Timely decision making and outcomes for children in out-of-home care

A quick scoping review

Australian Institute of Family Studies

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Report summary

Overview

The Australian Institute of Family Studies (AIFS) undertook a ‘quick scoping review’ of research evidence about ‘timely’ decision making for children and young people who have entered the child protection system. Specifically, the review explored the following two questions:

*Is there any evidence that the time between a substantiation and a long-term/permanent order (including adoption and reunification) affects the outcomes of children/young people who have been subject to a child protection substantiation?*

*What are the key factors (barriers and enablers) that affect the time taken to make a decision about placement (including adoption) or reunification after a child protection substantiation?*

The evidence search and review focused on publicly available research literature that had been published since 2000, was written or translated into English and had been undertaken in OECD countries.

Key messages

The evidence review located no recent empirical research that addressed the effects of ‘timely’ decisions about permanency (or the effects of how long it takes to make a permanency decision or order) on the health, wellbeing or life outcomes of children and young people.

Most research on the timing of permanency focused on the time taken to achieve particular placement outcomes (i.e. whether a child was adopted or reunified with their family of origin) rather than on whether this timing produced better or worse outcomes for the child.

There is a small body of empirical research on the factors that affect the speed at which decisions about permanency are made. The majority of this literature came from the USA or the United Kingdom and focused on either adoption or reunification with the family of origin.

The empirical research on the factors influencing the timeliness of decision making indicates that there can be multiple, and interconnected, factors that influence the timing of decisions about permanency or placement of children into ostensibly ‘permanent’ placements.

The reviewed literature indicated that age and child characteristics are particularly important factors in the relative speed of decisions about permanency. For example, decisions about adoption are commonly made more quickly for young children (and especially so for children under 12 months). The research literature also indicated that it can take longer to find suitable out-of-home care (OOHC) placements or adoptive carers for older children or for children and young people with emotional or behavioural difficulties.

Even when there is a mandated time period for decisions about permanency, the timing of decisions about permanency (and permanency outcomes) are strongly influenced by the individual circumstances of the child and/or by the capacity of the service system to effectively plan permanency pathways, find suitable carers or placements or support biological parents.

1. Introduction

This report contains the results of a scoping review of the evidence concerning the effects of ‘timely’ decision making on children and young people who have entered the child protection system. In particular, the review aimed to examine and synthesise the research evidence about whether the time taken to make decisions about permanency affects the health and/or wellbeing of children and young people. The review also explored the research on the key factors influencing the timing of decisions about permanency.

* 1. Background to the review

In February 2019, the Department of Social Services (DSS) engaged the Australian Institute of Family Studies to review the evidence on the effects of timely decision making about permanency. The review was undertaken between February and June 2019.

The purpose of the review is to build the research and evidence base for what works to achieve permanency for children in the child protection and/or out-of-home care (OOHC) systems. In particular, the review is intended to support policy and practice that accords with the *National Permanency Outcomes Statement* that was agreed by Commonwealth, State and Territory Community Services Ministers in 2018. This statement proposes a national approach to child protection and OOHC in which children and young people experience:

* safe and stable care
* timely decision making on permanency that takes into account the views of the child
* lifelong relationships and a sense of belonging, identity and connection to culture and community.

These experiences are to help children and young people achieve better life outcomes and realise their full potential.

The aim of this evidence review is specifically to explore what empirical research exists with regard to timeliness of decision making, and what the evidence says about the effects of timing on children and young people’s health, wellbeing and life outcomes.

* 1. Research questions

The review focused on two research topics. The first concerned the effects of the timing of decision making about permanency (including reunification, adoption or long-term placements in OOHC) on child outcomes. In the review, this topic took the form of the following research question:

* *Is there any evidence that the time between a substantiation and a long-term/permanent order (including adoption and reunification) affects the outcomes of children/young people who have been subject to a child protection substantiation?*

A secondary review question focused on the evidence about what factors influence or affect ‘timely’ decision making.

* *What are the key factors (barriers and enablers) that affect the time taken to make a decision about placement (including adoption) or reunification after a child protection substantiation?*
1. Evidence review methods
	1. Review method

The evidence review used a ‘scoping’ method to synthesise the available research and practice literature (Arksey & O’Malley, 2005). Scoping reviews are distinct from systematic reviews and rapid evidence assessments in that they do not usually focus on assessing and/or ranking the quality of evidence for the effectiveness of particular interventions, nor do scoping reviews usually attempt to summarise or assess all literature found in a search. Rather, the aim is to outline the nature and extent of research activity in a given field, provide an informed conclusion about the characteristics of the evidence base for a particular topic and summarise what the evidence says about that topic.

This scoping review did use some of the systematic search methods of a traditional systematic review and applied a set of inclusion and exclusion criteria to search key research databases. This search process is outlined below. In common with other scoping reviews, the search also involved an iterative exploratory process, with early finds informing later searches and revisions to the search criteria. The literature search commenced with the scoping of known literature on the topic. This initial scoping was then used in order to refine and inform the search terms for the subsequent database searches. Such snowballing can also be an effective method for finding grey literature and ‘hard to find’ studies that do not use key search terms but may nonetheless contain relevant research material.

The review included the following steps:

* planning and problem formulation
* data collection and literature search
* extraction of data and key findings
* synthesis and mapping of the literature/research evidence
* presentation of results.

### Problem formulation and research focus

The key terms of the review topic were workshopped with DSS to ensure the review had an appropriate focus. Through these discussions, it was determined that for the primary research question, the key population of interest was children and young people who have been subject to a child protection substantiation. The review was also to focus specifically on child outcomes; in particular placement stability, enduring relationships, educational attainment, contact with the criminal justice system, and health and wellbeing. ‘Decisions about permanency’ were defined as those decisions leading to family reunification, adoption or a long-term OOHC order.

The primary research question was formulated using a Population Intervention Comparison Outcome (PICO) framework (see Table 1). The PICO framework defines the population of interest and their specific characteristics.

Table 1: PICO framework

| P Patient, Problem, Population | **I** Intervention | **C** Comparison | **O** Outcome |
| --- | --- | --- | --- |
| Child oryoung person subject to a child protection substantiationAge: no age limit; any child with a child protection orderGender: No restrictionsCountry: OECD countries (special focus on Australia, Canada, UK, New Zealand, USA, Denmark, Finland, Norway, Sweden) | None | None | Any evidence that the timing (fast or slow) of permanency decisions (placement, including adoption, or reunification) affects children and/or young people’s outcomesParticular interest in evidence for the positive or negative effect of decisions made within two years of substantiation.  |
| Research question in PICO format: *Is there any evidence that the time between a substantiation and a long-term/permanent order (including adoption and reunification) affects the outcomes of children/young people who have been subject to a child protection substantiation?* |

Scoping discussions and preliminary scoping searches identified the potential for the research question to produce limited research evidence on children and young people’s outcomes as a result of the timing of decisions about reunification, adoption or long-term OOHC orders and placement. Therefore, the review also explored a secondary research question about the factors that could determine or influence the speed at which decisions about permanency, or actual permanent placements, were made. Because this second topic did not focus on a specific population, the PICO framework was not used for this secondary question.

* 1. Search methods

The literature search systematically gathered all potentially relevant literature by making a list of relevant subject headings and free-text search terms (see Table 2). To source as much available evidence as possible, the review team initially used all extended search-term strings on all target databases and websites with ‘advanced search’ functions.

Table 2: Search terms

| Field 1: Out of home care (OOHC) OR foster care OR kinship care OR state care OR residential care OR group homes OR looked after child OR child in care OR child protection |
| --- |
| AND |
| Field 2: Permanency OR permanen\* OR long-term OR reunification OR restoration OR adoption OR placement OR stability OR stable |
| AND |
| Field 3: time frame(s) OR time\* OR fast OR quick OR slow OR delay\* OR speed OR duration |
| AND |
| Field 4: decision making OR planning OR case planning |

The study population (children and young people) was not specified in the search terms because Field 1 was expected to cover this population, but any literature focusing on other populations was excluded in the screening phase. In order to locate and review as wide a range of literature as possible, in a topic area that scoping had identified as relatively small, the search terms were as broad as possible and did not focus on specific definitions of ‘timeliness’, specific time frames for decisions or specific child outcomes. However, literature that did not explore either child outcomes (topic 1) or the factors influencing the timing of decisions about permanency or OOHC placement (topic 2) were excluded in the screening phase (see section 2.3).

In accordance with the ‘quick’ nature of the review, the search for research literature was confined to major databases, or key sector websites and clearinghouses. Systematic searches of the title/s, abstract/s, subject/s and keyword/s fields of the following databases and websites were undertaken:

* A+ Education
* Academic OneFile
* AIFS Library Catalogue
* Australia/New Zealand Reference Centre Plus
* Australian Criminology Database
* Australian Public Affairs – Full Text
* British Library EThOS
* Business Source Premier
* Complementary Index
* Directory of Open Access Journals
* EconLit with Full Text
* ERIC
* Expanded Academic ASAP
* General OneFile
* Informit
* JSTOR Journals
* LexisNexis Academic: Law Reviews
* Library, Information Science & Technology Abstracts
* McGraw-Hill Medical
* MEDLINE
* ProjectMUSE
* PsycARTICLES
* Psychology and Behavioral Sciences Collection
* PsycINFO
* Research Starters
* ScienceDirect
* SocINDEX with Full Text
* Women's Studies International
	1. Research literature screening

### Inclusion and exclusion criteria

The review used clear and specific inclusion criteria to define the type of research evidence chosen for review (see Table 3). The screening limited the selection of studies to a specific time frame (studies published since 2000) and to research studies written in or translated into English. Studies reviewed for Topic 1 (child outcomes of timely decision making) were excluded if they did not address the primary research population of children or young people who had a child protection substantiation (and/or were, or had been, in the OOHC system) or if they did not reference child outcomes. However, literature that discussed the timing of decisions about reunification, adoption or placement in OOHC was included in the Topic 2 review, even when child outcomes were not mentioned.

Table 3: Inclusion and exclusion criteria

| Inclusion criteria |
| --- |
| 1. Published, peer-reviewed research studies
2. Grey literature (non-peer-reviewed literature)
3. Research papers that were published within the last 19 years (2000–19)
4. Studies that explore or reference permanency decision-making time frames for children/young people in, or entering, OOHC, and subsequent outcomes
5. Study population: Children on a child protection order (no age or gender limit) (Topic 1)
6. English language papers
7. Papers based on child protection population and families in OECD countries
 |
| Exclusion criteria |
| 1. Papers not written or translated into English
2. Papers more than 19 years old (published before 2000)
3. Papers where a full-text version is not readily available
4. Study based on a non-OECD population
5. Study does not address the time taken to make a placement or permanency decision
6. Study does not address outcomes for children or young people who have been subject to a child protection order
 |

### Screening

The review team employed a two-step screening process. In Step 1, the titles of all records were screened for relevance against the inclusion criteria. The records retained after the title screening were then screened against the inclusion criteria based on information included in the abstract.
A second reviewer assessed this list of abstracts.

In Step 2, full-text versions were obtained for all remaining records (*n* = 55). These full-text articles were assessed for eligibility against the research question and inclusion criteria. The full-text papers were screened in discussion with a second reviewer.

Two additional papers, that had been obtained through a snowball process, were also assessed against the research question and inclusion criteria and found eligible for review.

Table 4 summarises each stage of the screening process.

Table 4: Literature screening results

| Processing stage | Results |  |
| --- | --- | --- |
| **Identification and retrieval** | Number of records identified through database and website search | 707 |
| **Screening step 1: title/abstract** | Number of records excluded after reading title/abstract – *not eligible against inclusion criteria* | 652 |
| **Screening step 2: full text** | Number of full-text articles assessed for eligibility | 55 |
|  | Number of full-text articles excluded – not eligible against inclusion criteria | 43 |
| **Articles obtained through a snowball method** | Number of full-text articles assessed for eligibility | 2 |
| **Inclusion and assessment** | Final number of studies included for assessment  | 14 |

1. Findings
	1. The effect of timely decision making on child outcomes

The literature search did not locate any recent (i.e. since 2000) empirical research that addressed the effects of the timing of decisions about permanency on child health, wellbeing or life outcomes.

There is insufficient evidence to definitively explain the absence of publicly available research on this topic. It is the case that some policy and legislative frameworks related to the timing of permanency decisions are relatively recent. For instance, the current Victorian guidelines for the timing of permanency were not introduced until 2016 (Commission for Children and Young People, 2017). However, the USA has had mandatory permanency time frames since 1997 under the Adoption and Safe Families Act (ASFA).

Under this Act, children undergo a permanency hearing within 12 months of their first placement in care. In addition, petitions for the termination of parents should be filed for children who have been in care for the last 12 consecutive months or 15 of the past 22 months. There are exemptions for terminating parental rights (Potter & Klein-Rothschild, 2002). Although ASFA was enacted more than 20 years ago, the literature search did not locate any empirical research findings arising from this legislative framework that addressed the relationship between decision-making times and child outcomes. Most research on the timing of permanency (under ASFA and in general) focused on the time taken to achieve particular permanency or placement outcomes (e.g. whether a child was adopted or reunified with their parents) rather than on whether this timing produced better outcomes for the child.

* 1. The main factors influencing the timing of decisions about permanency

### Overview of the reviewed literature

* The research located in the review is primarily US-based and mostly draws on the analysis of case file data and from qualitive interviews.
* Legal permanency, particularly adoption, is a strong feature in the literature. There is also some literature on reunification. The review found little empirical research about any connection between relationship permanency and the timing of decisions about permanency.
* In general, the research literature on ‘permanency’ focused on adoption or, to a lesser extent, on reunification with the family of origin. There was little or no literature on other long-term OOHC orders.
* Although the need for ‘timely decision making’ was often discussed in research and practice literature, there was little consensus on the definition of ‘timely’ decision making. When ‘timeliness’ was referred to in the research and practice literature, it was sometimes equated with the speed of decision making. However, ‘timeliness’ also sometimes appeared to mean ‘making a decision at the right time’, but there was little guidance as to what that meant in practice.
* Not all literature referred specifically or only to the timing of ‘decisions’ about permanency, but instead, or also, referred to the time taken to achieve a 'permanency’ outcome such as adoption or reunification. In some instances, there was a distinction between a permanency decision – such as a decision to have a child enter an adoption pathway – and successful placement with an adoptive carer.

### Overview of research findings

The reviewed literature did not provide conclusive evidence about how to ensure ‘timely’ decision making (or what ‘timely decision making’ meant in practice). However, the review did find research literature indicating that there are some common factors associated with the timing or speed of decision making and/or placement (for adoption or reunification). Common factors influencing the timing of decision *or* permanent placement included:

* policy/legislative frameworks
* child factors
* family of origin factors
* system and practice factors.

A more detailed summary of what the literature says about how these factors influence permanency decisions is presented below.

### Detailed summary of factors associated with the timing of decision making

#### Policy/legislative frameworks

Seven articles examined the impact of policy or legislative mechanisms on permanency decision-making times (see Table 4). Three were research studies conducted in the context of ASFA in the USA and three were research studies or evaluations undertaken in the context of local initiatives aimed at expediting permanency placements. One Australian report presented the results of a review of permanency amendments in Victoria.

Overall, the findings of this research indicated that policy and legislative mechanisms designed to ensure specific time frames for placement or permanency outcomes had inconsistent results. Some specific American projects aimed at expediting permanency were found to lead to an increased number of children or young people achieving a permanency outcome (such as adoption) within 6–12 months. In their study of the Colorado Expedited Permanency Project, Potter and Klein-Rothschild (2002) found that 82% (*n* = 366) of their study sample were adopted within 12 months of entering care (also see McDonald, Berry, Patterson, & Scott, 2000).

However, other research findings suggested that recommended permanency time frames, such as those enshrined in the US federal ASFA legislation, did not necessarily guarantee either ‘timely’ decisions about permanency, nor did decisions about permanency always lead to faster permanent placements (Kemp & Bodonyi, 2000, 2002). In their analysis of 640 adoption referral case files, Cushing and Greenblatt (2009) found that children spent an average of two years in care from the time of removal to the time a termination of parental rights (TPR) was filed. There was then an average eight months before a TPR petition was granted and another estimated 30 months from the time of TPR approval to when the adoption petition was filed. Adoption petitions are typically granted in one month.

These figures suggested that even when time frames were established to speed up permanency decisions, children could still spend extended periods in state care before being placed in a permanent arrangement. There were multiple reasons cited for why permanency decisions, or placements, could take longer for some children than for others; most commonly these were a lack of service capacity or specific child needs. The research on the effect of such factors on decisions or placements are outlined later in this chapter. In some instances (e.g. McDonald et al., 2000), the researchers were unable to determine why some decisions or placement outcomes took longer than the legislation mandated or recommended.

Only one Australian study of the effect of legislative and policy reforms designed to facilitate permanent outcomes for children was located: the Victorian Commission for Children and Young People’s 2017 Inquiry into the *Children, Youth and Families Amendment (Permanent Care and Other Matters) Act, 2014*. This review, which drew on case file analysis and stakeholder consultations, found that the legislation’s time frames for permanency decision making (including permanency planning and the setting of permanency objectives) were not routinely adhered to. Limited staff capacity, or capability, were among the main reasons for failure to adhere to the set time frames (see further discussion of this below). However, the review was conducted relatively soon after the amendments were established and the authors noted that more time may be needed for child protection agencies to meet the new requirements.

A summary of findings from the articles that examined policy and legislative frameworks is presented in Table 4.

Table 4: Literature on policy and legislative frameworks

| Author | Country | Context | Findings |
| --- | --- | --- | --- |
| Commission for Children and Young People (2017) | Australia | *Children, Youth and Families Amendment (Permanent Care and Other Matters) Act, 2014* **Case plans** must be made within 21 days of substantiation. | **Case plans:** 46% of 143 children selected for detailed analysis had case plans completed within the time frame. The Commission recommended increasing the 21-day time frame for completing a case plan (process includes identifying a permanency objective) in order to sufficiently involve families in planning and to give practitioners sufficient time to make appropriate plans.  |
| Cushing & Greenblatt (2009) | USA | *Adoption and Safe Families Act, 1997*Mandatory time frames for terminating parental rights.No time frames for placing children in permanent homes after termination. | More than half of the sample (640 children) were adopted within the one-year study period. A further 10 children had adoption petitions filed in this time frame. 290 children were still waiting to be adopted but of these 50% were placed with a prospective adoptive carer.  |
| Kemp & Bodonyi (2000) | USA | *Adoption and Safe Families Act, 1997*Mandatory time frames for terminating parental rights.No time frames for placing children in permanent homes after termination. | Fifty-three per cent of the 458 infants included in the study did not achieve adoption within the one-year study period. Two hundred and seven infants were adopted within the year. The median length of time in care for these children was 39 months (ranging from 19.4 to 42 months), and 16.9 months after their parents’ rights were terminated. |
| Kemp & Bodonyi (2002) | USA | *Adoption and Safe Families Act, 1997*Mandatory time frames for terminating parental rights.No time frames for placing children in permanent homes after termination. | Two-thirds of 1,370 children in care did not achieve timely adoption (within the one-year study period). The median length of time in care for 444 children that achieved timely adoption was 42.7 months. |
| Martin, Barbee, Antle, & Sar (2002) | USA  | Pilot project in Kentucky that aimed to expedite permanency placements (reunification, adoption and permanent foster or kinship placements) to within 12 months for children at risk of drift. | Thirty-three per cent of 84 children in an urban site achieved permanency within 12 months. Ten were reunified, nine were placed with kin and nine were adopted. Twenty-seven per cent of 30 children in the rural site were in the process of adoption. No children were placed in permanent alternatives or reunified with their families during the study period.  |
| McDonald et al. (2000) | USA  | Evaluation of two Kansas reforms aimed at moving children into adoption placements within six months of being referred for adoption.  | Prior to the reforms, less than 10% of children achieved permanency placements within six months post-referral for adoption. Adoption figures almost doubled after the reforms were implemented. When accounting for when adoption referrals occurred, researchers found that 30% of children who were referred in the same year as their parent rights were terminated were adopted in 180 days, and 56% were adopted within a one-year period. Researchers were unable to comment on why some referrals were delayed. |
| Potter & Klein-Rothschild (2002) | USA | Colorado Expedited Permanency ProjectChildren aged six years old or younger when they enter care are required to be in a permanent home within 12 months | Referring to a previous study that drew from the same data, results showed that 82% of children in care (*n* = 366) during the one-year study period achieved timely permanence.  |

#### Child factors

Eight of the reviewed articles included research about child factors associated with the speed of permanency decision making (see Cushing & Greenblatt, 2009; Kemp & Bodonyi, 2000; Monck, Reynolds, & Wigfall, 2004; McDonald et al., 2000; Potter & Klein-Rothschild, 2002; Selwyn, Frazer, & Quinton, 2006; Tregeagle, Moggach, Cox, & Voigt, 2014; Yampolskaya, Armstrong, Strozier, & Swanke, 2017). Child factors included age, gender, race, behaviour and placement history.

Within the literature, the word ‘timely’ was commonly used to describe the speed of placement or decision making; however, the term was rarely defined. Where ‘timely’ *was* defined it was most commonly used to mean within 12 months of entry into state care.

##### Age

Five of the reviewed articles established age as one of the primary factors influencing the timing of adoption placements. In general, the literature indicated that older children are less likely to achieve a permanent placement (such as adoption or reunification) than younger children. In particular, much of the reviewed literature indicated that the chances of a child achieving a permanent placement decreased over the age of one year old.

In their case-file based research on infant care pathways in the USA, Kemp and Bodonyi (2000) found that children over one year of age spent a median time of 14 months longer in foster care (before adoption or reunification) than did children who had entered care under the age of one. However, children who had entered care as infants often still spent a considerable amount of time in care before adoption, even when a decision about the appropriate pathway had been made. Half of the children in the sample who had entered care as infants spent more than 39 months in care (for some, it was much longer), and a median time of 17 months *after* being recommended for adoption. Similarly, US research on the reunification outcomes of 1,774 children in OOHC aged 0–17 years old indicated that the chances of reunification within a 12-month time frame reduced by 5% with every year a child aged (past the age of one) (Yampolskaya et al., 2017). Being younger was also a predictor of being adopted in research that examined the UK adoption time frames of 130 children aged 3–11 years old (Selwyn et al. 2006).

Adoption time frames were also shorter for younger children included in an Australian study of 65 children adopted through a specialised permanency program in New South Wales (Tregeagle et al., 2014). The type of permanent placement was also a factor in timing here. An analysis of case files (covering a 10-year period) found that children under two years of age spent an average time of 4.5 months in care before finding a permanent placement other than adoption (i.e. long-term foster or kin relationships care) and an average of 43 months in care prior to being adopted. The analysis also showed that time in care increased as the children aged. The researchers suggested that it took longer to finalise adoption placements compared to other ‘permanent’ placements because it can be difficult to find families willing to adopt children and because birth parents often contest adoption orders.

When reviewing the outcomes of a concurrency planning program in the United Kingdom,[[1]](#footnote-1) Monck and colleagues (2004) also found age to be a factor for adoption time frames. Analysis of case files showed that only 27 out of 219 cases referred for the concurrency program had been accepted for adoption. Although eligibility for the program allowed for children up to three years of age, the children who were accepted into the program (in the time period examined by the researchers) were almost exclusively infants and 96% were younger than six months when they entered care.

##### Gender

Two US-based studies found an association between gender and the timing of adoption, with both finding that boys spent a longer time in state care, before being adopted, than girls. Cushing and Greenblatt’s (2009) analysis of 640 adoption-referral case files showed that boys were 66% more likely to have delayed adoptions than girls, although the authors did not specify what time frames constituted ‘delay’. Similarly, Kemp and Bodonyi’s (2000) analysis of 458 infant case files found that boys were 28% less likely than girls to achieve adoption in the one-year study period.

##### Ethnicity and ‘race’

Three of the articles reviewed indicated that ‘race’ was a predictor of how quickly permanency outcomes were achieved (Kemp & Bodonyi, 2000; Potter & Klein-Rothschild, 2002; Selwyn et al., 2006). Two reviews of case files in the USA (Kemp & Bodonyi, 2000; Potter & Klein-Rothschild, 2002) found that African-American children were not only over-represented in the child protection system (Kemp & Bodonyi, 2000), but also achieved permanency (defined here as reunification or adoption) at slower rates than Caucasian children. In Kemp and Bodonyi’s (2000) analysis of 458 infants who were ‘free for adoption’, African-American infants were 57% less likely than Caucasian children to be adopted during the year-long study. Conversely, Hispanic children were 1.7 times more likely to be adopted than were Caucasian children.

Researchers in the UK also found an association between being black/mixed race and ‘slower’ times to adoption.[[2]](#footnote-2) However, the researchers were cautious about deriving meaning from the findings as only 10 black/mixed race children (7.7% of the sample) were included in the study (Selwyn et al., 2006).

##### Behaviour

Three of the reviewed research studies (one from Australia and two from the USA) indicated that behavioural and/or emotional difficulties may be associated with the timing of permanency decisions or placements.

Cushing and Greenblatt’s (2009) analysis of case file data pertaining to 640 US children showed that emotional or behavioural problems were documented in 92% of cases that did not result in adoption. In comparison, 44% of children who achieved adoption within the one-year study period documented emotional or behavioural problems (Cushing & Greenblatt, 2009).

In a qualitative study, Potter and Klein-Rothschild (2002) interviewed court and county professionals in the US about the barriers to timely permanency (defined as reunification or adoption within 12 months of entering care and/or the child protection system). The interview participants suggested that children’s emotional and/or behavioural issues were a barrier to timely permanency, in part, because it was often difficult to find carers prepared to support the child’s higher needs (Potter & Klein-Rothschild, 2002).

One Australian study (Tregeagle et al., 2014) suggested that it is possible to place children with behavioural problems requiring intensive and ongoing support with long-term carers
(into long-term placements). However, the study did not provide empirical details about how quickly placements were found for these children or how placement times compared to children without behavioural problems.

##### Placement history

Three reviewed articles identified children’s placement history as a factor in the timing of permanency decisions and/or permanent placements. Cushing and Greenblatt’s (2009) research into delayed adoption found that children placed with prospective adoptive carers prior to becoming legally free (i.e. legally able to be adopted), spent almost half the median time in OOHC than children without such a prior placement (11.63 months vs 20.47 months). Cushing and Greenblatt (2009) also found that children who had spent longer periods in state care after their parents’ rights were terminated (but before an adoption referral) also commonly waited longer to be adopted. Children who were adopted had spent an average of 1.14 years in care compared to 1.76 years for children who were not adopted in the one-year study period. However, the researchers were unable to explain the cause of longer wait times with the available data.

McDonald and colleagues (2000) reported similar findings in their evaluation of adoption reform in Kansas, USA. They found that adoption took longer for children that had delayed referrals for adoption (i.e. where a decision to make the child available for adoption had taken longer). McDonald and colleagues suggested that these children may have been difficult to place, hence the longer time to referral; however, they did not have empirical data to support this suggestion.

In Australia, Tregeagle and colleagues’ (2014) analysis of 65 case files selected from a specialised permanency and adoption program found that a previous placement breakdown prior to being recommended for adoption was also a factor associated with long adoption waiting times. Adoption times ranged from an average of 49 months for children under two years of age to 123 months for children aged 10 years and older. However, the relationship between breakdown and adoption times was not well understood; there was no analysis regarding the number of children with placement breakdown or how much longer these adoptions took compared to children without a previous placement breakdown.

#### Family of origin factors

Two reviewed articles examined parent characteristics in relation to the timing of decisions about permanency and/or permanency outcomes (Henderson, Hanson, & Whitehead, 2011; Yampolskaya et al., 2017). Yampolskaya and colleagues’ (2017) analysis of 1,774 children in care in the USA indicated that the children of parents with substance abuse issues were at higher risk of remaining in OOHC for longer than 12 months (Yampolskaya et al., 2017). Furthermore, after assessing a range of quality case planning indicators, the researchers found that supporting parents to engage with case management processes was positively associated with timely reunification (defined as within one year of entering care). As no other case planning indicators had a positive association with reunification, the researchers suggested that a combination of parent and case planning factors were required for reunification. No other corroborating evidence was available to support this suggestion.

In a Scottish study of permanency planning, analysis of the case files of 100 children showed that approximately one third (*n* = 35) had obtained a permanency decision more than two years after their first involvement with child protection services (Henderson et al., 2011). Nineteen children waited longer than three years. The main reason for what the researchers considered to be delays in decision making were the child protection services allowing extra time for parent or kin care assessments and for parent rehabilitation attempts. No data were provided on whether these factors were present or absent in cases that took shorter times to resolve.

#### System and practice factors

The evidence review indicated that child protection systems, system resources and staffing, as well as child protection practices could influence the timing of permanency planning (including making concrete decisions about permanency) and the speed with which permanent placements were achieved. The review also noted that there is some evidence that time frames established in order to facilitate permanency decisions (such as a decision to make a permanent care order) could conflict with other forms of permanency such as family reunification (e.g. see Commission for Children and Young People, 2017).

##### Service system factors

The Commission for Children and Young People’s Inquiry into the Victorian Children, Youth and Families Amendments (2017) noted several systemic barriers to achieving ‘timely’ reunification; in particular, the recommended time frames for permanent removal from a family of origin conflicted with reunification goals because they did not allow sufficient time for the family of origin to obtain necessary supports. The Inquiry report noted that recent amendments in Victoria stipulated that if a child has been in state care for longer than two years, and the Court deemed it unsafe for them to return home, alternative permanent care arrangements should be made. However, stakeholders consulted as part of the Inquiry expressed concern that the two-year time frame did not allow sufficient time for parents with complex issues to obtain the help that they needed; in part, because of the long waiting times – up to 18 months – for appropriate alcohol and drug, mental health and family violence services. Respondents to the Inquiry suggested that this was particularly an issue for Aboriginal families, families affected by intergenerational trauma, survivors of family violence, families managing substance abuse issues, teenage parents and parents with disabilities.

Foster families and child protection staff interviewed by Cushing and Greenblatt (2009) also suggested that poor service availability and inadequate support to help address children’s needs were barriers to achieving timely adoption. Similarly, Martin and colleagues’ (2002) interviews with child protection professionals in rural and urban USA indicated that there were several systemic barriers to achieving timely reunification, adoption or long-term foster placements within a concurrency planning program. Barriers included inappropriate service referrals for parents, due to misdiagnosed conditions, and poor service co-ordination for parents in need of multiple interventions.

In addition, case files analysed by Selwyn and colleagues (2006) showed that 11 children (8% of the sample) in a UK study had waited six years to be seen by an adoption panel. Their analysis of the adoption panel minutes indicated that three cases were held up because the grandparents caring for the children were concerned about losing their financial benefits as a result of becoming adoptive carers. The other four cases were held up due to poor case planning.

##### Child protection and case planning practices

Several research studies identified child protection practices as a factor in either accelerating or delaying permanency planning. In their qualitative study of an expedited permanency project in the UK, Martin and colleagues (2002) reported that key informants including court personnel, caseworkers and child guardians had stated that a lack of shared understanding (among workers and local councils) about the goals of the project, as well as poor caseworker skills and a lack of knowledge about how to implement planning frameworks, had contributed to delays (at times longer than 12 months) in placing children in permanent homes. Martin and colleagues’ (2002) also found that when caseworkers correctly implemented permanency planning frameworks, parents were more likely to follow the actions set out in their case plans. However, it was not clear if good casework and parent engagement helped or hindered progress towards timely permanence for children.

Four articles also identified staff shortages and workload pressures within the child protection system as contributing to delayed permanency planning (Commission for Children and Young People, 2017; Selwyn et al., 2006), delayed long-term or permanent placement (Potter and Klein-Rothschild, 2002) and extended legal proceedings (Turpie, 2005).

Some of the literature gave detailed accounts of how case planning can be both a barrier and an enabler to timely decision making. For example, Selwyn and colleagues (2006) noted that 41% of their UK study sample (*n* = 53 children) had waited longer than 12 months for a permanency plan. Their analysis of case notes suggested that the delays were the result of caseworkers not engaging in ‘active’ planning tasks, prioritising sibling cases and being satisfied with the existing care arrangements. In cases where children waited for more than 12 months for an adoption hearing, after a permanency plan was completed (31%), the stated reasons for delays included staff illness and staff shortages as well as concerns about the quality of prospective adoptive carers.

Conversely, there is also evidence of particular caseworker efforts being positively related to timely reunification. In particular, caseworker support for parents in reunification planning could lead to shorter times to reunification (Yampolskaya et al., 2017). However, Yampolskaya and colleagues (2017) also found that other necessary caseworker practices, such as assessing families’ ongoing needs, promoting service engagement and case manager visits with parents, did not positively affect the timing of reunification outcomes. Based on these findings, the researchers suggested that a combination of parent characteristics and caseworker support is likely to enable timely reunification.

The Commission for Children and Young People’s Inquiry into the Victorian Children, Youth and Families Amendments (2017) also found several examples of delays in case planning or a lack of active planning. Specifically, a review of 174 case files showed that although a long-term care permanency objective was recorded for three quarters of children, there was no evidence of active casework to achieve permanency for nearly half of the children who had been registered for reunification or an objective of long-term permanency. Analysis of the case files of a further 88 children on reunification orders showed that 40% had no facilitated contact with their birth families in the two-month review period. Active casework (defined as evidence of regular contact with families and children, parent engagement with services and regular meetings and reviews) towards reunification was found in only 51 of 88 cases. Minimal casework was evident in 37 cases and seven children had no casework documented. The authors of the Commission report expressed concern that such poor case planning was likely to lead to unnecessary delays in reunification efforts and would lead to children being placed in alternative permanent care arrangements.

In the same report, stakeholder feedback and case studies indicated that workforce issues, such as high workloads and time pressures, or a lack of appropriate staff, impeded active case planning (including the identification of a permanency outcome) and contributed to slow permanency planning. Slow decision making was particularly evident for Aboriginal children, with some reported as waiting more than four years for a permanency plan. The review indicated that the relevant state government department did not always adhere to culturally appropriate procedures and was not working co-operatively with Aboriginal organisations, which, in turn, could create barriers to faster decision making for Aboriginal children (Commission for Children and Young People, 2017).

##### Legal proceedings

Martin and colleagues’ (2002) evaluation of the implementation of an American expedited permanency project found that court delays contributed to permanency placements (reunification, adoption, permanent foster or permanent kinship placements) taking longer than one year to achieve. The delays were particularly evident in the rural pilot site compared to the urban pilot site. Analysis of key informant interview data suggested that court delays occurred because service providers were unaware of their role in assisting court processes and parents did not have the resources or support to attend court; barriers to parent’s attending court included limited access to child care, parent services or transport. However, the study did not indicate the overall impact of court delays on the achievement of permanency placements.

Selwyn and colleagues (2006) also found that disruptions in legal proceedings accounted for 34% of the delays in establishing permanency plans (longer than 12 months) for children in child protection. Legal proceedings were most often delayed as a result of allowing more time for parent mental health assessments and court preparation (Selwyn et al., 2006). In Turpie’s (2005) research, the administrative burden associated with scheduling adoption hearings was also given as a reason by adoption panel members for delayed adoption hearings and subsequent placements. Australian adoption data sourced from case files related to 65 children under 12 years old (Tregeagle et al., 2014) indicated that parents contesting adoption orders contributed to longer times to adoption.

1. Discussion
	1. Summary of review findings

### The effects of timely decision making on child outcomes

The literature search did not find any in-scope research that addressed whether or not ‘timely’ permanency decisions lead to improved child outcomes in terms of health, wellbeing, educational attainment or contact with the youth justice system.

Outside of the USA, mandated or recommended time frames for permanency decision making appear to be relatively recent, and this could, in part, explain the current lack of research evidence about the effects of the timing of permanency decisions (or permanent placements) on child outcomes. However, in the USA, there has been national legislation mandating permanency time frames since 1997. Although this potentially would have provided researchers with an opportunity to collect data about the effect of ‘timely’ (or otherwise) permanency decisions on child outcomes, this evidence review found no published research that sought to do this.

The absence of evidence about the effect of timely permanency decisions on child outcomes is not evidence of a lack of relationship; rather it simply means that little empirical research has been undertaken on this topic. Thus, there is scope for future research in this area. However, it should be noted that many variables can influence care pathways, and that such variables are complex and often intertwined and can occur at different stages of a child’s life (Berridge, 2007; Rutter, 2000; Jones et al., 2011). As such, it can be difficult to establish causal links between child outcomes and individual factors such as the timing or speed of decision making.

### Barriers and facilitators for timely permanency decisions

The literature search did locate some empirical research on the range of variables that are associated with the timing and quality of permanency decision making (and sometimes of permanent placement). This literature was largely based on American or British studies, most of which had relatively small samples and relied on the analysis of case files or qualitative interviews with key stakeholders. Much of this research focused on adoption or family reunification and there was relatively little research on long-term kinship or foster care orders or other non-adoptive permanent orders. None of the reviewed studies was able to establish a causal relationship between any individual factor and the timing of decision making. Nor did any of the literature definitively indicate that any specific factor, or set of factors, was more influential than another.

What the literature did generally indicate is that a range of contextual factors can influence how long it takes to make a decision about permanency and/or how long it takes to achieve a permanent placement (including reunification). These factors included legislative or policy frameworks, the characteristics of the child in care and the capacity of the service system to enable faster decision making.

Several countries, including Australia, the UK and USA have implemented policy and legislative frameworks to help address delays in permanency planning or case ‘drift’. However, the reviewed literature indicated that the effects of such mechanisms varied considerably. Even when time frames were established to speed up permanency decisions, children could still spend long periods (often over several years) in state care before a final permanent arrangement was made. Similarly, the findings from research about expedited permanency projects (including the one Australian example) showed mixed outcomes. Although some permanency projects demonstrated some success in facilitating faster moves to permanency (usually adoption), such results were not universal.

It was unclear from the research why some legislative or policy efforts to expedite permanency decisions or placements should work better than others but it did appear that child and service factors could be a challenge for achieving mandated or recommended time frames. Child characteristics and experiences appeared to be a particularly important factor in the timing of permanency decisions. There was some evidence to suggest that young children achieve both adoptive placements and reunification more quickly than older children and that children’s chances of achieving a permanent placement decrease every year after the age of one. A smaller number of studies also found an association between gender and ethnicity in the timing of permanency outcomes. In these studies, boys and African-American or Afro-Caribbean children were slower to achieve permanent placements than were other children (Kemp & Bodonyi, 2000; Potter & Klein-Rothschild, 2002; Selwyn et al., 2006). Time in care – which itself could be associated with other child characteristics – and a child’s behavioural or emotional difficulties could also be associated with delays in referrals to adoption and then to a permanent placement, in part due to the difficulties in finding suitable carers (Cushing & Greenblatt, 2009; McDonald et al., 2000).

System- and practice-level factors were also reported as delaying permanency decisions and placements. Attempts at adoption planning or placement could be delayed by parents contesting adoption orders, courts allowing more time for parents to prepare themselves for court or to attend court, and by difficulties scheduling court hearings. In turn, attempts at reunification could be delayed by insufficient supports for families seeking reunification and long waiting times for parent support services (Commission for Children and Young People, 2017; Cushing & Greenblatt, 2009; Martin et al., 2002). Staff shortages, high workloads, and competing priorities were also cited as contributing to stalled or delayed permanency planning. In contrast, at least one study indicated that active and consistent caseworker support could lead parents to better engage with the reunification process and act in accordance with their reunification plan (Yampolskaya et al., 2017).

The relevance of these findings to the Australian context is potentially limited by the relative lack of Australian research and the subsequently high proportion of research undertaken in different policy and legislative contexts. The general focus on adoption, and lack of research on permanency planning for long-term foster and kinship care, is also a potential limitation. However, many of the key features identified as potentially influencing the timing of permanency decisions were not necessarily country-specific. In the limited number of Australian studies on this topic, child characteristics (and needs) and service-level factors emerged as potential influences on the timing of decision making just as they did in the USA and UK studies.

* 1. Discussion and implications

The review of the research literature suggested that the timing of permanency decisions and permanency outcomes is often influenced by a range of contextual factors such as the child’s personal characteristics, the degree of system capacity or resourcing to support permanency planning, and the level of support for families of birth seeking reunification. The limited size and scope of most of the reviewed studies meant that it was not possible to establish if any one of these factors was any more influential, or could mitigate the effects of, any of the others. However, the overall trend in the research literature suggested that contextual factors, as a whole, could strongly influence permanency processes and outcomes. As such, recommended or mandated time frames for permanency decisions were not always enough to expedite permanency decisions or placements, particularly in the absence of additional resourcing or support.

Although it was not entirely within the scope of this scoping review, the reviewers did also note that there is some debate in the literature concerning the usefulness of focusing on the *timing* or *speed* at which permanency decisions are made. Although this review found no recent evidence to suggest that making decisions within specified time frames leads to either better or worse outcomes for children, Kemp and Bodonyi (2000) suggest that faster decision making may not always consider the negative effects of quickly placing children in permanent care arrangements. They referred to data collected in the 1990s that showed that children who return home too quickly (<12 months) after entering state care were potentially at higher risk of re-entry (see Barth & Berry, 1994 and Courtney, 1994; also see The Care Inquiry, 2013).[[3]](#footnote-3)

The uncertainty over the effects of making permanency decisions within specified time frames appears to be why some researchers argue that better child outcomes would be achieved by focusing on the *quality* of the decisions that are made. That is, the right permanency decision at the right time for the child according to their individual circumstances (Boddy, 2013; Commission for Children and Young People, 2017; Selwyn et al., 2006; Tilbury & Osmond, 2006):

Clearly there will be occasions when it is important to allow more time for exploration of a child’s situation or for the making of greater efforts to reunify the family. The child’s best interests should be at the heart of all plans and subsequent action (Selwyn et al., 2006, p. 575).

The extent to which quality and/or best-interest decision making influences child outcomes, or what constitutes ‘good’ decision making, or how it can be achieved at scale, was beyond the scope of this review. However, further research may provide additional insight into the circumstances that lead to positive permanency trajectories and/or to better outcomes for children who have entered the child protection system and/or state care.

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Appendix A: Reviewed literature

| Authors and year | Title | Country | Method/Design | Population of interest | Sampling methodology | Number of participants/case files | Population of interest – age & gender |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Cushing, G., & Greenblatt, S. (2009) | Vulnerability to foster care drift after the termination of parental rights | USA | Case file review | Children with a permanency goal of 'adoption' and with terminated parental rights | Proportionate stratified random sampling  | 640 case reviews145 in-depth reviews | Male (*n* = 360)Female (*n* = 280)Ages: 4–18 years |
| Kemp, S., &Bodonyi, J. (2000) | Infants who stay in foster care: Child characteristics and permanency outcomes of legally free children first placed as infants | USA | * Case file review
* Administrative data review
* Qualitative interviews with key stakeholders
 | Infants in OOHC in Washington state identified as legally free as of 15 June 1995 | Not described | 458 case files | <1 year |
| Kemp, S., &Bodonyi, J. (2002) | Beyond termination: Length of stay and predictors of permanency for legally free children | USA | * Case file review
* Qualitative interviews with key stakeholders
 | Children in OOHC in Washington state identified as legally free as of 15 June 1995 | Not described | 1,370 case files | Male (*n* = 705)Female (*n* = 665)Ages: 0–18 |
| Martin, M.,Barbee, A.,Antle, B., &.Sar, B. (2002) | Expedited permanency planning: Evaluation of the Kentucky Adoptions Opportunities Project | USA | * Case file review
* Qualitative interviews with key stakeholders
* Administrative data analysis
* Court observation
 | High-risk children in OOHC eligible for expedited planning project in urban and rural Kentucky  | All children referred to the project in 2-year period (one rural and one urban site in Kentucky, USA) | 114 children (84 urban, 30 rural). Unknown number of stakeholder interviews  | Incomplete dataUrban:Average age 2.25; 53.6% M, 46.4% FRural: Average age 5.67; 43.3% M, 46.7% F  |
| McDonald, T.,Berry, M.,Patterson, E., &Scott, D. (2000) | Adoption trends in Kansas: Managing outcomes or managing care? | USA | Longitudinal case file review  | Children free for adoption in Kansas  | Phase 1:All cases registered 1 Sept. 1994 – 31 Aug. 1995 Phase 2: All cases registered 1 Sept. 1 1995 – 1 Oct. 1996) Phase 3: All cases 1 Oct. 1996 – 1 Oct. 1998  | Phase 1 – 475Phase 2 – 453Phase 3 – 1,610 | Not described  |
| Monck, E.,Reynolds, J., &Wigfall, V. (2004) | Using concurrent planning to establish permanency for looked after young children | UK (England) | * Comparative case file analysis
* Qualitative interviews
 | Children in care referred to concurrent planning teams | Purposive (no information about how children from ‘traditional care’ were selected) | 24 children in 3 concurrent planning programs, 44 children in traditional care | Children < 8 years |
| Potter, C., & Klein-Rothschild, S. (2002) | Getting home on time: Predicting timely permanence for young children | USA | * Comparative case file analysis
* Qualitative interviews
 | Children in state care in a county with the Expedited Permanency Planning Project between July 1997 and June 1998 | Complete sample of 'unsuccessful' children and random sampling of 'successful' children – no sampling information given on qualitative data, professionals from 4 counties | Case files: 125 Qualitative interviews: 22 professionals | Children < 7 years  |
| Selwyn, J., Frazer, L., & Quinton, D. (2006) | Paved with good intentions: The pathway to adoption and the costs of delay | UK | * Case file analysis
* Qualitative interviews
 | Looked after children referred for adoption in single local authority | All children referred to an adoption panel between 1991 and 1995 | Case files:130Qualitative interviews: 64 adoptive carers; 15 long-term foster carers; social workers | Male (*n* = 73) Female (*n* = 57)Age range: 3–11 years |
| Tilbury, C., & Osmond, J. (2006) | Permanency planning in foster care: A research review and guidelines for practitioners | Australia | Literature review | NA | Review of research published in both journals and books between 1998 and 2005  | NA | NA |
| Tregeagle, S.,Moggach, L.,Cox, E., &Voigt, L. (2014) | A pathway from long-term care to adoption: Findings from an Australian permanency programme | Australia | Case file analysis | Children in NSW referred to 2 Barnardos’ programs for either temporary or long-term placements | All children in the Find a Family (FAF) program adopted in 2002–2010; all children in Temporary Family Care (TFC) 2002–2010 | FAF case files (*n* = 65)TFC case files (*n* = 75) | Children 0-12 at time of entry into care |
| Turpie, J.I. (2005) | The participation of looked after children in permanency planning | UK (Scotland) | * Legislation and policy review
* Case file analysis
* Qualitative interviews with children and key professionals
 | Looked after children on permanency orders and key decision makers from one local authority | Children –Random selection within 3 criteriaAll adoption panel membersDecision makers identified by children | Case file review (*n* = 25) Qualitive interviews: Adoption panel (*n* = 8) Children (*n* = 11) key Informants/experts (*n* = 9) | Children aged 8–12 |
| Yampolskaya, S.,Armstrong, M.,Strozier, A., &Swanke, J. (2017) | Can the actions of child welfare case managers predict case outcomes? | USA | Longitudinal case file analysis | Children in state care involved in reunification or TPR processes in FY 2009/10 | Random selection  | 1,774 case files | 51% Male, 49% FemaleAges: 0–17 years old |
| The Care Inquiry (2013) | Making not breaking: Building relationships for our most vulnerable children | UK (England) | Public Inquiry* Evidence review
* Stakeholder and expert consultations
 |  NA |  Not stated | * Three enquiry sessions (200 participants);
* Consultations with young people (4 focus groups, interviews, online survey) Participant numbers not stated
 |   |
| Boddy, J. (2013) | Understanding permanence for looked after children:A review of research for the Care Inquiry | UK (England) | Literature review |   |   |   |   |
| Commission for Children and Young people (2017) | Safe and Wanted Inquiry into the implementation of the *Children, Youth and Families Amendment (Permanent Care and Other Matters) Act 2014*  | Australia | Public Inquiry: * Case file analysis
* Evidence review
* Stakeholder and expert consultations
 |  | Not described  | * 53 written submissions
* 193 consultations (children, families, key stakeholders)
* 522 case file reviews (126 Aboriginal)
 |  |

1. Concurrency planning is a model that requires child protection teams to work concurrently on two care plans; a plan for reunification and, in the event that reunification is deemed inappropriate, a plan for adoption. [↑](#footnote-ref-1)
2. The relative times to adoption, and what constituted a ‘slower’ time, were not defined in this study. [↑](#footnote-ref-2)
3. This research was published before 2000 and was thus outside the scope of this evidence review. [↑](#footnote-ref-3)