**Best Practice Briefing: Reunification Home**

**Voice of the Child**

**Regularly ascertaining the views, hopes, concerns, wishes of the child or young person is crucial**.

Use different direct tools to support this work such as;

Mind of My Own app,

Advocacy Service

Independent Visitor

Pastoral support within school

Whatsapp for adhoc check ins via text/calls.

Bespoke direct work during statutory visits.

Strengths and Difficulties Questionnaire

Information shared following Review Health Assessments.

**Useful Guidance for Practitioners and Managers**

The Department of Education commissioned NSPCC and University of Bristol to develop guidance/checklist to support practitioners and managers practice, in relation to reunification home.

Read at your leisure, alternatively, to support your SMART planning go to Page 45 to 56 of the guidance.

[Reunification: an evidence-informed framework for return home practice (nspcc.org.uk)](https://learning.nspcc.org.uk/media/1095/reunification-practice-framework-guidance.pdf)

Havering’s Best Practice Guidance can be found on our central library Sharepoint.

**What is Reunification?**

Reunification is when a Child or Young Person in Care returns home to live with their birth family.

It is most successful when it is well planned, based on robust & evidence-based assessment (risks & strengths), involves the child, their family and key multi-agency practitioners. In addition, the transition from Care to Birth Family is gradual with appropriate support made available and accessible for the child/young person and their family

**Who does it apply to**

Children and Young People who are

* on the edge of care/ in pre-proceedings
* accommodated under Section 20 CA1989
* subject to Section 31 Orders CA1989
* subject to Section 38 Orders CA1989
* who have recently become looked after e.g: under Powers of Police Protection as part of S47 investigation and the potential return home is being considered

 **Key Factors associated with Reunification Breakdowns**

Children are over the age of 10

Children have behavioural or emotional problems

Parent(s) are ambivalent about the return and/or isolated, limited support network.

Assessment lacked depth and knowledge of the child’s history, family functioning, wider family and social integration to their local community.

Risks were not made explicit; impacting on well-informed & robust decision-making taking place.

Service provisions are inadequate or are not made available to the family at the initial stages of the phased return.

The birth parents’ personal problem(s) had not been addressed or remained unsolved or hidden. Alcohol and drug misuse are highly related to repeat maltreatment.

Safety Planning does not address all level of risk. No contingency planning considered.

**5 Keys Stage to a successful Reunification home.**

1. Assessment of the child’s needs, risk, the protective factors and the parental capacity to sustain positive change.
2. Identify the different levels of risks to the child (in the home & community) in order to determine if a reunion is possible.
3. Parental agreement to work collaboratively with key multi-agency practitioners, SMART goal setting, ensure support is in place and universal services are available.
4. Robust safety planning and contingency planning prior to reunification and regular review of risks post reunification.
5. Frequent contact, support, advice and reviews take place with the child/ young person and their family after they return home.

 **Did you know….?**

 Research indicates that a pleasant and long- lasting experience of reunion is contingent upon a thorough needs assessment, evidence of improved parenting ability, a gradual, well-managed return home, also requires the appropriate support systems in place.

Community Care reported in 2015; the average annual cost of a child re-entering care after a failed return home is £61614, compared with supporting the child and family on their safe return home costing on average £5627.