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Love-led practice in children's residential care

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Abstract

The author describes a small-scale project, called Lovin' Care, designed to facilitate love-led practice in children's residential care in England. She provides evidence of its positive impact, on children, their care adults, and the residential organisations involved, and reflects on the potential power for good of a cultural change towards love-led practice in children's care.

Keywords

Love-led, Lovin' Care, attachment, England

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The Lovin' Care project

Children's Homes Quality is an independent organisation based in England, dedicated to supporting children's homes to provide outstanding care. I am the Training and Development Lead for CHQ, and I have a career long passion for attachment-based work. In the past I delivered attachment and trauma informed practice training, and I would ask participants if they thought they should love the children they cared for. Most felt they should care for the children in their homes, but not love them. This, despite England's Children's Homes Quality Standards, 2015, making its first key principle 'Children in residential care should be **loved,** happy, healthy...'.

Scotland's Independent Care Review (2020) inspired me to be bolder. It placed loving relationships firmly at the centre of understanding what children in care most need. Sue Gerhardt published her seminal book Why Love Matters in 2004. In it she evidenced the neuro-biological need for loving relationships, for healthy child development. She describes how developments in neuroscience support earlier observations by attachment theorists, and their claims that a secure, loving, attuned relationship between a young child and its carers is the essential foundation for healthy human development. The neurobiological evidence Gerhardt presents shows how the daily interactions between a child and its caregiver shape the architecture of the child's developing brain. A securely attached child, bathed in its carer's loving approach will have a calmed autonomic nervous system, increasing the capacity in the limbic regions of their brain to regulate feelings and maintain equilibrium, thereby creating the conditions where the cortical regions of their brain can develop and allow them, in time, to perform a multitude of sophisticated human tasks, such as learning, relating positively, and managing complex situations. The later work of Baylin and Hughes (2012) shows us that children who have experienced trauma in their early lives need stability with attuned loving carers in order to change the hardwired trauma architecture of their brains, and to have the opportunity to recover and thrive.

Why would children in residential care need or deserve anything less? There are, however, challenges to loving by shift pattern; perceptions of residential care being for children who don't want to live in a family setting (with its intimacy); and widespread cases of historical abuse, that have created different expectations for this section of the care system.

The Promise from the Scottish Government, in 2021, that 'Scotland's children and young people will grow up **loved**, safe and respected' prompted me to consider if and how Children's Homes Quality could play its part in bringing love into the centre of practice in residential children's care in England. And so, the Lovin' Care project was born.

Since 2021 Valerie Tulloch and I have delivered seven sets of Lovin' Care training sessions to over 100 leaders in children's homes, with the intention of supporting them to explore how to create environments in their homes where love between staff and children can safely flourish. We aim to provide leaders with the confidence to give their staff permission to love and be loved by the children they care for. Subsequently we have worked in depth with three organisations to support them to embed a Lovin' Care approach across all of their work; to think about:

- how to embed love-led practice into the frameworks and systems that support the work
- their communication about their purpose and practice
- the language they use
- the day-to-day activities and relationships in their homes
- their support to staff

In order to evaluate the impact of this changed way of working, we assisted these organisations in developing their own theory of change and identifying ways of evaluating impact. The organisations differed in how they did this, with one opting to use a recognised evaluation tool and to track attachment

indicators, and the other creating objectives and scaling them from 1-10, as achieved or not, in a group discussion. CHQ consultants worked with the organisations over an eight-month period, to capture a baseline picture at the start and to review progress monthly, leading to an evaluation at the end of the period. All three organisations were inspected by the regulatory body in England, Ofsted, which used the social care common inspection framework to arrive at a decision about quality of care and impact.

Each organisation created its own means of implementing a love-led approach, and they have been pathfinders, showing us what Lovin' Care can look like in practice, and where challenges might arise.

Central to encouraging a love-led approach is demystifying what love between children in care and their care staff can look like. To this end we used the concept of five love languages, developed by Dr Gary Chapman and Ross Campbell (Chapman & Campbell, 2016) to help people explore different ways to 'show children love'. Their five love languages are:

- Words of affirmation
- Physical touch
- Gifts
- Quality time
- Acts of service

He proposes that every person has a primary way in which they express and receive love, as described by the five love languages. An adult's love language may differ from that of the children they care for, and this can cause a disconnect. Understanding love languages can enable us to give love, respect, affection, and commitment in a way that does resonate with the child and is therefore more likely to help them reap the benefits of a loving relationship.

Evidence of the impact of love-led practice

Children

England's children's homes regulator, Ofsted, independently visited all three of the organisations we worked with and judged them to be Outstanding in all areas. It is evident in the Ofsted reports that loving relationships were tangible in the homes and children were clearly benefitting.

CHQ's evaluations in two of the organisations also evidenced that children benefit from love-led practice.

Both organisations changed their practice to incorporate an assessment of adults' and children's preferred love languages, and then intentionally built in opportunities for children to receive their preferred experiences of loving care.

They felt this made a significant difference to how the child felt about their relationships with adults, increasing safety and closeness.

One organisation used the Warwick-Edinburg Mental Wellbeing Scale (WEMWBS) to track one child. The WEMWBS measures mental wellbeing and provides a robust measurement of the impact of an intervention on mental wellbeing. The child's baseline score was in the 'very low' range (31), suggesting there may be 'significant difficulties for her in the area of mental wellbeing compared to her peers'. The second and third questionnaires completed showed significant strong progress into the 'average' range (47 & 50 respectively), indicating that she was 'doing OK compared to peers' (Davies & Tulloch, 2022).

The manager also tracked behaviours that indicate attachment to the adults in the home:

- Seeking proximity
- Using adults as a safe haven
- Having a secure base
- Separation distress
- The ability to co-regulate

This tracking demonstrated progress across all five indicators of developing a secure attachment. For example, from: 'Child struggles with physical contact and seeking affection and will self-soothe rather than discuss her issues', to: 'Child

seeks physical reassurance from adults (in the home) and uses them for emotional support when feeling sad' (Davies & Tulloch, 2022). The tracking also allowed the manager and team to identify the adults the child felt safest with and closest to. The organisation stopped the practice of allocating key workers. The manager and the whole team reinforced the child's connection with their primary attachment figures, rather than trying to dilute this, as can be the case in homes without a love-led approach.

The home's Ofsted¹ inspector commented on the quality of the relationships:

The relationships between the child and staff are exceptional. Staff know the child well, invest quality time with her and listen to her intently [...] This has resulted in the child developing an appropriate sense of belonging and a genuine feeling of being loved (Davies & Tulloch, 2022, p. 8).

As attachment theory predicts, the benefits of this increased security of attachment and mental wellbeing were evident in the child's progress with respect to her physical, social, and cognitive development. Ofsted noted: 'The progress that has been made with her health, education, and emotional and social well-being is highly impressive' (Davies & Tulloch, 2022, p.9).

Another organisation developed a more qualitative and descriptive evaluation framework. An outcome they aimed for was that 'Children experience higher levels of nurturing', and there was evidence that they had achieved this:

Leaders described children seeking affection and receiving it, being happy to spend time with adults at the home and thriving in their development. One child moved to another home in the organisation to be with an adult he regarded as his mother (Davies & Tulloch 2022, p. 12).

¹ Ofsted is the Office for Standards, Education Services, Standards and Skills for England: https://www.gov.uk/government/organisations/ofsted

Adults in this organisation were encouraged to show physical and verbal affection, as they felt it, rather than maintain a 'professional' distance from their children.

Ofsted commented:

... children actively seek hugs and reassurance from adults. The adults speak knowledgeably and lovingly about children and children speak lovingly about the adults who care for them. This has allowed children to safely experience new things and continue to grow (Davies & Tulloch, 2022, p. 12).

The children were quoted as saying:

Thank you for everything you have done for me I don't know where I would be without you and your support. You don't know how appreciative I am. I love you so much. Things have been getting so much better recently because of your support. Your humour is out of this world (adult name) you're amazing!!! (Davies & Tulloch 2022, p. 13).

This organisation could evidence that risk for children had decreased, and positive behaviour had increased. Ofsted stated:

[...] This has led to a marked decrease in episodes of children going missing, restraint, complaints and sanctions, of which there have been none for almost a year (Davies & Tulloch, 2022, p. 12).

The organisation set a key objective that children leaving their homes receive ongoing love and support. To this end premises were adapted to create a spare bedroom, and they are considering how to make provision for their older young people, to avoid the cliff edge of turning 18. Ofsted noted:

Children who have left drop in regularly and call regularly. One is pregnant and has asked for one of the adults to be her birth partner. She can stay over on occasion in the home. The organisation is seeking additional ways to offer support to children when they leave which could include provision of semi-independent accommodation (Davies & Tulloch, 2022, p. 13).

Care staff - adults

Benefits for staff was not an objective of the love-led approach, but it has been a striking and significant outcome in all three organisations. It is perhaps an indication of the authenticity of the relationships created, in that they are mutual, positively affecting the adults as well as the children.

The term staff was spontaneously replaced in all three organisations with the word adults, in an effort to make their homes less institutional.

One organisation was newly registered and experienced a significant turnover of staff at the outset. This was seen to be due to a mismatch between the people recruited at the start and the love-led approach the leaders began to adopt. However, once the Lovin' Care training and implementation got underway, staff stayed for and were attracted by the ethos and positive experience in the homes. A lovin' care approach released staff to feel emotionally about the children in their care. They can bring more of their whole selves into work, such as celebrating their own birthdays at the home. The usual boundaries around time on and time off shift have loosened, and adults will readily come into the homes for significant events, when 'off shift'. These changes have been supported by an increase in reflective practice, in the form of reflective journals as well as informal and formal reflective supervision.

Adults are regularly interviewed during the Monthly Independent Person visit. The Independent Person recorded:

She stated that she feels that the service is very child centred [...] She stated that there is a very positive atmosphere in the home and that the child had really enjoyed celebrating the birthday of a staff member the previous night. She felt that there

is not really a work atmosphere in the home (Davies & Tulloch, 2022, p. 9).

At another organisation, the registered manager wrote in his six-monthly review of quality of care:

We have found adults feeling comfortable now to write letters, come in when they are not scheduled to, to hug, to feel joy and sadness at life events with the young people and to challenge and advocate like any parent would – without fear of scrutiny or "red-tape" blocking these relationships (Davies & Tulloch, 2022, p. 14).

And Ofsted commented:

Adults consider themselves part of a family and many refer to their time in the home as not feeling like work. When asked, two new adults in the home were keen to tell the inspector that this was the best job they had ever had, and this encouraged them to give their best to the children in their care (Davies & Tulloch, 2022, p. 13).

An unintended consequence of adopting a love-led approach has been that the critical problems of recruitment and retention in residential child care (Lepper, 2021) have significantly decreased for these organisations. They can confidently draw on a motivated pool of people, keep and grow them, and maximise their efforts and goodwill. One of the organisations is opening new homes and has successfully developed its support workers to become newly registered managers and deputies.

The organisations

There is evidence that using a love-led approach has also been beneficial for the organisations we have supported.

Two of the three organisations achieved a judgement of Outstanding in all areas from Ofsted, at their first inspection following registration. This is a rare achievement. The other achieved their first judgement of Outstanding in all areas, in their 20-year history as an organisation.

However, all three organisations focussed on implementing a Lovin' Care approach purely for the impact on children. One was so confident that their approach was working that they made it clear to the inspector that whatever rating they were given this would not change their practice. The owner of another said that she wanted to use a love-led approach,

Because we believe that children need to feel loved. We can see that it makes a difference, and we can see the "professionalism" barriers that exist in children's homes, and the cost of that for young people and also staff (Davies & Tulloch, 2022, p. 5).

Using a love-led approach has resulted in changes in the standard processes in these homes. This is innovative and experimental, such that it sometimes takes a while to find what feels right. For example, key worker allocations have changed, so that children and adults are given space to click naturally and then this preference is supported and reinforced. There has been a significant shift in the language and terms used, to replace institutionalised or stigmatising language. For example, one home discussed with the child what they would like to call the statutory meetings they participate in. They have chosen to call their care review meeting 'my life review', and their personal education planning meeting, commonly referred to as a PEP meeting, is now called their 'Pepsi meeting', with all in attendance being offered a drink of Pepsi. Incident de-briefs are called support sessions and behaviour support plans are called support plans. Contact is called family time.

Recording styles have changed to involve the child more and to increase transparency.

All three organisations feel an increased level of pride in what they do, leading to resilience, optimism, and creativity as to what is possible.

Two of the organisations are looking to expand and acquire additional properties to house their young people nearby when they have to leave the children's home. One is developing a new home for siblings to live in as a way of supporting existing love relationships. One removed the staff office in order to create a spare bedroom for their young adults to sleep over when they want or need to.

Looking at all three organisations we can see successful businesses, investing in their staff and children, innovating to benefit the children, driven by a passion, and achieving results.

Reflections

As an advocate of attachment theory and trauma informed practice, I am interested and surprised to see how talking about love has a stronger, more positive impact on adults. Anyone caring for children who have suffered early childhood trauma needs the knowledge and skill base that comes with attachment and trauma informed practice, but the adults we worked alongside in this project have also been liberated to bring their emotional selves, their passion, joy, hopes, empathy, and strongest motivation to the work, through learning about love-led practice.

In Lovin' Care training with adults, I have heard people say, with emotion, 'this is why I came into the job'. People have reacted with enthusiasm and relief to the notion that the constraints they were previously working under were not all necessary. There are myths about what is needed for safeguarding and to comply with regulations, that are risk-averse responses to fears of what can happen. Love-led practice empowers caring, compassionate adults to bring their best selves to work, and maximises the human resources in children's homes. Adults will happily come in for extra shifts, or to share special times with children when they aren't on shift and will connect with children when they are on leave.

I have noticed how love-led practice has emboldened the leaders and owners of homes to believe more in their vision and aspirations, and to extend their purpose. It is interesting to observe how this has strengthened the desire to do better for their young adults once they have left the homes, and the capacity to innovate to make solutions possible.

I have also reflected on how a home needs strong safeguarding practices and culture in place before the idea of Lovin' Care is introduced; before we advocate a loosening of the boundaries that prevent loving relationships developing. We were approached by an organisation who were naive about the residential task and failing in their safeguarding responsibilities. It would have been unethical and dangerous to encourage them to embrace a love-led approach before they had the basics in place.

There have been challenges for the homes in the project. A common one is a lack of understanding from some external professionals, such as social workers or Ofsted inspectors, who insist on calling the home a 'unit', or teachers who report safeguarding concerns about male staff hugging children in the schoolyard, or social workers who complain that staff are unprofessional for being attached to a child. Love-led practice may seem to be an obviously good thing for children, but it is counter to the culture and practice that has developed in children's services to manage risks and resource constraints. Our homes are part of a cultural change towards more humane and effective care for children who cannot live with their families.

Finally, the three organisations we partnered with in the Lovin' Care project are small sized organisations, who have the freedom to evolve quickly. It might be more challenging to embed a cultural shift across larger organisations, with more entrenched bureaucracy.

Conclusion

How to fix the 'failing' children's residential care sector has vexed many commentators in England lately, who see recruitment problems, shortages of skilled managers, the lack of local authority resources, an inability to join up health, education, and care effectively, the 'broken' market and the apparent profiteering approach of some owners, as creating a perfect storm of problems to be overcome (MacAlistair, 2021). Meanwhile, these three organisations have

had a quiet and joyful revolution, which has produced amazing results, with little or no, extra spend, and at speed.

Lovin' Care is a way of delivering attachment informed care, and as such is not new. But what is new, is that it brings the love - which Bowlby thought he had to rename, to be accepted in his scientific community (White, 2016) - back into practice. It seems that language does matter, and when we reframe love as attachment or positive relationships, we disconnect it from a deep human need and response; we risk losing its essence and its power to transform.

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About the author

Margaret Davies has been a qualified social worker for more than 30 years, specialising for 20 years with children in care and their carers, and creating therapeutic placement services. From 2014 she has been an independent social work manger, trainer, and consultant, and from 2021, the Training and Development Lead for Children's Homes Quality.

ⁱ Endnote: CHQ is holding an event in May 2023, to bring together professionals interested in love led practice in children's residential care. For more information see: <u>Events 2 - Children's Homes Quality (childrenshomesquality.com)</u>