' with children who are in care.

The 'family of origin' perspective (Clare 1992) recognises the longer-term consequences of family cultures in which members 'differentiate' themselves by an 'emotional cut-off'. There are training and practice implications for case managers, supervisors and carers in the recognition of the 'withering of links' of children in care and their sense of identity.

We only have to reflect on the well-being of many of the Aboriginal children removed from their families and communities and of the so-called 'Orphans to Australia' (Bean & Melville 1989) to have an appreciation of the centrality of this issue in planning and caring for other people's children. The gloomy predictions by Millham et al (1985) suggest that maybe as many as 7,000 out of the 40,000 children entering care in the UK each year are destined for a long stay and for withering links with their parents and wider family.

## THE 'LOOKING AFTER CHILDREN' PROJECT

The DHSS publication (1985) consolidated the mounting concern about the 'State as parent' (Parker 1980). Increasing attention was being given to the needs of birth parents by

the Family Rights Group in contested custody and access disputes with the local authority (Tunnard 1982; 1986); the rights of the child in care had been articulated by Page and Clark (1977), Freeman (1983) and Lavery (1986). Increasing attention had been drawn to the isolation of these children and young people and the difficulties facing parents wishing to maintain their responsibilities and involvement once their children were out-of-home. More recently in Australia, the Australian Association of Young People in Care has drawn attention to the needs and concerns of young people in *Every childhood lasts a lifetime* (Owen 1996).

In 1991, a working party chaired by Professor Parker was invited to explore the complex concept of 'outcome' with specific reference to child and family welfare. The working party's deliberations were published in *Looking after children: assessing outcomes in child care* (Parker et al 1991). The working party used their research knowledge and experience to develop practice and research instruments that could be used by case managers to assess a child's needs prior to planning and intervening to meet those identified needs. The outcome measures of these tools are child-centred and designed to monitor a child's progress at regular intervals and adjust the care plan as necessary.

The *Looking After Children* materials were designed against the growing body of practice research evidence – in the spirit of identifying welfare services good enough for 'ordinary parents'. To test that the tools reflected the concerns and aspirations of ordinary parents, they were tested on a randomly selected group of 400 'non-client' children. The study confirmed that the *Assessment and Action Records* reflected the broad aims and assumptions of most parents in the community.

At the same time, the *Assessment and Action Records* were piloted in five local authority Social Services Departments and case managers completed assessments on a sample of 200 children looked after out-of-home. Working parties were established to design and trial a complete set of referral, planning and reviewing forms.

The revised materials were launched in May 1995 – and will be used by over a half of all Social Services Departments by the end of 1997. The project is managed by the Personal Social Services Inspectorate with statutory responsibility for auditing and inspecting child welfare services. The *Looking After Children* materials are expected to be used by every local authority for all children in care within two years. A detailed account of the research and implementation strategies is provided by Ward (1995).

## THE ASSESSMENT AND ACTION RECORDS

There is a complete set of recording and review forms in the *Looking After Children* practice, planning and review tools. There are also comprehensive 'Parenting Plans' designed initially by the study group and piloted by case managers and non-client parents. These *Assessment and Action Records* represent 'added-value' in terms of child welfare practice whereas every child welfare agency will plan, record and review work. There are six age-related *Assessment and Action Records* for children who are:

- Under 1 year
- 1 and 2 years
- 3 and 4 years
- 5 to 9 years
- 10 to 14 years
- 15 years and over

Each Record is divided into seven dimensions which, taken together, are intended to cover the full spectrum of a child's development. The developmental dimensions are:

- health
- education
- identity
- family and social relationships
- social presentation
- emotional and behavioural development
- self-care skills

The format for each dimension of the Record is the same, namely:

1. *Statement of objectives:*  
Each dimension begins with the specification of the aims/objectives

of a reasonable parent for a child within that area of development.

### 2. *Questions:*

To discover whether carers are providing children with opportunities that research and practice wisdom would suggest are necessary to achieve the objectives. If the answers show that the children are not being offered experiences likely to contribute to the achievement of the aims and objectives, carers/case managers are asked to make further plans and decide who will take action. An explanation is required for lack of information or a decision to take no remedial action when it would appear warranted.

### 3. *Assessment of objectives:*

Enables an assessment to be made of the extent to which the aims/objectives at the beginning of the dimension have been achieved. There is also a section to record details of consensus or disagreement on the assessment.

### 4. *Summary of work to be undertaken:*

At the end of the Record there is a section to record a summary of work to be undertaken in relation to each of the seven dimensions.

The first *Action and Assessment Record* should be completed prior to the statutory review after the child has been in care for at least nine months. For children aged five years and under, the Record must be completed every six months after the completion of the first Record. For children aged six years to seventeen years, the Record must be completed every twelve months after the completion of the first Record. These are minimum requirements and case managers need to retain responsibility for a professional judgement about the necessary frequency for each child, eg, if there are numerous unplanned moves.

The completion of the *Assessment and Action Records* is linked into the statutory review system to ensure the agreement of planned actions to remedy identified care and/or development issues. The process of completion should commence at least six weeks prior to the statutory review meeting.

The review discussion will include a presentation of the *Summary of work to be undertaken* at the meeting, ie, areas of concern and progress.

The Record needs to be completed as part of a number of direct conversations with the child/young person and all the key people involved in the care plan. The emphasis is on partnership – so that the child/young person, parent(s), carer, and case manager should all share their views and discuss the particular points raised.

The case manager is responsible for ensuring that the Record is completed as a professional assessment exercise. This does not necessarily mean that the case manager is the best person to work through the seven dimensions of the Record with the child. The young person should be able to choose the person with whom to complete all – or particular sections – of the Record.

### Arguments for professional completion of the records

The *Looking After Children* materials have been designed as a direct response to the evidence of the poor quality of assessing and planning to meet the needs of the child in care. There was widespread concern about the quality of parenting of children looked after by the State ('the Administrative Parent').

The materials set an agenda for good parental care by identifying the necessary experiences, concerns and expectations of children at different ages and stages. They are informed by the principles of the 1989 Children Act with a stated intention of strengthening working partnerships between the key people in a child's life and helping all those concerned to listen to the young person's views and wishes. In effect, they represent both benchmark practice standards across an agency and a training framework for new and experienced case managers and their supervisors.

Specifically, the Records set out explicitly what good parental care means in practice. When implemented, they will provide a comprehensive means of assessing the outcomes of placement and care as a process by helping case managers and carers to:

- set an agenda for work with children and young people in care;
- direct attention to the ordinary everyday goals of parenting;
- assess children's progress across a spectrum of developmental dimensions;
- ensure the recording and regular updating of essential information in one accessible place;
- rationalise documentation and create consistency across agencies.

### THE WESTERN AUSTRALIAN PILOT PROJECTS

Professor Parker alerted the Department of Social Work at the University of Western Australia in 1993 to the pilot project in the UK. There was immediate interest and willingness in two non-government agencies to work with the materials to review their suitability for West Australian law and practice. The project was adopted by the State Government's Consultative Committee for Out-of-home Care late in 1993. The Committee purchased a licence to trial and adapt the materials in local agencies.

Following the State election in 1994, the Committee was renamed the Out-of-home, Preventative and Alternative Care Planning and Co-ordination Committee. The *Looking After Children* project was adopted as one of its funded projects to enable continuation of efforts to introduce the *Assessment and Action Records* to managers and practitioners in both the non-government sector and within the Department of Community Development.

Throughout the time-consuming process of introducing the materials to agencies in 1994, it became clear that the *Assessment and Action Records* perse travel well. They require minor changes to fit with Western Australian law and practice. There has been obvious appreciation of the benefits to be obtained from adopting these assessment and planning documents. Managers and practitioners in two non-government Aboriginal agencies are also alert to the potential benefits of adopting and adapting the materials.

However, there is an awareness of the potential power of information and the 'ownership' of that information about children in care. Information is power – and ownership of the completed Record is central and sensitive. On another level, collecting information is time-consuming and case managers are cautious about such 'bureaucratic' demands.

In 1996, there have been a number of projects to trial the complete set of referral, planning and review materials across the government and non-government agencies:

#### Project One

A commissioned project from the statutory agency's hostels and intensive foster care programs has trialed the *Assessment and Action Records* and reviewed the referral materials, including the software version of the *Essential Information Record*. The project report was completed in early September 1996.

#### Project Two

Another commissioned project involving six District Offices (Family and Children's Services) and eight non-government agencies. The fourteen work sites were each asked to provide a sample of five completed Records, which eventually provided a total sample of 51. The project report was completed in September 1996 and recommended the adoption and adaptation of the complete *Looking After Children* system across the child and family welfare sector.

#### Project Three

Funded by the University of Western Australia, this project began with a Focus Group review of the complete set of referral, planning and review forms. The 14 members of the Focus Group come from across the child and family welfare sector. The meetings were used to compare existing law, policy guidelines, documentation and 'custom and practice' across the sector with the UK law, documentation and practice principles. Once again, the project report was submitted at the end of September.

The *Assessment and Action Records* and the accompanying set of referral, planning and review forms have had a thorough evaluation in 1996. Lessons

have been drawn from the earlier pilot project in WA when feedback warned against requiring case managers to work with two sets of recording forms. The research and the management/practice questions were:

- (i) Does the *Looking After Children* system of assessment and recording materials lead to better information and better planning for children in out-of-home care?
- (ii) Is the system more efficient of the case manager's time so that the design of the materials and the structured information-gathering is 'worth the investment'?

A brief summary of the findings would reveal that the majority of the case managers and the carers involved in the pilot project were clear that the *Looking After Children* system did lead to child-focussed conversations which provided better information for planning. The *Looking After Children* system was viewed positively – but the next step would require 'rationalisation, synthesis and integration' with the existing array of documentation and procedures. Simply adding on an additional recording task would sabotage the potential benefits to children, carers and case managers.

It was also very clear that this system addresses the planning and review processes for children in long-term care – or the 'repeaters' whose frequent short-term episodes of care might remain hidden in the activity of a busy worker and District office. This system will need to be put in the context of a comprehensive family assessment tool (a 'Family Action Plan') so that risk-management decisions about protection and/or 're-unification' are in place. There will also need to be a pruning of existing procedures so that staff are freed to develop a more child-focussed service for children out-of-home. This would require greater emphasis on professional rather than administrative thinking and action.

One additional task will be to begin the negotiations within the Department and within/between the non-government agencies about the development of a common and integrated referral and planning system for all children moving placements within the Depart-

ment and across the sector. This will be a complex task, challenging the quality of partnership that exists or could be developed. The *Essential Information Record*, both the paper and the software formats, could provide the basis of this work.

The UK materials were designed in response to research evidence about the quality of out-of-home care practice. Developments in social policy seem to require a significant event and political 'timing' to be implemented (Hall et al 1975). In this case study, there is a familiar mix of humanitarian concern ('the deserving child') and political alertness about the potential for future litigation. The *Looking After Children* project has represented a significant cost to the Thatcher/Major Conservative Government. The materials have been developed centrally and all local authority Social Services Departments have been encouraged to adopt them – with the Social Services Inspectorate and a service audit close at hand.

My impressionistic sense of the initial reactions to the materials from practitioners and managers in WA has been positive. They make the essential point that these materials are designed to enhance the quality of assessment, planning and reviewing of services to children in out-of-home care. The emphasis must remain on tools to enhance professional judgement rather than the introduction of another additional and unnecessary bureaucratic imposition. However, there is understandable vigilance about the time-consuming nature of the growing accountability and administrative processes in the sector. If child-centred planning is to be encouraged, what demands will be curtailed?

## THE INTERNATIONAL DIMENSION

There is a significant international interest in the assessment, planning and recording tools. There have been two international seminars in London for researchers interested in using the materials. Both in 1993 and 1995, representatives attended from most European countries, Russia, Canada and the USA, and from New Zealand and Australia. There is an established

research network and opportunities for collaborative work. Certainly, this project demonstrates the unintended consequences of policy and research effort – and the time-frame necessary to begin to impact successfully on practice cultures.

Within Australia, there is growing interest in the *Looking After Children* project. In September 1996 two trainers from the *Looking After Children* project team, Hilary Corrick and Debbie Jones, visited Melbourne, Perth and New Zealand – a visit organised by Lloyd Owen, colleagues from Kildonan Child and Family Services in Melbourne, and myself. We also hope to be able to invite Dr. Harriet Ward to Victoria in 1997.

## CONCLUSION

Since coming across the original assessment and recording materials some years ago, I have become even more persuaded about their strengths. There is an important mix of research expertise and practice principles in the practice and management materials. They could provide the basis of practice standards for the sector. They also provide a common practice framework and an effective recording and retrieval system for carers and case managers. They can also help to focus the supervision and review processes. Finally, they are designed to facilitate the aggregation of data for planning and research purposes.

The various projects in 1996 should provide an evaluation by practitioners, carers and managers about their value, cost and benefit for practice in the Western Australian agencies. The strengths of the *Looking After Children* project materials for busy workers and carers are captured in this extract from *Patterns and outcomes in child placement* (Department of Health 1991, p. 93):

...and if plans are not written down, they can never be monitored. In addition to the potential damage to children and families, the result of decision-making and planning on inadequate evidence or false assumptions is increased work, greater stress and less job satisfaction.

From the WA projects, there is support from a practitioner who commented in the telephone interview that:

A lot of what is the Essential Information Record Care Plan we already ask but in this form they're asked in a way that makes you think about it more. It focuses on the reason behind the decision and planning, not just statistics. Quick and easy to use. Child focussed. I felt really in control about the information. Felt really clear about access, who's got the information. So often a kid comes in and we have no info. but this forces you to focus and the info. gets put all in one place, easy to access and clear. Not just stuck in the file and lost.

Finally, from the statutory agency, a practitioner commented:

Definitely worth it. Definitely should be introduced because there are a lot of workers coming in and out and a lot of kids, it's hard to spend much time with one child. Because you have to sit down with them it gives them a chance to talk about themselves and they feel like someone cares. Should be more of it - this is more important than a lot of the paperwork because you're with the kids - rather than taking away from them. I enjoyed it. □

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