

# **KINSHIP CARE MEDIATION INTERVENTION PROTOCOL**

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## **Acknowledgments**

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## **Funding and competing interests**

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## **About Foundations – What Works Centre for Children & Families**

Foundations is the national What Works Centre for Children & Families. Foundations researches and evaluates the effectiveness of family support services and interventions, and generates the actionable evidence needed to improve them, so more vulnerable children can live safely and happily at home and lead happier, healthier lives. Foundations was formed through the merger of What Works for Children’s Social Care (WWCSC) and the Early Intervention Foundation (EIF) in December 2022.

## **About Family Solutions**

Family Solutions is a team of family law professionals dedicated to helping couples and families find ways of moving forward with their lives after a separation. The team comprises recognised and accredited specialists in family law and non-court resolution. Solutions offered include mediation, parenting co-ordination, neutral case assessments, lawyer led negotiations, collaborative practice and arbitration.

# CONTENTS

Glossary of terms .....	4
TIDieR Summary .....	5
1. Intervention .....	8
2. Business As Usual .....	16
3. Theory of change .....	17
4. Stakeholder engagement.....	20
5. Project management .....	21

# GLOSSARY OF TERMS

<b>Term</b>	<b>Meaning</b>
<b>Kinship carer</b>	A carer for a child who is a relative or friend but isn't their parent
<b>Kinship care families</b>	When a child lives with a relative or friend who isn't their parent
<b>Mediation</b>	A confidential process in which a neutral third person (the mediator) helps people make mutually acceptable decisions and arrangements for their future
<b>Mediator</b>	A trained professional offering mediation
<b>MIAM</b>	Mediation Information and Assessment Appointment
<b>PINE</b>	Practice In Need of Evidence programme
<b>Shuttle mediation</b>	Where the participants are in separate rooms and the mediator goes between the two
<b>TIDieR</b>	Template for Intervention Description and Replication

# TIDIER SUMMARY

<b>Brief name</b>	Kinship Care Mediation
<b>Why</b>	<p>Family Solutions has provided mediation for 50 families involved in the <b>child protection process</b>. This activity was supported by the PINE programme.</p> <p>During this time we found that:</p> <ul style="list-style-type: none"> <li>• Many social workers and other professionals do not understand the process of mediation and therefore do not refer at all, do not refer at the time which is most beneficial to parents and carers, or send inappropriate referrals.</li> <li>• From the cohort of 50 families, people who were most likely to attend and make agreements in mediation were families where the child is living with a kinship carer (when a child lives with a relative or friend who isn't their parent).</li> </ul> <p>Our initial findings therefore suggest a possibility that kinship care families respond better to mediation than other types of families involved in the child protection process.</p> <p>In addition, it is already well known that kinship care families face significant, unique challenges:</p> <ul style="list-style-type: none"> <li>• Kinship carers and parents need to work together to make contact arrangements and other decisions about the child. Balancing a parent's understandable wish to see their child with the carer's concerns about parental neglect is often unmanageable and leads to further conflict.</li> <li>• Children in kinship care often have physical and mental health needs and behavioural challenges. Biological parent/s may have ongoing needs around substance abuse and/or mental illness which led to children living in kinship care. All these pressures can lead to additional stress and conflict between adults.</li> </ul> <p>Many kinship carers (such as those with a Special Guardianship Order or Child Arrangements Order) lack statutory support because living with a kinship carer often means children are no longer looked after by the Local Authority</p>
<b>What (procedures)</b>	<ol style="list-style-type: none"> <li>1. Provide free mediation for 20 kinship care families. Kinship carer and parent/s each attend individual Mediation and Assessment Appointments (MIAM) and up to four joint mediation sessions.</li> </ol>

	<p>Sessions will involve standard mediation of issues plus <u>additional</u> support for parties in communication, conflict management, parenting and impact of conflict and trauma on children.</p> <p>Research clearly indicates that children benefit from having their voice heard in the process. A Child Consultation will be included where appropriate (this will replace one joint mediation session).</p> <p>2. Provide free family mediation awareness training for professionals working with families in four local authority areas (attendees will include social workers, local contact centre workers, schools, CAFCASS, the family courts and charities). The training aims to educate professionals in making appropriate and timely referrals.</p>
<b>What (materials)</b>	<p>Mediation for kinship care families - standard mediation documentation (Agreement to Mediate and Outcome Summaries at end of each session) plus where appropriate use of materials on:</p> <ul style="list-style-type: none"> <li>• Understanding the impact of conflict on children, trauma and Adverse Childhood Experiences (ACE's).</li> <li>• Support around communication and conflict management – HALT signs, STOP signs, I Wish You Would, Ten Steps, Feelings Wheel.</li> <li>• Support around parenting – Parenting Styles, Incredible Years Parenting Pyramid, The Emotional Bank Account, Building Self-Esteem.</li> </ul> <p>Family mediation awareness training – mixture of power point presentation, discussions and Q&amp;A.</p>
<b>Who provided</b>	<p>The intervention will be provided by accredited family mediators at Family Solutions who have received additional training in trauma and ACE's, communication and conflict management techniques, parenting styles and skills and in delivery of the intervention.</p>
<b>How</b>	<ul style="list-style-type: none"> <li>• Kinship care mediation Individuals each attend a Mediation Information and Assessment Appointment (MIAM) and up to four joint mediation sessions.</li> <li>• Family Mediation Awareness Training To be delivered in four local authorities – Hampshire County Council, Portsmouth City Council, Southampton City Council and Isle of Wight Council.</li> </ul> <p>For each local authority, training will consist of:</p>

	<ul style="list-style-type: none"> <li>• One: one hour online session offered to all professionals who work with families</li> <li>• One: two/three hour face to face session for professionals who work directly with kinship care families.</li> </ul>
<b>Where</b>	<p>At the offices of Family Solutions in Southampton, Fareham, Havant, Emsworth, Petersfield, Ryde (Isle of Wight). Families attend the office most convenient to them. Services can be run online if this reduces barriers to attendance.</p> <p>All offices are fully accessible and close to public transport (apart from Emsworth).</p>
<b>When</b>	September 2023 – September 2024
<b>Evaluator</b>	Coram
<b>Development stage (Efficacy/Pilot/ Feasibility)</b>	Feasibility

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# 1. INTERVENTION

## 1.1. Why: What is the rationale, theory or goal of the elements essential to the intervention?

Mediation is a confidential process in which a neutral third person (the mediator) helps people make mutually acceptable decisions and arrangements for their future.

Family Solutions worked with 50 families in the **child protection process** to provide mediation under Foundations' PINE programme.

During this process we learned that:

- Many social workers and other professionals do not understand the process of mediation, and therefore do not refer at all, do not refer at the time which is most beneficial to parents and carers, or send inappropriate referrals. Families who would benefit from mediation are often not referred in or are referred too late when conflict is already entrenched
- From the cohort of 50 families, people who were most likely to attend and make agreements in mediation were families where the child is living with a kinship carer (when a child lives with a relative or friend who isn't their parent).

Our initial findings therefore suggest a possibility that kinship care families respond better to mediation than other types of families involved in the child protection process.

In addition, it is already well known that kinship care families face significant, unique challenges:

- Children are often in kinship care due to parental substance abuse, imprisonment, mental ill-health and neglect
- Many kinship carers (such as those with a Special Guardianship Order or Child Arrangements Order) lack statutory support because living with a kinship carer often means children are no longer in the care system
- Kinship carers and parents need to work together to make contact arrangements and other decisions about the child. Balancing a parent's understandable wish to see their child with the carer's concerns about risk of harm is often unmanageable and leads to further conflict
- Children in kinship care often have physical and mental health needs and behavioural challenges. This pressure can lead to additional stress and conflict between adults
- Evidence shows that frequent and poorly resolved ongoing conflict between adults increases the risk of negative outcomes for children – such as mental health issues,



reduced academic performance and risky behaviour. Children clearly benefit from a reduction in conflict between adults. (*EIF Reducing Parental Conflict Hub*).

This intervention therefore will focus on providing support through mediation for kinship care families. The intervention aims to reduce levels of conflict between adults and improve outcomes for children in kinship care.

Mediation itself is an effective process and resolves disputes in over 70% of cases (*Family Mediation Council Survey 2019*.) However, research indicates that “...whilst mediation and court-based dispute resolution processes typically result in high rates of settlement and increases in rates of contact, the negotiation process by itself has proved disappointing in resolving underlying conflicts or significantly improving communication (Pearson & Thoennes 1988; Kelly 2004; Trinder and Kellett 2007)” (“Building bridges? An evaluation of the costs and effectiveness of the Separated Parents Information Programme (PIP)” DoE)

**Mediation is therefore unlikely to improve long-term communication and problem-solving skills between parties, meaning conflict can arise again once mediation has finished.**

Therefore, alongside the standard mediation process, the intervention also provides additional support to participants by teaching communication and conflict management techniques for future use plus, where appropriate, education around the impact of conflict and trauma on children, parenting styles and parenting skills.

Finally, in order to help secure appropriate referrals into the project, the intervention will also include mediation awareness training for professionals working with families.

## 1.2 What procedures, activities, and processes will be used in the intervention?

### **Kinship care mediation**

#### **Participants’ journey**

Initial referral received from, or on behalf of either kinship carer/parent.

Letters/emails to both kinship carer and parent/s within 3 working days providing details of the service and asking them to contact Family Solutions to arrange a time and date for the individual MIAM.

Kinship carer and parent/s to attend MIAMs separately – aim for both to take place within 4 weeks but depends on participants’ availability.

## **Screening and assessment for suitability**

Kinship carer and each parent attend a MIAM. Each MIAM takes about one hour. At the MIAM, information is given about the service and benefits to their children of collaborative care/parenting and a reduction of conflict between adults. Participants given (or emailed) signposting pack to take away.

Explanation given about voluntary and confidential nature of process, time commitment, number of visits, data storage and future usage plans, consent to evaluation, identity check, screening for suitability (domestic violence including emotional abuse), information about alternative dispute resolution (mediation, collaborative law, arbitration) and how to obtain legal advice.

Participants are given time to make a reasoned and free decision regarding their involvement. They may have a support person with them at the MIAM and, if necessary, at mediation with the agreement of other participants.

NB Mediation only takes place at the mediator's discretion. Mediation will not take place where there is a history of domestic abuse and/or sexual assault between the participants. If a participant has serious mental health issues or a learning difficulty which impacts their capacity to cope with mediation, the mediator will explore whether mediation is suitable.

MIAM's must be attended without exception prior to mediation starting to check whether mediation is suitable for each participant.

## **Remainder of process**

Once all participants have attended the MIAM, a date is set for the first joint meeting.

Participants offered 3 or 4 x 1.5 hours sessions of mediation (depending on whether there is a child consultation) which also cover communication and conflict management skills.

An example of how the four sessions could run is set out below:

### **Session 1**

- Explanation and signing of Agreement to Mediate
- Ground rules. Hopes and expectations
- Understanding the background
- Education of participants around negative impact of conflict on children (including Adverse Childhood Experiences where appropriate). How can we change behaviour to reduce the impact on our children?
- Planning in time to communicate: realise importance of regular meetings in neutral venue to discuss parenting issues. Identification of triggers e.g. arguments at handover and/or in front of children
- When to communicate: HALT signs
- Discussion - would a child consultation be appropriate? Preparation of adult participants for child consultation.

## **Session 2**

- Child consultation if appropriate
- A child consultation means the child talking face to face with the mediators separately on the basis that what they say is completely confidential from anyone else, including their carer/parents. Very often the child does have something that they want the mediator to tell their parents, and that they would like the parents to take into consideration when making their decision. Strictly with the child's permission, the mediator will then bring the child's voice into the mediation
- All mediators are qualified child consultants with enhanced DBS checks.

## **Session 3**

- Results of child consultation fed back to participants. Participants encouraged by mediator to find their own child focused solutions
- Mediation of current issues
- How to communicate: appropriate and healthy assertiveness of needs and wishes relating to parenting. Clarity of communication – specific, clear expression. Support in re-framing from “You always....” to “I” messages
- How to listen: listening and reflecting back.

## **Session 4**

- Continued mediation of current issues
- Healthy management of conflict – choosing a time to discuss matters, appropriate venue, brainstorming and evaluating solutions, agreeing on a way forward, review. “Ten Steps to Conflict Management”
- Awareness of destructive patterns of behaviour. STOP signs (Scoring points, Thinking the worst, Opting out, Putting down)
- Goals for our children – working together.

A summary of decisions made is prepared after every mediation and sent to participants.

Discussions are based around the needs and concerns of all participants. Examples of issues which could be covered are:

- Contact arrangements for the parents, siblings and other relatives and arrangements for supervision and transport
- Concerns about the child (e.g., behaviour, education, medical, mental health)
- Support for child (e.g. counselling, medical services, mentoring)
- Support for adults (e.g. counselling, drug or alcohol assessment and treatment, parenting classes, employment and housing referrals, financial assistance, transport)
- Adults' goals for children
- Problems in implanting court orders.

Mediations might also include information for participants around the impact of trauma on children, developing a consistent approach to parenting, positive parenting techniques and/or

supporting engagement with other agencies. This would depend on the needs of the individual family.

## **Family mediation awareness training for each local authority area**

The training will consist of:

- One: one-hour large group online session offered to all professionals who work with families including social workers, contact centre workers, CAFCASS, the family courts and local charities - as they are the primary source of referrals into mediation for the kinship carer cohort.

The training will cover understanding family mediation and the family mediation process, Legal Aid and the voucher scheme, when is mediation useful, which families should be referred to mediation, when to refer to mediation, explaining mediation to your families, supporting families going through mediation, information about free mediation for kinship care families.

- One: two/three-hour small group session for professionals who work directly with kinship care families – face to face at offices of local authority.

This training will cover the same content as the online training with extra time for:

- Discussion around how the mediators and family professionals can work together to support kinship care families
- Professionals to give details of the ongoing support their local authority provides to kinship care families. This is likely to differ between each local authority.
- Anonymised discussion about individual cases
- Questions and answer session.

## **1.3 What physical or informational materials will be used in the intervention?**

Unless stated otherwise, all materials have been created by Family Solutions.

Kinship care mediation - standard mediation documentation (Agreement to Mediate and Outcome Summaries at end of each session) plus where appropriate use of materials on:

- Understanding the impact of conflict on children, trauma and Adverse Childhood Experiences (ACE's)
- Support around communication and conflict management – HALT signs, STOP signs, I Wish You Would, Ten Steps, Feelings Wheel
- Support around parenting – Parenting Styles, Incredible Years Parenting Pyramid, The Emotional Bank Account, Building Self-Esteem.

Family mediation awareness training – mixture of power point presentation, discussions and Q&A.

## 1.4 Who is the intervention aimed at and how will they be identified?

The intervention is aimed at any family where the child is cared for by a kinship carer.

Families can self-refer, but are most likely to be identified/referred by family professionals.

The mediation awareness training will educate/support family professionals in identifying suitable families and making appropriate and timely referrals.

The one hour online mediation awareness training is being advertised as free mediation awareness training via a flyer for each local authority area. Family Solutions contacted the four local authorities, local courts, CAFCASS and contact centres and each organisation is sending the flyer out to relevant family professionals.

The face to face longer mediation awareness training has been arranged by approaching each local authority's kinship care team directly.

### **How many can receive the intervention at any one time?**

Family Solutions will be working with 20 kinship care families over a 12 month period. Family Solutions is a large mediation organisation and has the capacity to see all 20 families at the same time if required. If another organisation took this forward, numbers of families would depend on the organisation's size and capacity.

## 1.5 Who will be providing the intervention?

The intervention will be delivered by accredited family mediators. Accredited mediators (as opposed to non-accredited mediators) are highly experienced and have demonstrated they meet the high standards of the Family Mediation Council.

Accredited mediators who wish to deliver the intervention will receive additional training in:

- Trauma and Adverse Childhood Experiences
- Running a trauma informed practice
- Reducing conflict outside of the mediation room
- Communication and conflict management techniques
- Parenting styles and positive parenting skills
- Delivery of the intervention and the adaptations from standard mediation.

## 1.6 How will the intervention be delivered?

The intervention follows the standard mediation process in that:

- Each individual attends a separate appointment (MIAM)
- Joint mediation sessions to take place face to face, usually in the same room. Participants will be in separate rooms (shuttle mediation) at the request of one or both participants, or at the mediator's discretion.

All appointments and mediations will ideally take place face to face, but can be run online if required by government restrictions, or if online attendance removes boundaries to participation.

## 1.7 Where: In which location(s) will the intervention be delivered?

At the offices of Family Solutions in Southampton, Fareham, Havant, Emsworth, Petersfield, Ryde (Isle of Wight). Families attend the office most convenient to them.

All offices are fully accessible and close to public transport (apart from Emsworth).

All offices have two waiting areas and two mediation rooms (in case of shuttle mediations).

Mediation rooms must be soundproof, with a round table and seating for all participants.

A receptionist or another member of staff should be present in the building for safety purposes.

## 1.8 When and how much: How many times will the intervention be delivered, and over what period of time?

It is intended that kinship care mediation will be delivered to 20 kinship care families over a 12 month period (Sept 2023 - Sept 2024). This will directly involve at least 40 adults and impact 30-40 children (depending on number of children in each family).

Standard mediation process followed with individuals each attending a separate appointment (MIAM) which lasts for one hour. Up to four joint mediation sessions will be attended. Each mediation session lasts for one and a half hours.

The mediation awareness training family professionals will be delivered at the beginning of the intervention in order to maximise referrals. We are aiming for the training to reach at least 70 professionals.

## 1.9 How will the intervention be personalised, titrated or adapted?

The process of mediation will be the same for all participants. However issues raised, and the nature of discussions, will be unique to each kinship care family and based upon the situation and needs of the parties.

As already set out, “additional” support over and above that provided by standard mediation will be offered as part of kinship care mediation. The additional support will be tailored to each kinship care family so that the mediator provides information about tools and techniques which appear most relevant to the family’s concerns.

The child/children of each kinship care family will be offered the chance to attend a child consultation. A child consultation can only take place with agreement of all participants and at the mediator’s discretion. The child would normally be aged 10 years or above. A child consultation might not be appropriate if the child has already attended several meetings with professionals.

The above means that not all mediation participants will have an identical experience.

## 1.10 Modifications

No changes or modifications have been made to date.

## 1.11 How will you know ‘how well’ the intervention was received or delivered?

There will be monthly internal whole organisation meetings to reflect on participants’ feedback, discuss what is working well and what is working less well, discuss whether we need to make changes to improve the experience for participants, and check delivery is on target.

There will be a steering group consisting of selected stakeholders which will meet quarterly to provide support, guidance, oversight of progress and monitor project quality.

There will also be an evaluation steering group organised by Coram.

## 1.12 To what extent was the intervention delivered as planned?

Delivery of the intervention has not started yet.

## 2. BUSINESS AS USUAL

Business as usual local authority professionals who work with families have not received family mediation awareness training. Currently it seems that many social workers and other professionals do not understand the process of mediation, and therefore do not refer at all, do not refer at the time which is most beneficial to parents and carers, or send inappropriate referrals. Families who would benefit from mediation are often not referred in or are referred in too late when conflict is already entrenched.

Business as usual kinship care families can attend “standard” family mediation. However, kinship carers tend to have a higher income than the biological parent/s. This means the biological parent/s might be eligible for legal aid so mediation will be free to them. The kinship carer is less likely to be eligible for legal aid. This means paying privately for mediation which can be unaffordable. Kinship care mediation is being provided for free to all participants.

“Standard” family mediation is unlikely to improve long-term communication and problem-solving skills between parties meaning conflict can arise again once mediation has finished.





# 3. THEORY OF CHANGE

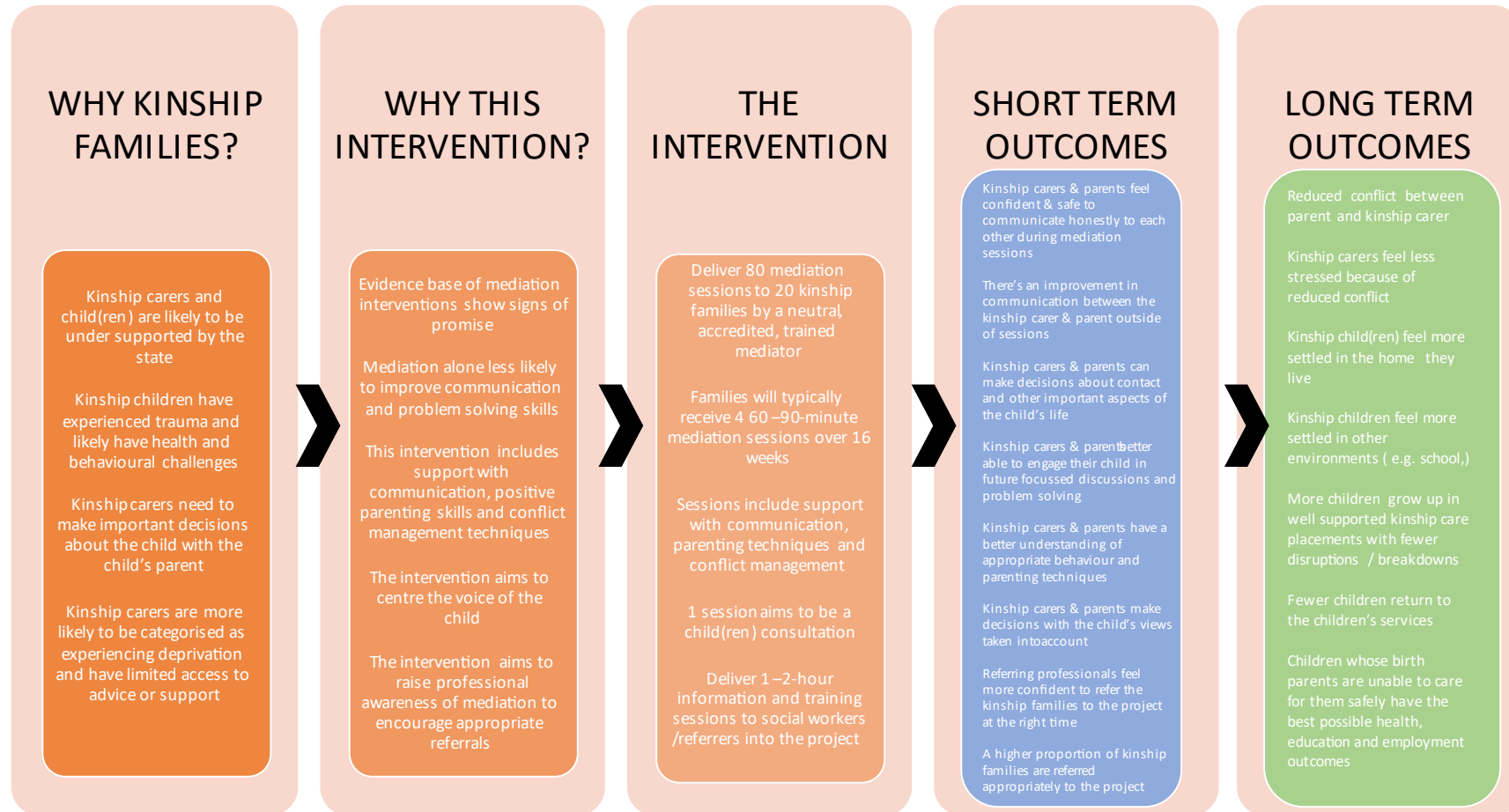
## Mediation Now Kinship Care Mediation pilot logic model

**PROGRAMME DESCRIPTION:** The Mediation Now (MN) kinship care pilot will offer mediation sessions to 20 kinship families over 1 year (September 2023 to September 2024). The project is funded by Foundations - What Works Centre for Children and Families Practice in Need of Evidence (PINE) programme for £59,800. Referrals will come from a range of organisations in Portsmouth, Southampton, Hampshire and the Isle of Wight. MN will also deliver training for social care and other professionals about mediation and will offer 1 hour and 2-3 hour mediation education sessions (online) to 70 professionals in Portsmouth, Southampton, Hampshire and the Isle of Wight. The project is being independently evaluated by Coram from May 2023 to September 2024 using a feasibility study. The evaluation cost is £61,565.

CONTEXT	INPUTS	OUTPUTS	SHORT TERM OUTCOMES	LONG TERM OUTCOMES
<p><b>Why kinship families?</b> Most children live in kinship care because their parents are not able to look after them safely because of parental drug/alcohol misuse and parental abuse and neglect (Hunt, 2020, Harwin et al., 2019). Children in kinship care often have physical &amp; mental health needs &amp; behavioural challenges. The pressure of dealing with these additional needs can lead to stress and conflict (Harwin et al., 2019)</p> <p>Kinship carers (KCs) may lack statutory support because living with a KC means children are no longer in the care system.</p> <p>Compared to parents in the general population, KCs are more likely to live in the least affluent areas and be categorised as experiencing deprivation (Hunt, 2020) &amp; most have limited access to advice or support (McGrath and Ashley, 2021).</p> <p>KCs &amp; parents need to work together to make contact arrangements and other decisions relating to the child. Balancing a parent's wish to see their child with carer's/children's services concerns about the parent's neglect/risky behaviour is often an unmanageable task and leads to further conflict.</p> <p>During delivery of a Child Protection Mediation project MN Now learned that families most likely to attend &amp; make agreements at mediation were kinship families.</p> <p><b>Why mediation?</b> Frequent, intense and poorly resolved conflict between parents can place children at risk of mental health issues, and behavioural, social and academic problems. It can also have a significant effect on a child's long-term outcomes (GOV.UK, 2021)</p> <p>Mediation has a developing evidence base with evidence of it working (for example, Glover, 2008). But the mediation process is less likely to improve long term communication and problem-solving skills between parties (Trinder et al., 2011). Which means conflict can arise again once mediation has finished. So this project will also provide support in communication and conflict management techniques from accredited mediators who are also trained in trauma informed practice, positive parenting techniques and communication skills.</p>	<p>3 accredited (by Family Mediation Council) mediators trained in:</p> <ul style="list-style-type: none"> <li>- running child consultation directly</li> <li>- trauma informed practice</li> <li>- positive parenting techniques</li> <li>- communication skills</li> <li>- conflict management</li> </ul> <p>Suitable and confidential mediation spaces in 6 offices in 6 different locations. Locations accessible by public transport. Sessions can be online (in-person preferable)</p> <p>2 trained mediators to co-run training for professionals who may refer into the project</p> <p>Referrals from local authorities or other organisations e.g. schools, GPs</p> <p>Voluntary agreement to take part and engagement from the kinship families</p>	<p>Deliver around 80 free mediation session to 20 kinship families by a neutral, trained mediator</p> <p>Sessions are confidential &amp; privileged (meaning discussions cannot be used in court)</p> <p>Session also include additional support which can include all or any of:</p> <ol style="list-style-type: none"> <li>1. education about the impact of trauma &amp; conflict on children</li> <li>2. communication and conflict management skills</li> <li>3. developing a positive and appropriate parenting.</li> </ol> <p>The additional support will be tailored to each kinship family so that the mediator provides information about tools/techniques most relevant to the family's concerns.</p> <p>1 session is a child consultation (if child is appropriate age, typically 10 yrs+ and there is parent/carer agreement) = up to 20 child consultation sessions may be delivered</p> <p>Families will typically receive 4 60-90-min mediation sessions over 16 weeks. This is likely to impact 40 adults (2 per family) and 30-40 children in kinship families</p> <p>Deliver basic 1-hour online training across the geographic areas plus deliver advanced 2-3-hours sessions of online training to special guardian teams (delivered to at least 70 multi-professionals in total)</p> <p>Parents &amp; kinship carers will be signposted to services whether the referral is accepted or not including parenting courses, domestic abuse agencies, counselling</p> <p>Outcome summary produced after each mediation session</p>	<p>Kinship carers &amp; parents feel confident &amp; safe to communicate honestly to each other during mediation sessions</p> <p>There's an improvement in communication between the kinship carer &amp; parent outside of sessions</p> <p>Kinship carers &amp; parents can make decisions about contact and other important aspects of the child's life</p> <p>Kinship carers &amp; parents better able to engage their child in future focussed discussions and problem solving</p> <p>Kinship carers &amp; parents have a better understanding of appropriate behaviour and parenting techniques</p> <p>Kinship carers &amp; parents make decisions with the child's views taken into account</p> <p>Referring professionals feel more confident to refer the kinship families to the project at the right time</p> <p>A higher proportion of kinship families are referred appropriately to the project</p>	<p>Reduced conflict between parent and kinship carer</p> <p>Kinship carers feel less stressed because of reduced conflict</p> <p>Kinship child(ren) feel more settled in the home they live</p> <p>Kinship children feel more settled in other environments (e.g. school,)</p> <p>More children grow up in well supported kinship care placements with fewer disruptions / breakdowns</p> <p>Fewer children return to the children's services</p> <p>Children whose birth parents are unable to care for them safely have the best possible health, education and employment outcomes</p> <p><b>UNINTENDED CONSEQUENCES</b> Parents feel more distressed if the process does not achieve their preferred outcomes (e.g. parent wishes child to return home) which may lead to increased conflict.</p>



## THEORY OF CHANGE FOR THE KINSHIP CARE MEDIATION PILOT





## 3.1 Does the intervention work?

The intervention is looking to answer the following research questions identified by Coram

- To what extent is the intervention feasible and can it be evaluated?
- How should the Kinship Care Mediation pilot be evaluated in future?
- How should the Kinship Care Mediation pilot be developed, scaled up and replicated in future?
- Are there signs that the Kinship Care Mediation pilot is achieving the outcomes listed in the logic model?

### Short term outcomes:

- Kinship carers & parents feel confident & safe to communicate honestly to each other during mediation sessions
- There's an improvement in communication between the kinship carer & parent outside of sessions
- Kinship carers & parents make decisions with the child's views taken into account
- Kinship carers & parents better able to engage their child in future focussed discussions and problem solving
- Kinship carers & parents have a better understanding of appropriate behaviour and parenting techniques and the effect of trauma and conflict on a child.

### Long term outcomes:

- Reduced levels of conflict between the parent and kinship carer
- Increased cooperation between parent and kinship carer
- Kinship carers feel less stressed because of reduced conflict
- More collaborative, predictable and consistent parenting approaches from kinship carer and parent
- Kinship child(ren) feel more settled in the home where they live
- More children can grow up in well supported kinship care placements with fewer disruptions and breakdowns
- Fewer children return to the children's services
- Children whose birth parents are unable to care for them safely have the best possible health, education and employment outcomes.

## 3.2. How is the intervention expected to work?

See diagram on previous page.



### 3.3. Is the intervention expected to work differently for some groups?

The intervention is not expected to work differently for some groups.

### 3.4. Is the intervention expected to work differently in some places?

The intervention is not expected to work differently in some places.

## 4. STAKEHOLDER ENGAGEMENT

Professional stakeholders include local authorities and other professionals who work with families including CAFCASS and the local courts.

We will work collaboratively with professional stakeholders and other relevant partners, making sure we maintain a schedule of regular meetings/updates/reports to keep all parties informed of progress and potential challenges.

There will be a steering committee consisting of selected stakeholders which will meet quarterly to provide support, guidance, oversight of progress and monitor project quality.

The most significant stakeholders are the kinship care families. We plan to engage the families as follows:

- All participants attend a Mediation Information and Assessment Meeting where they are given information about the process, the degree of involvement, time commitment, number of visits, data storage and future usage plans. Participants are given time to make a reasoned and free decision regarding their involvement, including time to consider whether they wish to give consent to the evaluation process
- The Mediation Information and Assessment Meeting is also an opportunity for participants to ask questions and raise concerns in a safe environment, and to establish a relationship with the mediator. Where appropriate, participants will be given information about the impact of ongoing conflict on children and encouraged to consider how mediation could support them in reducing this conflict. No pressure is placed on participants to attend at any stage
- Every opportunity is taken to enable participants to attend mediation. Mediation takes place at one of the five offices which is most convenient for the participant. If the participant has concerns about sitting in the same room as the other person, then co-mediation can take place (where each participant sits in a separate room and the mediator goes back and forth between rooms). Participants may have a support person with them if necessary with the agreement of the other participants



- Participation will also be encouraged and supported by family professionals.

## 5. PROJECT MANAGEMENT

### 5.1. Roles and responsibilities

#### Project team

Team details	Roles, responsibilities and experience
<b>Claire Webb</b>	<p><b>Role</b> - CEO, director and mediator.</p> <p><b>Responsibilities</b> - Overseeing and supervising project. Delivering training to professionals. Mediating. Safeguarding lead.</p> <p><b>Experience:</b></p> <ul style="list-style-type: none"><li>• Family lawyer for over 25 years. Specialist accreditation in Children Law.</li><li>• Accredited mediator for over 15 years.</li><li>• Mediation Child Consultant</li><li>• Member of Resolution and the Family Mediation Council</li><li>• Member of Family Justice Council</li><li>• Delivers training for Family Mediators Association on reducing conflict between separated parents, running a trauma informed practice, high conflict clients, parenting skills, domestic abuse and the impact of mental illness on mediation.</li><li>• Oversaw and co-delivered mediation for families in child protection process under PINE</li><li>• Oversaw and co-delivered Changing Lives and New Foundations (programmes funded by the DWP's Reducing Parental Conflict Fund).</li></ul>
<b>Rebecca Hawkins</b>	<p><b>Role</b> - Director and mediator. Data protection Lead. Deputy Safeguarding Officer.</p> <p><b>Responsibilities</b> - Mediating.</p> <p><b>Experience:</b></p> <ul style="list-style-type: none"><li>• Family lawyer for over 25 years. Specialist accreditation in Children Law.</li><li>• Accredited mediator for over 15 years.</li></ul>



	<ul style="list-style-type: none"> <li>• Mediation Child Consultant</li> <li>• Member of Resolution and the Family Mediation Council</li> <li>• Delivers the Resolution Mediation Foundation Training course to train new mediators</li> <li>• Trained in communication, conflict management, parenting skills and techniques, understanding impact of trauma and abuse</li> <li>• Co-delivered mediation for families in child protection process under PINE</li> <li>• Co-delivered Changing Lives and New Foundations (programmes funded by the DWP's Reducing Parental Conflict Fund).</li> </ul>
<p><b>Jo Findon</b></p>	<p><b>Role</b> - Director and mediator. Data protection Lead. Deputy Safeguarding Officer.</p> <p><b>Responsibilities</b> - Mediating.</p> <p><b>Experience:</b></p> <ul style="list-style-type: none"> <li>• Family lawyer for over 25 years.</li> <li>• Accredited mediator for over 10 years.</li> <li>• Mediation Child Consultant</li> <li>• Member of Resolution and the Family Mediation Council</li> <li>• Trained in communication, conflict management, parenting skills and techniques, understanding impact of trauma and abuse</li> <li>• Co-delivered Changing Lives and New Foundations (programmes funded by the DWP's Reducing Parental Conflict Fund).</li> </ul>
<p><b>Helen Savage</b></p>	<p><b>Role</b> – Mediator</p> <p><b>Responsibilities</b> – Management of project. Training.</p> <p><b>Experience:</b></p> <ul style="list-style-type: none"> <li>• Qualified as family lawyer in 1997.</li> <li>• Accredited mediator in 2012.</li> <li>• Mediation Child Consultant</li> <li>• Managed and co-delivered Changing Lives and New Foundations (programmes funded by the DWP's Reducing Parental Conflict Fund).</li> </ul>



	<ul style="list-style-type: none"> <li>• Delivers training for Family Mediators Association on reducing conflict between separated parents, running a trauma informed practice, high conflict clients, parenting skills, domestic abuse and the impact of mental illness on mediation.</li> <li>• Provides one to one couple support, and group enrichment courses using Prepare Enrich, a relationship education tool.</li> <li>• Parenting - Incredible Years practitioner, Strengthening Families, Feelings Affect Behaviour, Time out for Parents of Children with Additional Needs.</li> <li>• Helen is also the CEO of a charity called Southampton Family Trust which works with vulnerable families, supporting 500 Southampton residents per year.</li> </ul>
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## External experts or advisory group(s)

There will be a steering committee, consisting of selected stakeholders, which will meet quarterly to provide support, guidance and oversight of progress. Committee will consist of one manager from each local authority, CAFCASS, district judge, local solicitor, mediators from Family Solutions.

## 5.2. Timeline

Dates	Activity	Staff responsible/leading
30.04.23	Attend kick-off meeting with WWEICSC Foundations and evaluation partner Agreement of project aims, outcomes, and outputs Local authority partner(s) formally recruited	Claire Webb and Helen Savage, working with Foundations and Coram
31.05.23	Draft Data Protection documents: <ul style="list-style-type: none"> <li>• Data Protection Impact Assessment (DPIA)</li> <li>• Data Sharing Agreement (DSA)</li> <li>• Data Privacy Notice (DPN)</li> </ul>	Claire Webb and Helen Savage, working with Foundations and Coram



	<p>Draft Memorandum of Understanding for participating LA's</p> <p>Draft of intervention protocol</p> <p>Research Protocol for WWEICSC Website</p> <p>Research ethics application</p> <p>Ethics review application</p> <p>Develop mediation education training content</p>	
30.06.23	Eligibility criteria for participants finalised, including referral form.	Claire Webb and Helen Savage, working with Foundations and Coram
31.08.23	<p>Data Protection:</p> <ul style="list-style-type: none"> <li>• Sign off on three-party DPIA</li> <li>• Sign off on DPN for inclusion on participant info sheet/ consent form</li> <li>• Coordinate the signing of DSAs) with WWEICSC, evaluator and delivery sites.</li> </ul> <p>Final intervention protocol submitted to WWEICSC ready for publishing</p> <p>Intervention protocol published on the Open Science Framework (OSF).</p> <p>Support evaluator and WWEICSC in the publication of the final research protocol.</p> <p>Effectively support evaluation partner with securing ethical approval for research.</p> <p>Working with evaluation partners to develop evaluation process.</p> <p>Establish recruitment pathway</p> <p>Initial communications promoting intervention to Local Authorities, local</p>	<p>Claire Webb and Helen Savage, working with Foundations and Coram</p> <p>Helen Savage</p> <p>Helen Savage</p> <p>Claire Webb and Helen Savage working with Coram</p> <p>Claire Webb</p>





	<p>family lawyers, CAFCASS, contact centres, courts, local kinship carer groups</p> <p>Commence initial data collection</p>	Claire Webb and Helen Savage
30.09.23	<p>Additional training for all staff and mediators around remit of programme and evaluation</p> <p>Delivery of mediation awareness training – 4 x 1 hour sessions</p> <p>Delivery of mediation awareness training 4 x face to face sessions.</p>	<p>Helen Savage</p> <p>Claire Webb and Helen Savage</p>
31.10.23	<p>Support evaluation partner to coordinate approximately 6 interviews relating to mediation education training with stakeholders</p>	Claire Webb, Helen Savage and Coram
29.12.23	<p>Conducted 20 individual assessment appointments to date (20 to date)</p> <p>Deliver steering group meeting (1<sup>st</sup> of 4)</p> <p>Attend project review meeting with evaluation partner</p> <p>Submit interim report to WWEICSC in WWEICSC template for comment</p>	<p>Claire Webb, Rebecca Hawkins, Jo Findon</p> <p>Helen Savage</p>
28.02.24	<p>Conducted 20 Individual Assessment Appointments (40 to date)</p>	Claire Webb, Rebecca Hawkins, Jo Findon
31.03.24	<p>Conduct 15 individual assessment appointments (55 to date)</p> <p>Deliver kinship mediation to 5 families (5 to date).</p> <p>Deliver steering group meeting (2<sup>nd</sup> of 4)</p> <p>Review interim report from evaluation partner</p>	<p>Claire Webb, Rebecca Hawkins, Jo Findon</p> <p>Helen Savage</p> <p>Claire Webb</p>



	<p>Coordinate mediation observations with the evaluation partner (where clients' consent has been obtained).</p> <p>Support evaluation partner to coordinate approximately 12 interviews with stakeholders.</p>	Claire Webb
30.04.24	Conducted 15 Individual Assessment Appointments (70 to date)	Claire Webb, Rebecca Hawkins, Jo Findon
31.05.24	<p>Conduct 10 individual assessment appointments (80 to date)</p> <p>Deliver kinship mediation to 5 families (10 to date).</p> <p>Support evaluator with data collection exercises:</p> <p>Transfer administrative data.</p> <p>Coordinate interviews/ focus groups/ observations between evaluator and participants.</p>	<p>Claire Webb, Rebecca Hawkins, Jo Findon</p> <p>Helen Savage</p> <p>Helen Savage</p>
28.06.24	Deliver steering group meeting (3 <sup>rd</sup> of 4)	Claire Webb, Rebecca Hawkins, Jo Findon
31.07.24	Deliver kinship mediation to 5 families (15 to date)	Claire Webb, Rebecca Hawkins, Jo Findon
31.08.24	Review first draft of the evaluator's feasibility study report	Helen Savage
30.09.24	<p>Delivery of kinship mediation to 5 families (20 to date)</p> <p>Deliver steering group meeting (4<sup>th</sup> of 4)</p>	Claire Webb, Rebecca Hawkins, Jo Findon



## 5.3. Project-related risks

<b>Risk</b>	<b>Impact of the risk from 1 (low) to 3 (high)</b>	<b>Mitigation</b>
Not enough referrals for kinship mediation	3	Mitigation – promotion of kinship care via funded mediation education for local authorities. This should provide good awareness of the project. Also, referral pathway simple, few barriers.
Attending mediation sessions – cohort can be chaotic and find it hard to attend appointments	2	Mediation education for local authorities will also cover appropriate referrals.  Offer online appointments if easier for participants
Participants do not attend fourth session and therefore final evaluation documents not completed.	2	Family Mediation Scale will also be completed at the end of the third session

## 5.4. Safeguarding risks

We envisage that safeguarding concerns may arise – for example: allegations relating to children’s experiences living with kinship carers, or while having contact with their birth family.

Mediation Now has a Safeguarding Children Policy and Safeguarding Vulnerable Adults Policy. All staff are familiar with the policies. Any concerns are raised immediately with Claire Webb, the safeguarding lead. Reporting is done immediately, on the same day the concern is raised. All concerns and incidents are recorded. All staff at Mediation Now have received Level One Safeguarding training for children and vulnerable adults. Policies and procedures are checked and updated annually. All mediators have up to date enhanced DBS checks.

All required information will be shared with Foundations.

Child consultation - as with any intervention or meeting a child attends where they are asked to speak about their experiences, there is likely to be an emotional impact on the child. The emotional



impact of a child consultation, and how a carer/parent approaches the concept with the child, is discussed with the adult participants in detail before the child consultation takes place. Adults are also reminded of their responsibilities around a child consultation during the feedback process in the third session.

## 5.5 Risks to inclusivity

<b>Protected characteristics</b>	<b>Potential impact on each of these groups?</b>	<b>Actions to mitigate impact and advance inclusivity of programme?</b>
Age	Children will be attending child consultations. Younger children may be frightened of being away from their parent/carer.	<p>Child consultations usually only take place if child is 10 years or above.</p> <p>Parent/carer accompanies child to the meeting room. Parent/carer only leaves with child's permission. Child is shown where parent/carer is waiting. Child is told they can go back to their parent/carer whenever they choose. Door is left open if child prefers.</p> <p>Mediators check with parent/carer first which snacks child prefers and provides them.</p> <p>Toys, books, colouring pens and paper are in the rooms.</p>
Socio-economic class	<p>Income - lack of income may make it hard to afford the cost of travel to attend mediation.</p> <p>Type of job – shift work means it can be hard to find mutually convenient appointments.</p>	<p>Income – mediation to take place at nearest and most convenient office for the family. Five of our six offices are close to public transport.</p> <p>If participants are not close to one of our offices, and they cannot afford the travel costs, we will approach the Local Authority about using one of their rooms (if there is one nearer to the participants).</p> <p>Type of job – appointments fitted around participants' working hours.</p>



<p>Disability</p>	<p>Physical disability – people may be concerned that offices will not be accessible.</p> <p>Learning difficulties – concerns that there may be complicated documents</p> <p>Neuro-diversity – concerns around focus and being asked to respond at speed</p>	<p>Participants’ needs, and the best way to support them, are identified at the MIAM.</p> <p>Participants will be invited to attend one of our five fully accessible offices.</p> <p>Documents are read to participants if needed.</p> <p>Materials are written in an “easy read” style with simple, jargon free language, shorter sentences and supporting images. There are some alternative options of explanatory YouTube videos available for participants who are uncomfortable with written materials.</p> <p>Participants are given breaks whenever needed, and time to reflect and consider their answers and before making decisions.</p>
<p>Ethnicity</p>	<p>Concern around lack of cultural sensitivity and respect for diverse beliefs and cultural values.</p> <p>Language needs.</p>	<p>Participants’ needs, and the best way to support them, are identified at the MIAM.</p> <p>Mediators are fully inclusive and trained to respect all types of differences in participants.</p> <p>Social services asked to provide translators where needed.</p>
<p>Religion or belief</p>	<p>Concern that religious beliefs and practices will be misunderstood or judged.</p> <p>May not be able to attend due to religious/cultural practice/celebrations.</p>	<p>Participants’ needs, and the best way to support them, are identified at the MIAM.</p> <p>Mediators are fully inclusive and trained to respect all types of differences in participants.</p> <p>Appointments are flexible and fitted in around participants needs.</p>
<p>Gender</p>	<p>Kinship carers are more likely to be female. Where kinship care is provided by a couple, in our experience, the female is more likely to attend.</p>	<p>Where kinship care is provided by a couple, both carers are encouraged to attend. Where this creates a “two versus one” scenario, the mediator may invite the “one” to bring a supporter for balance. Presence and identity of supporter must be agreed by all parties attending the mediation.</p>



Sexual orientation	May be worried about attending due to fear of prejudice/bias	Treated as all other participants whilst considering the additional sensitivities they may have.  Mediators use appropriate judgement free and positive terminology.
Gender reassignment	May be worried about attending due to fear of prejudice/bias.	Treated as all other participants whilst considering the additional sensitivities they may have.  Mediators use appropriate judgement free and positive terminology.  Offered a range of acceptable ID (not just birth certificates).  Use of chosen gender marker on documents and systems.
Caring responsibilities	Kinship care families will have caring responsibilities which means they can only attend at limited times.	Mediation sessions arranged in school hours. Availability of all participants ascertained before date and time of sessions set.
Substance abuse	Biological parents may have issues with substance abuse meaning they may be unable to participate in mediation at certain times.	Mediations scheduled for the morning when participants less likely to have been drinking/taking drugs.  Mediation session stopped if mediator feels participant unable to proceed, and another appointment offered.