

Trial Evaluation Protocol
Evaluation of Parent-to-Parent Letters to increase engagement with
Family Drug and Alcohol Courts (FDAC)

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Alcohol Courts (FDAC)**

Intervention Developer	Behavioural Insights Team
Delivery Organisations	Family Drug and Alcohol Court sites
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Type of Trial	Randomised controlled trial and implementation evaluation
Age or Status of Participants	Parents starting Family Drug and Alcohol Court programme
Number of Participating Local Authorities	Approx. 10
Number of Children and Families	Approx. 350 family cases
Primary Outcome(s)	(1) Attendance score per parent calculated as the proportion of all scheduled meetings that the parent attends (2) Engagement score per parent calculated as the average of the engagement scores recorded by case workers
Secondary Outcome(s)	(1) FDAC outcome on final order on child arrangements (2) FDAC outcome on level of parental substance misuse
Contextual Factors	FDAC usual processes; factors affecting parental engagement

Table of contents

- [Background and Problem Statement – p3](#)
- [Intervention and Theory of Change – p3](#)
- [Impact Evaluation – p6](#)
 - [Research questions – p6](#)
 - [Design – p6](#)
 - [Randomisation - p8](#)
 - [Participants – p8](#)
 - [Sample size/MDES calculations – p8](#)
 - [Outcome measures - p9](#)
 - [Analysis plan - p12](#)
- [Cost evaluation - p17](#)
- [Ethics & Participation - p18](#)
- [Registration - p18](#)
- [Data protection – p19](#)
- [Personnel – p19](#)
- [Conflicts of interest – p20](#)
- [Timeline - p20](#)
- [References – p21](#)
- [Appendices – p22](#)
 - [Appendix 1 \(Letter 1\) – p22](#)
 - [Appendix 2 \(Letter 2\) – p23](#)
 - [Appendix 3 \(Letter 3\) – p24](#)
 - [Appendix 4 \(Process for developing the letters\) – p25](#)

Background and Problem Statement

Parental substance misuse is a major risk factor for child maltreatment and a factor in care applications. Parents with substance misuse problems are often involved in repeat care proceedings in relation to subsequent children. Family Drug and Alcohol Courts (FDAC) services were established in 2008 to pilot an approach to provide holistic and intensive support to parents to help them to address substance misuse, with a view to improving children's outcomes. FDACs comprise of a multi-disciplinary team of substance misuse specialists, social workers, mental health professionals and domestic violence workers who carry out assessments and develop intervention plans with families who come before the court in care proceedings. Parents then begin a "trial for change", where they meet with a judge fortnightly who monitors progress and provides direct support. The aim of the FDAC process is to achieve higher rates of cessation of parental substance misuse; more frequent, safer and more sustainable family reunification, and swifter placement with alternative carers if reunification is not possible. Evaluation has found that FDAC results in sustained cessation of drug and alcohol misuse in both the short term and long term, and that families supported by FDAC were more likely to be reunified and had reduced risk over ordinary services (Harwin 2016).

Parental engagement in the FDAC process is likely to be a key factor in the success of the process. A rapid realist review by What Works for Children's Social Care (2019) developed a programme theory comprising of two key stages instrumental to FDAC reducing numbers of children in social care: 1) "creating an internal change that increases a parent's willingness to enrol and engage in treatment", and 2) "creating behaviour change through treatment". They noted that "progressing through these two stages can make parents more likely to successfully complete their treatment programmes and be better able to safely care for their child", making parental engagement a fundamental pillar of FDAC services. Despite its importance, engagement has not been measured in previous evaluations of FDAC (Harwin et al., 2014; Harwin et al., 2016) due to limited data on attendance, making this a key area to explore. This evaluation tests a behavioural intervention aimed at increasing parental engagement, both the quantity of engagement (attendance at meetings and hearings) and the quality of engagement (the meaningful participation of parents in the FDAC process, as assessed by FDAC staff).

Intervention and Theory of Change

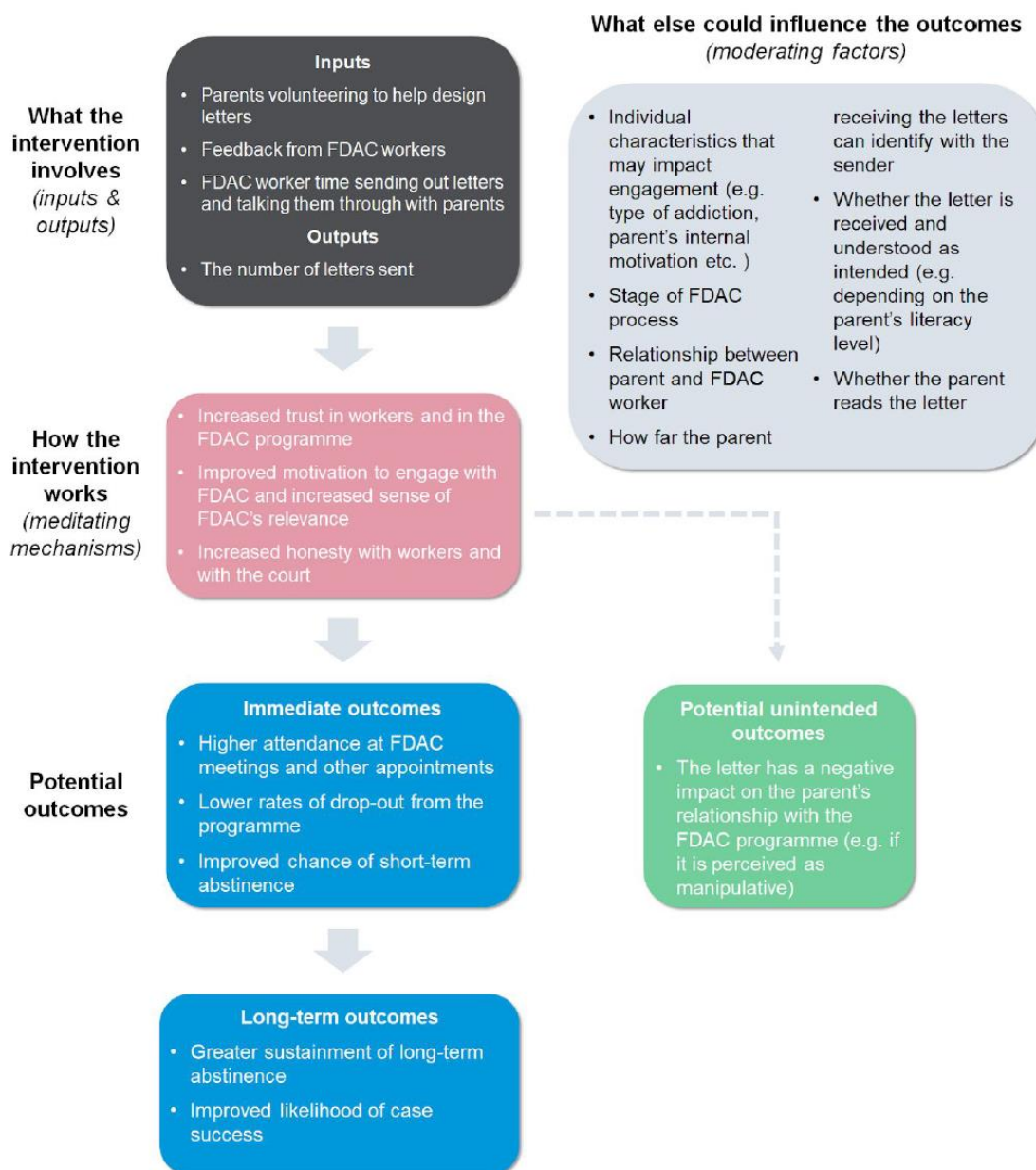
In 2019, the Department for Education announced a £15m investment to help keep families safely together. This money was spent on expanding promising approaches, including the Family Drug and Alcohol Court (FDAC) programme. As part of this, What Works for Children's Social Care (WWCSC) commissioned the Behavioural Insights Team (BIT) to co-create, in collaboration with FDAC teams, a set of light touch interventions to increase families' engagement with FDAC. An assessment of qualitative research and a literature review by the Behavioural Insights Teams identified 5 possible interventions, including letters from other FDAC parents to foster solidarity, encouraging positive behaviours with gifts, and written tools to assist with goal setting. The Behavioural Insights Team consulted with FDAC professionals, judges and other experts to decide which intervention merited testing, and a parent-to-parent letters intervention was chosen. These will be given to parents starting the FDAC programme by their FDAC workers at three points in the process, to motivate and engage parents.

Following the consultation, the Behavioural Insights Team developed a series of three letters for parents on the FDAC programme ([appendices 1, 2 & 3](#)). The letters were co-developed with three parents who have previously completed FDAC themselves. The Behavioural

Insights Team conducted interviews with these parents to discuss their story, their experience of FDAC and the messages they would like to communicate to parents currently on the programme. Based on the interviews, the Behavioural Insights Teams drafted letters to reflect the parents' experiences and the messages they wanted to communicate. They attempted to use specific words and phrases that the parents mentioned during the interviews, and to include direct quotes where possible. The drafts were sent to these parents to check and edit. The draft letters were then shared with 11 FDAC sites, and FDAC workers and current FDAC parents were asked to provide feedback. The feedback received was broadly positive, but included a number of suggestions for edits and improvements, which the Behavioural Insights Team implemented where possible. Please see [appendix 4](#) for details of the process for developing the letters.

A logic model was developed by the BIT (2019) to inform the design of the parent letters and is shown at Figure 1.

Figure 1: Logic model for the parent letters



The letters draw upon several behavioural science principles supported by literature to enable behaviour change.

- 1) The 'messenger effect': people are more likely to respond to messages communicated by someone similar to them (Durantini et al. 2006). These letters are communicated by parents who have already been through the FDAC programme, making them more relatable.
- 2) The 'fresh start effect': people are more motivated to change their behaviours at milestones in their lives (Dai, Milkman, & Riis, 2014). The letters will be sent to coincide with milestones within the FDAC programme (e.g. Intervention Planning Meetings) in order to have the biggest impact in encouraging reflection and change.
- 3) Growth mindset: Mindset theory suggests that there are two attitudes to ability and success. Someone with a 'fixed mindset' believes that they were born with a set of skills that are unchangeable, whereas someone with a 'growth mindset' believes their abilities improve through hard work (Dweck, 2012). The letters are written to encourage a growth mindset, emphasising that setbacks are an opportunity to learn and develop so the parent can improve in future.
- 4) Personalisation: People are more likely to pay attention to information if it is personalised to us (Haynes et al., 2012). These letters are addressed to parents individually.

The three letters are each one page long and are written in the voice of a parent. The key themes are; Letter 1: FDAC won't be easy but it can change people's lives; be honest with yourself and your workers. Letter 2: There will be setbacks; how you deal with them is what matters. Letter 3: Acknowledge the progress that's been made since the beginning of FDAC; keep going.

The letters will be given to families at suggested timepoints: letter 1 at the beginning of the programme to coincide with the first Intervention Planning meeting (weeks 1-2,) letter 2 halfway through the programme before the second Intervention Planning meeting (weeks 8-9), and letter 3 towards the end of the programme to coincide with a fortnightly review before a final decision is made about proceeding to a contested hearing (weeks 14-16).

The letters describe the author's experiences of FDAC and explain how they benefited from it in order to encourage new families. FDAC workers can choose how to deliver the letters based on parental preference and their personal judgment about how they would be best received. Options include reviewing the letter together during key work sessions for discussion, leaving the parent to read the letter by themselves, or posting the letter. A 'how to' guide will be given to FDAC workers to support them in delivering the intervention and tailoring it to individual parents.

We anticipate that the letters could work to create short-term changes in parents' behaviour. Specifically, if the letters work as intended, we theorise that a parent would be more likely to attend their appointments, less likely to drop out of the FDAC programme, and more likely to engage positively in the FDAC. The long-term outcomes relate to the parent's chances of successfully 'completing' FDAC. This includes their prospects of case success (i.e. being reunited with their child) and sustaining abstinence (one of the factors used to determine case success).

The letters and a brief note from BIT describing the process for their development are annexed to this protocol.

Impact Evaluation

Research questions

The RCT will directly address the question as to whether receiving letters about the experiences of other parents going through the FDAC process impacts on parents' attendance at FDAC meetings and on their level of engagement with the FDAC process, with the key research questions being:

Primary

- **RQ1:** What is the impact of the intervention on parents' overall rate of attendance at scheduled meetings during the FDAC process?
- **RQ2:** What is the impact of the intervention on parents' engagement with the process, as perceived by their FDAC worker?

Secondary

- **RQ3:** What is the impact of the intervention on final orders in relation to child arrangements?
- **RQ4:** What is the impact of the intervention on parents' levels of alcohol or drug misuse?

NatCen Social Research are undertaking an evaluation of the FDAC approach itself, involving all FDAC sites and a quasi-experimental design. This is distinct from our evaluation which focuses specifically on the use of parent-to-parent letters. We have had several discussions with NatCen to ensure that the evaluations are aligned (see discussion of outcome measures in the below) and do not duplicate. In the RCT sites, the same families will be involved in both evaluations, and both evaluations will make use of the data recorded in the CJI database. Being part of both evaluations involves no additional burden for the families. A streamlined approach to the written participant information means that families are informed about both studies at the same time. Four FDAC sites will be selected for the implementation evaluation (see below), which involves 20 qualitative interviews with parents. We will aim to avoid any family being approached to take part in an interview as part of both this and the NatCen evaluation.

Design

Trial type and number of arms	Cluster RCT
Unit of randomisation	Family: all parents within a single family to be allocated to a single arm of the trial
Stratification variables (if applicable)	FDAC area
Primary outcomes	variables
	1. Percentage of scheduled meetings/sessions a parent attends during the FDAC process
	2. Parents' level of engagement in the FDAC process

	measures (instrument, scale)	<ol style="list-style-type: none"> 1. Register of all scheduled meetings/sessions (court hearings, with FDAC team and with external providers) recording percentage attendance at two-weekly intervals to tie in with non-lawyer review reports. 2. FDAC worker's perception of parent's engagement using a four-point scale (very well, fairly well, not very well or not at all engaged). Engagement to date measured at each non-lawyer review point, with outcome measure a cumulative score of their engagement divided by the number of non-lawyer review reports.
Secondary outcome(s)	variable(s)	<ol style="list-style-type: none"> 1. Reunification of child with parent(s) 2. Level of parent drug and alcohol misuse reduction
	measure(s) (instrument, scale)	<ol style="list-style-type: none"> 1. Using the Centre for Justice Innovation database, order(s) made at the final hearing and who the child is living with. Reunification is defined as the legal order being for a child continuing to live with a parent or to be returned to live with that parent. Reunification is not achieved where the placement of a child at the end of care proceedings is different to the start of proceedings. This includes placement with another parent or family member at the end of care proceedings. 2. Using the Centre for Justice Innovation database, severity of drug or alcohol misuse: none/low vs medium/high (or alternatively none vs low/medium/high) to create a binary variable. This will mirror that used in the main evaluation of FDAC being conducted by NatCen which is to be confirmed.

Randomisation

Local FDAC teams are to be provided with a spreadsheet where new families will be registered. This spreadsheet has an embedded randomisation tool, with the randomisation algorithm in a separate hidden and protected sheet. Blocked randomisation will be used to ensure there are no long runs of allocation to one arm of the trial. This is to ensure overall balance between the arms of the trial overall and over time, but also to ensure that the local teams do not lose faith in the randomisation tool. The spreadsheet includes features that would make it difficult for staff to override the allocation, although we believe the risk of staff wanting to do this to be very low. Firstly, if a family is entered they cannot be deleted and re-entered. They must be entered again as a separate record and a comment added to the first record to

explain why the register generated for that record was not used. This avoids families being deleted and re-entered until a preferred allocation to letter or control is achieved. Secondly, the randomisation algorithm is run per site for all possible records before sending the spreadsheet out to the local team, and a record will be kept. Our sequence of letter/control allocations can then be compared to the sequence recorded by the local team to check that they are in line.

The randomisation spreadsheet will automatically create a second spreadsheet per family that acts as a register of attendance per family. This includes a field stating whether the family has been allocated to the letter arm of the trial or the control arm. The register has a sheet per parent. Case workers will complete the register per parent every two weeks, noting the number of meetings/sessions the parents are scheduled to attend, and how many they attended. At each point the case worker will complete a question on their perception of the level of engagement of the parent with the FDAC process, the reference period being since the start of the process for the first measure, and since the last non-lawyer review point subsequently.

Participants

All local FDAC sites, of which there are 13 in the UK, are eligible to join the trial. They will be recruited by the WWSSC team in Autumn/Winter 2020, with the expectation that around 10 will agree.

Within participating FDAC sites all families who start the FDAC process between 1st January 2021 and end January 2022 (precise end of recruitment to be agreed in final protocol) will enter the trial. The expectation is that around 350 families will enter the trial, with 175 being allocated to each arm. The sample size of parents will be larger than this but given the likely high correlation between the attendance of parents within the same family the trial sample size is most appropriately thought of as a RCT of 350 families rather than a trial of 400 or more parents.

Sample size / MDES calculations

		MDES (Proportion of a Standard Deviation)
MDES		0.3 sds
Baseline/Endline correlations	Family	0
Intracluster correlations (ICCs)	Family	Close to 1
Alpha		0.05
Power		0.8
One-sided or two-sided?		2
Level of intervention clustering		Family
Average cluster size		1.5
Sample Size (families)	Intervention	175
	Control	175
	Total	350

The sample size that can be achieved depends upon the number of FDAC sites willing to participate, but the assumption is that around 10 sites will join the trial. The average number

of families going through FDAC per site is around 35 per year (based on information provided by the Centre for Justice Innovations, which supports FDACs, about current case levels), so the expectation is that 350 families will enter the trial. In each site one half of families will be randomly allocated to each arm of the trial, giving 175 per arm.

Outcomes will be collected for individual parents, but we anticipate the correlation between parental scores to be high for our primary outcomes, so the ICC within families will be close to one. In our main calculations we have assumed it equals one. There will be no baseline equivalents of the primary outcomes collected so the MDES calculations do not take into account any variance explained by baseline scores. Under these assumptions, the MDES is calculated simply as

$$MDES = 2.8 \text{ sd} \sqrt{\frac{2}{175}} = 0.3\text{sd}.$$

That is, under the assumption of 175 families per arm, we will be able to detect impacts of 0.3 standard deviations or more.

There are no previous trials that are similar enough in terms of the intervention or the target group to know how plausible an impact of 0.3sd is. There is anecdotal evidence that attendance at FDAC meetings is already high, so the first of our primary outcomes may be subject to a ceiling effect. Our second primary outcome, engagement, should be more sensitive to an intervention, as early feedback from FDAC sites suggest that there is variation in how far parents fully engage with the process, even among those whose attendance at meetings is high.

Outcome measures

Rationale for two primary outcomes

The trial has two primary outcomes: one related to attendance at scheduled meetings/hearings and one related to perceived engagement with the process. The rationale for having two primary outcomes is as follows:

- The most objective measure of whether the intervention affects how parents engage with the process is the proportion of scheduled meetings they attend. However, there are risks in using this as the sole primary outcome, namely:
 - Levels of attendance at court hearings and at meetings with members of the FDAC team are already high (based on our discussions with sites – consistent attendance figures are not available). It is not clear whether there is sufficient scope to improve these to detect a statistically significant impact of the intervention.
 - Whilst being an objective measure, attendance at hearings/meetings does not necessarily equate to engagement with the process.
- A second primary outcome measuring FDAC workers' perception of a parent's level of engagement provides a key additional measure of the effect of the intervention beyond attendance. The measure has more potential to show variance across parents than attendance. However, as it is subjective in nature, it is best used as a second primary outcome rather than as the sole primary outcome (in preference to attendance).

In the primary analysis the level of significance will be calculated separately for the two primary outcomes assuming independent tests, but a discussion will be included as to whether the conclusion would change if an adjustment was made for multiple testing.

Data sources

A bespoke register has been designed by the evaluators for the collection of outcomes data on attendance and engagement. The register will be kept by the parent's FDAC worker. A unique identifier will allow for the linkage of each register to information on the case collected in the CJI database and to the register of any second part involved.

The following variables are collected in the register:

At each non-lawyer review point:

- The date of the non-lawyer review report
- How many court hearings and meetings/sessions with the FDAC team were scheduled in the period since the previous review (including both face-to-face and online sessions)
 - How many of the scheduled meetings/sessions the parent attended
- How many meetings/sessions with external providers were scheduled in that period (including both face-to-face and online sessions)
 - How many of the scheduled meetings/sessions the parent attended
- The FDAC worker's perception of how well the parent has engaged in the FDAC process since the last non-lawyer review, using a four point scale (very well engaged, fairly well engaged, not very well engaged, not engaged well at all)

For parents in the intervention arm, the register is also used to record when each letter was received.

For court hearings and meetings/sessions within the FDAC team, the FDAC worker will know whether the parent attended. However, for external meetings/sessions, the FDAC worker may rely on the parent telling them if they attended the meeting. Although there is a risk in relying on self-report for external meetings/sessions, the risk of bias is the same in both arms of the trial. It is important to include these data within the trial because on average attendance is lower at external meetings. There is therefore a greater likelihood of identifying a statistically significant impact on attendance if we include both internal and external meetings.

Because the FDAC worker is responsible for giving parents the intervention letter, they will necessarily know whether the parent is in the intervention or control arm. FDAC workers will be fully briefed on the importance of accurate recording of attendance and engagement (with the latter being particularly important given the subjective nature of the measure) in order to minimise the risks associated with this not being a blinded trial.

Data on reunification of the child and parent(s) in the final order and on parents' level of substance misuse at the end of the case is recorded by the FDAC worker in the CJI database.

Primary outcomes

1. Overall attendance score

This outcome takes account of all scheduled meetings/sessions during the FDAC process including hearings and meetings internal and external to FDAC. An attendance score will be generated for each parent calculated as a percentage of all scheduled meetings that the parent attends or, for external meetings, reports attending. Meetings for which there are missing data or a 'don't know' response on whether the parent attended/reported attending will be excluded from the calculation. Parents who have not completed the FDAC process by the end of the trial will be included in the analysis if they have been scheduled to attend at least two IPMs.

2. Overall engagement score

It would not be feasible for FDAC workers to provide detailed information about or assessments of the quality of engagement. Instead, we will ask FDAC to provide an overall engagement score, at fortnightly intervals. We will discuss with FDAC staff the key features that they regard as constituting effective engagement and provide guidance about what FDAC workers should base their assessment on, reflecting the features most consistently identified. An overall engagement score per parent will be calculated as the average of the engagement scores recorded by FDAC workers at each non-lawyer review point. At each point, a score of 4 will be given to a response of 'very well engaged', 3 for 'fairly well engaged', 2 for 'not very well engaged' and 1 for 'not engaged well at all'.

The engagement score is a composite measure across a number of considerations. The guidance will ask staff to take into account:

- Active listening, taking things in, being focussed
- Contributing to sessions, communicating and being open
- Sharing reflections during meetings/sessions
- Putting what has been discussed into practice - making changes to day-to-day life or lifestyle
- Being proactive about taking forward what had been learned
- Acceptance of the issues that led to proceedings/motivation to change
- Appearing to believe in the process

We will provide guidance on the score to sites. The score is an overarching assessment of engagement across a range of sessions, and there are likely to be some differences between staff members in how they cognitively weight the different considerations and apply the measure. The simplicity of a four-point scale is therefore preferable to a scale with more points, even though it allows less room for movement. A less refined measure will have higher validity and so be more robust than a more refined measure with lower validity which has the risk of providing a false sense of the level of accuracy of the measure. The outcome measures will be aggregated across the scores given at each time point. In addition, the four-point scale will be easier for sites to use and should provide greater consistency across sites.

The scores at each non-lawyer review point will be summed and divided by the number of non-lawyer reviews. For any non-lawyer review points with missing data on engagement, these will be excluded from the calculation (i.e. the base will be all non-lawyer review points with an engagement measure completed). Parents who have not completed the FDAC process by the end of the trial will be included in the analysis if they have attended at least two IPMs.

Secondary outcomes

1. Reunification

We intend to mirror the outcome variable which will be used in the main evaluation of FDAC being conducted by NatCen, using data from the CJI database. Reunification will be defined as the legal order given for the child to either return to live with the parent, or to continue to live with the parent. Reunification is not achieved where the placement of a child at the end of care proceedings is different to the start of proceedings. This includes placement with another parent or family member at the end of care proceedings.

2. Parental substance misuse

Again, we intend to mirror the outcome variable which will be used in the main evaluation of FDAC being conducted by NatCen using data from the CJI database. There is still to be decided but will be a binary outcome using a variable on parents' severity of drug or alcohol misuse: none/low vs medium/high (or alternatively none vs low/medium/high).

Analysis plan

Primary Analysis:

The effect sizes for the trial will be estimated using a two-level random effects model that accounts for the clustering of parents within families and includes a fixed effect term for the FDAC site. The analysis will be on an intention to treat basis. Families who have not completed the FDAC process but for whom at least four non-lawyer review reports have been completed will be included in the main analysis.

There will not be any baseline versions of the primary outcomes so these cannot be included as covariates in the model. However, the outcomes will be linked to the CJI data being collected on families and this data includes a wide range of baseline information including demographics, case history, and baseline data on three risk factors (parental substance misuse, parental mental health, domestic abuse risk). No research has to date been undertaken to establish which of these baseline variables are predictive of attendance and engagement, so our analysis will start by fitting two regression models to the control group data (one for each of the primary outcomes) to establish the nature and strength of the correlations.

The regressions will be linear, with the independent variables being those we anticipate may be predictive of attendance and engagement:

- gender;
- age-group (16-24, 25-34, 35-44, 45-54, 55+, but with some combining of any very small categories);
- severity of alcohol misuse (coded as none, low, medium, high, unknown, with any very small categories combined with larger, similar ones);
- severity of drug misuse (coded as none, low, medium, high, unknown, with any very small categories combined with larger, similar ones);
- Baseline depression, measured via the PHQ-9 score (coded as a continuous variable);

The following variables are to be coded into a single categorical variable reflecting previous experience (the exact coding depending on the sample sizes per potential category)

- whether the parent has been a party in FDAC proceedings before; if not
- whether have had any previous children removed; if not
- whether have had previous contact with children’s services;
- none of the above.

Baseline variables that are predictive of our primary outcomes, based on a significance level of 0.05, will then be included as covariates in our effect size models. Assuming all of the tested variables are included in the final models, for each of the two primary outcomes, the model specification for parent *i* within family *f* will be:

The model specification for parent *i* within family *f* will be:

$$Y_{if} = \alpha + \beta_1 * T_f + c_{site} + \gamma_{1g} * gender_{gi} + \gamma_{2a} * age_{ai} + \gamma_{3l} * alc_{li} + \gamma_{4d} * drug_{di} + \gamma_5 * PHQ_i + \gamma_{6e} * exp_{ei} + \epsilon_{if}$$

where

- Y_{if} is the attendance or engagement outcome score for parent *i* in family *f*;
- β_1 is the coefficient of interest
- T_f is a binary, equal to 1 if the family is in the letters group and 0 if in the control group;
- c_{site} is the FDAC site fixed effect, (coded as 1 to C, with C being the total number of sites minus one, and site being the relevant dummy);
- $gender_i$ is a set of dummy gender variables (coded 1 to G, with G being the total number of gender response options minus one, and *g* being the relevant dummy)
- age_i is a set of dummy age-group variables (coded 1 to A, with A being the total number of adult gender response options minus one; and *a* being the relevant dummy);
- alc_i is a set of dummy alcohol misuse variables (coded 1 to L, with L being the number of alcohol misuse responses minus one, and *l* being the relevant dummy);
- $drug_i$ is a set of dummy drug misuse variables (coded 1 to D, with D being the total number of adult drug misuse response options minus one; with *d* being the relevant dummy);
- PHQ_i is the PHQ-9 score for parent *i*;
- exp_i is a set of dummy ‘previous experience’ variables (coded 1 to E, with E being the total number of adult drug misuse response options minus one, and *e* being the relevant dummy);
- ϵ_{if} is the residual for parent *i* clustered within family *f*.

Secondary Analysis:

The same model specifications will be used for the secondary outcomes.

Exploratory Analysis:

Exploratory analysis will be used to unpick and understand the impact findings on the primary outcomes of parental attendance and engagement. This will include assessing the impact of the intervention at different stages of the process. If there is a statistically significant impact overall, is this occurring across the length of the FDAC process, or does it happen at particular time points? Or with sessions internal or external to FDAC? Conversely, if there is no statistically significant impact of the intervention overall, might there be an impact at particular time points or with particular meeting types? The exploratory analysis will also look at any combined effect on the attendance and engagement of both parents, where both are involved in the process.

More specifically the exploratory analysis will include the following elements.

1. Attendance in early and later stages of the FDAC process

Analysis will unpick whether there is a differential impact of the letters (a) between the start of the process and before the second letter is given and (b) after the second letter is given to the end of the process. As with the primary attendance outcome measure, this analysis will take account of all scheduled meetings over the period. For each period, an attendance score will be generated for each parent calculated as a percentage of all scheduled meetings that the parent attends or, for external meetings, reports attending over the period.

2. Attendance at specific meeting types

Exploratory analysis will look for any differential impact of the intervention on attendance at (a) court hearings and with members of the FDAC team and (b) external meetings. As with the primary attendance outcome measure, this analysis will take account of all scheduled meetings of the particular type. For each meeting type, an attendance score will be generated for each parent calculated as a percentage of all scheduled meetings of that type that the parent attends.

3. Engagement score between receipt of letters

By looking at the impact of the intervention on parents' engagement between the dates when the letters are given, the exploratory analysis will unpick whether the intervention has a differential effect at different points in the FDAC process.

4. Overall attendance score for the family

Here, the exploratory analysis will explore whether the intervention has a combined effect of parents, taking account of the attendance of both parents in cases where both parents are involved in the FDAC process. As with the primary attendance outcome, all scheduled meetings during the FDAC process including hearings and meetings internal and external to FDAC. An attendance score will be generated for the family calculated as a percentage of all scheduled meetings that the parents attend.

5. Overall engagement score for the family

Similarly, the exploratory analysis will explore whether the intervention has a combined effect on parents' engagement in the process where both parents are involved in the FDAC process. The engagement scores for each parent will be summed and divided by the number of scores (i.e. where both parents attend all non-lawyer reviews, this will be the number of non-lawyer reviews x 2).

The exploratory analysis will also include some assessment of whether the intervention works better for some types of parents than others, in particular those with higher or lower levels of

substance misuse, those with and without experience of previous child proceedings, those with children of different ages, mothers and fathers. These estimates will be made by including interaction effects in the main analysis models.

It is plausible that caseworkers will not use all of the letters as intended for those in the intervention group. We will test whether outcomes for the intervention arm vary depending on the number of letters used. This will be based on a regression model, with number of letters as an independent variable together with the main model covariates. This analysis will necessarily be exploratory because the decisions as to whether the case worker uses the model may be driven by the outcomes (that is, the attendance or engagement of the parent may affect the decision of the caseworker on whether or not to use the letter).

Contextual Factors Analysis

The trial is relatively small, with just 350 families expected to be included, across around 10 FDAC sites. It may prove possible to establish whether there is variation in impacts across sites, and if so, the process evaluation may shed some light on the factors that drive that. But overall, we expect our ability to examine contextual factors to be very limited.

Implementation and process evaluation

Research Questions

The implementation and process evaluation will address the following research questions:

1. What is involved in using the letters in FDAC work?
2. Are the letters used as intended?
3. What is the mechanism by which the letters impact on engagement, or why do they not?
4. Is the use of the letters sustainable?

Fidelity and Dosage

Intervention fidelity and 'dosage' (letters received) will be assessed through the register. FDAC workers will use the register to log attendance at meetings and the number of letters that have been provided to parents, and this is the highest level of compliance that we can accurately record. The register will record whether the letter is given to the parent in person or sent through the post or email, and we can be more confident that parents will have engaged with the letter if it is given in person (as FDAC workers have the option of going through it with the parents) rather than post/email, we will not know if , and how far, they engage with the letters' content.

Interviews

We will explore how the letters are used through interviews with parents and FDAC workers, including any adaptations that are being made in practice. This element will complement the RCT providing insights on the processes involved in using the letters, their fit with the wider work of FDAC sites, and perceptions of impacts on parental engagement and how the letters may have contributed to these. It will use the CFIR framework¹ to review:

- The intervention: compatibility e.g. with FDAC service standards, observability of benefits
- Processes: what it takes to equip staff and deliver it, staff beliefs about value and fit
- Fit with the inner setting of FDAC sites and with staffing: organisational processes, how staff work with parents
- Fit with the outer context: families' needs and resources, the wider service system.

Data Collection Stages

The qualitative fieldwork will be undertaken in three waves. In Wave 1 we will undertake an interview with a lead FDAC worker at each participating site (expected to number around 10 sites). These interviews will take place in February-March 2021 and will assess whether the intended processes are being followed, identify any challenges and how they need to be addressed.

Wave 2 interviews will take place in October/November 2021. In four FDAC sites (selected for diversity in region, size and any key differences in approaches emerging from Wave 1) we will undertake interviews with:

- 10 FDAC staff: likely to include the lead FDAC worker, other case workers, team managers and administrator, to explore the processes involved in using the letters, wider work to secure parental engagement and whether and how these are affected by use of the letters, sustainability of use of the letters, and perceived impacts of the letters
- 10 staff from FDAC sites in a position to observe impacts on engagement, e.g. parent mentors, social workers, clinicians, judiciary, to explore perceived impacts
- 20 parents in the intervention group, to explore their experiences of the letters and any perceived impacts

In Wave 3 (May/June 2022) we will interview one lead FDAC worker from each site to explore the use and sustainability of the letters and perceived impacts on FDAC practice and on parental engagement.

We are proposing to interview only parents in the intervention group because the interviews will focus on the impact of the letters on engagement. We do not think it will be possible to assess differences in engagement between the control and intervention group through qualitative interviews. Instead we will focus on asking intervention group parents whether and how the letters influenced them.

¹ Damschroder L, Aron D, Keith E R, Kirsh S, Alexander J and Lowery J (2009) 'Fostering implementation of health services research findings into practice: a consolidated framework for advancing implementation science' *Implementation Science* 4:50

The interviews with FDAC workers will allow us to assess differences between use of the letters and 'business as usual' or control conditions, exploring how workers seek to engage, monitor and motivate the attendance of parents without the letters. These interviews will enable us to assess usual practice at baseline and at the end of the trial between both the intervention and control groups and enable comparison between the two groups.

Participant Identification

FDAC staff will be identified by a key team member, given an information sheet, and invited to participate in an interview. Staff from sites will be asked to identify parents who would be willing to participate in telephone interviews, and to seek permission to share contact details with the research team. They will be given an information sheet and a consent form detailing what their participation involves. Parent participants will be offered £20 compensation in vouchers for their time.

Cost evaluation

The evaluation will include a simple assessment of the costs to the sites were they to run the intervention themselves. The cost of using the letters is likely to be minimal, but that will be tested as part of the IPE. The IPE will also explore with the FDAC staff whether there are cost impacts of parental attendance or non-attendance at internal meetings. We will identify the key areas of cost impact, and if these can be quantified, either in monetary terms or staff time, we will estimate the overall cost implications of using the letters. Our expectation is that it will not be feasible to directly estimate the cost implications of attendance or non-attendance at external meetings. Time spent by staff directly associated with the evaluation rather than the letters will be estimated, but reported on separately to the main cost assessment.

To facilitate this we will ask a series of questions per site, through telephone interviews:

- How much staff time is involved in supporting the evaluation? Which members of staff does this involve? This includes running the randomisation tool, completing the register per parent, and collating the registers for return to the evaluation team;
- How much staff time is involved in sending the letters to parents and talking to them about the letters? Is this over and above the time that would ordinarily be spent with parents?
- Are there any direct costs associated with the letters, such as printing and postage?
- Does attendance, or non-attendance, of a parent at an internal meeting affect the amount of time spent by the FDAC team on a case; If so, how does this arise? Which team members are affected? Can the time savings/increases be estimated? Is there variation by meeting type?
- Would a systematic change in attendance or engagement have any large implications for the FDAC team. In particular, would the caseload of families be increased or decreased if engagement of families improved markedly?

Ethics & Participation

The Centre for Evidence and Implementation and Bryson Purdon Social Research will submit an ethics application to the What Works Children's Social Care research ethics committee in September 2020.

For the RCT, all families starting FDAC from the 4th January 2021 will be enrolled in the study. The legal basis for the use of the data falls within the category of Legitimate Interests for the purposes of GDPR (see below) which means that parental consent is not required. Rather, on entering FDAC, parents will be informed about the study and directed to a privacy notice which will provide more information about how the data will be used for evaluation purposes. The notice will include how their data will be stored and how their confidentiality will be maintained.

Needing to use Informed Consent as the legal basis for these data use would pose a number of risks to the trial:

- (a) it would introduce an element of self-selection into the trial (albeit in both arms), with those averse to receiving the letters (based on only a broad understanding of what they would be) excluded from the trial.
- (b) Informed consent would necessarily flag to the parents the purpose of the trial, and potentially affect their attendance and engagement as a result.
- (c) It would add an additional burden on FDAC staff who would need to administer the consent process at the start of the FDAC process. Given this is a delicate and difficult time for many parents, FDAC workers will not want to place this additional task to parents.

For the implementation and process evaluation interviews, FDAC staff will be identified by a key team member, given an information sheet, and invited to participate in an interview. Fully informed written consent will be obtained prior to interview. Staff from sites will be asked to identify parents who would be willing to participate in telephone interviews, and to seek permission to share contact details with the research team. They will be given an information sheet and a consent form detailing what their participation involves. Parent participants will be offered £20 compensation in vouchers for their time and consent will be obtained prior to interview.

If safeguarding concerns arise during the interviews about any immediate serious danger for a child or adult, these will be reported to the police urgently. Any non-immediate or non-serious concerns will be reported to the local FDAC team for follow up. If parents raise concerns about their treatment by FDAC staff during interviews, we will refer them to the FDAC complaints procedure.

Registration

The trial will be registered with the OSF, and the trial registry will be updated with outcomes at the end of the project.

Data protection

CEI is undertaking a full data protection impact assessment (DPIA) for the trial, covering all data collection. Any risks to data subjects will be identified, and any necessary controls will be put in place to mitigate against these risks. The arrangements set out will be approved by a senior member of staff not connected with the project.

Personal data will be processed in line with General Data Protection Regulations, Chapter 2, Article 6. The legal basis for processing Personally Identifiable Information is legitimate interests Article 6 (1)(f). The legal basis for processing special category data (namely health data) is Article 9(1)(j) archiving, research and statistics. The project meets the necessary associated conditions of Part 1 Schedule 1 of the Data Protection Act 2018. Data for the randomised controlled trial is being collected and processed on the basis of legitimate interests pursued by the controller or by a third party. Data will be pseudo-anonymised until the point of analysis: to allow for the data from the attendance register and CJI database to be linked, we will use unique IDs generated by the FDAC teams. At the point of analysis, these will be removed and replaced with non-identifiable IDs. CJI will provide only the data required for our analysis, for all parents at the participating FDAC sites. BPSR will be responsible for matching, based on unique IDs. CJI will be administering an information sheet to provide information about CJI's use of data, which will include sharing data with CEI (and with NatCen).

FDAC sites will be provided with an information sheet for this study specifically, to be shared with all parents, explaining that the study is ongoing and that some parents will receive letters and others will not. This information sheet will also provide a link to a data notice on CEI's website, providing more information about the type of data that will be processed, how it is provided to us, the legal basis for processing it, how data will be stored and managed, and participants' rights including how they can access their data.

Interview data will be collected only after consent is given by participants to the processing of their personal for a specific purpose. Quotes will be attributed at a group level e.g. to 'parents' or 'FDAC staff member' or 'other professional/staff'. Any details that could indirectly or directly identify an individual will be removed, and no reference will be included to named FDAC sites, roles, family circumstances or other context in a way that could identify participants. Data will be stored securely in Dropbox folders (Dropbox is ISO 27001 certified) which are accessible only to the research team, and held for no more than two years after publication of the final report.

Personnel

Delivery team

FDAC site managers (to be confirmed when sites on-boarded).

Responsible for delivering intervention and data collection (completion of register).

Evaluation team

- Jane Lewis – Director, Centre for Evidence and Implementation
- Caroline Bryson – Bryson Purdon Social Research

- Susan Purdon – Bryson Purdon Social Research
- Rebecca Dean – Research Assistant, Centre for Evidence and Implementation

Jane Lewis is the Principal Investigator responsible for the study overall and for the design and conduct of the implementation evaluation, including data collection, analysis and reporting.

Caroline Bryson and Susan Purdon will be responsible for designing the RCT and data collection, data analysis and reporting.

Rebecca Dean will support all elements of the evaluation and will be involved in implementation evaluation data collection, analysis and reporting.

Conflicts of interest

No conflicts of interest identified.

Timeline

- Timetable including specification of who is responsible for completing each task
- Include specific dates or date intervals.

Dates	Activity	Staff responsible/leading
October and December 2020	Sites briefed on trial procedures	SP/CB
4 th January 2021	Trial start	SP/CB
Feb/March 2021	Implementation evaluation Wave 1 interviews	JL
June 2021	6-month review point	JL
October/November 2021	Implementation evaluation Wave 2 interviews	JL
May/June 2022	Implementation evaluation Wave 3 interviews	JL
June 2022	Trial ends	SP/CB
October 2022	Final report draft due	JL
November 2022	Final report publication	JL

A report will be provided to WWCS and it is expected it will be published. Findings will be shared with the participating sites. A brief summary of the findings will be provided to FDAC sites for them to share with parents. We will also share this directly with the parents who take part in qualitative interviews.

References

Behavioural Insights Teams, 2019. Increasing families' engagement with FDAC. Summary report on developing the parent letters

Dai, H., Milkman, K.L. and Riis, J., 2014. The fresh start effect: Temporal landmarks motivate aspirational behavior. *Management Science*, 60(10), pp.2563-2582.

Durantini, M.R., Albarracin, D., Mitchell, A.L., Earl, A.N. and Gillette, J.C., 2006. Conceptualizing the influence of social agents of behavior change: A meta-analysis of the effectiveness of HIV-prevention interventionists for different groups. *Psychological bulletin*, 132(2), p.212.

Dweck, C.S., 2012. Mindsets and human nature: Promoting change in the Middle East, the schoolyard, the racial divide, and willpower. *American Psychologist*, 67(8), p.614.

Harwin, J., Alrouh, B., Ryan, M., McQuarrie, T., Golding, L., Broadhurst, K., Tunnard, J. and Swift, S., 2016. After FDAC: outcomes 5 years later: final report.

Haynes, L., Goldacre, B. and Torgerson, D., 2012. Test, learn, adapt: developing public policy with randomised controlled trials. *Cabinet Office-Behavioural Insights Team*.

Appendix 1

Letter 1

Dear: *[parent name]*

You're about to start your journey with fdac. As someone who has been through it, I understand that you are in a very difficult situation, and may be feeling confused and scared. I'd like to share a few thoughts with you that I wish someone had shared with me before I started fdac.

I started taking drugs when I was 18. I fooled myself for years that it wasn't a habit – even when I was using every day, I convinced myself it wasn't a problem. In 2016, my children were taken from me and my life spiralled out of control. I was recommended for fdac.

I didn't get fdac when I first started- I thought it was just another social service. I lied about my drug use and said the things I thought my workers wanted to hear. I attended the groups just to tick the boxes so that I could get my kids back and continue to use.

After a while, it became too hard to keep up with the lies, and I decided to start putting as much effort into my recovery as I had into using drugs. It was really hard, but slowly I started opening up to my fdac workers and got used to talking, sharing and being honest. By doing so, I realised that they weren't just another organisation trying to prod in my life. They weren't there to judge me. They wanted to help me.

This is my one piece of advice: start being honest, both with yourself and your worker. I say this because at the beginning, I believed my own lies. I refused to admit I had a problem, and that my lifestyle was causing me to neglect my children. But once I started being honest, I was able to get acceptance over my past and start working on being a better parent.

I'm now 3 years free from drugs. I never thought I'd have the life I have now. Yes, I got my kids back but I also got so much more - acceptance over my past and the confidence to cope with life's challenges without running. It was really hard work though; I had ups and downs, breakthroughs and breakdowns. But with fdac's support, I came through it all and wouldn't change a thing.

So, give yourself a chance. Give yourself and your children the opportunity for a new way of life. Keep an open mind. I wish you all the best.

From: *A parent who understands*

Appendix 2

Letter 2

Dear: *[parent name]*

You've been working with fdac now for a few months - I'm sure it hasn't been easy. I've written down some memories from when I was halfway through; you might recognise some of what I'm saying in your own experience so far.

Before I started with fdac, my life was a mess. Every day I'd go to work and then reward myself by getting high. I didn't think I had a problem because I didn't think I was hurting anyone. When I was referred to fdac, I didn't want any part of it. But the pain and heartbreak of being separated from my daughter made me realise that if I ever wanted to be a father to her again I would have to change and fully commit to fdac. I knew my daughter had to come first.

At first, I did all of the right things - I never missed a meeting, I did all of my tests and I even started going to the gym. I tried to change my circle of friends so that I could avoid people who just wanted to get high with me. Then about halfway through, I put myself in a bad situation by going to a party where there were drugs. I tried to resist but couldn't - I was filled with regret afterwards. I stopped going to the gym and I let anger and disappointment get the better of me. I felt like I had let myself and my fdac team down, but most of all, I'd let my daughter down.

When my drug test came back positive my worker called me in to talk about it. At first I lied because I was scared of losing my daughter for good. But I realised that I had to take responsibility - I'd messed up. I told my worker the truth, and to my surprise, I wasn't judged. Instead, they made it their mission to get me back on track. I started going to the gym again and living a healthier lifestyle. It was really hard work, and some days I came close to giving it all up, but I can now see that it was all worth it.

After 18 months of fdac, I got my daughter back. Every day, I think about the time I relapsed, because I never want to feel that pain again. It was a hard lesson to learn but it reminded me that setbacks will happen; big and small. What matters is how we pick ourselves up afterwards.

From: *A parent who didn't give up*

Appendix 3

Letter 3

Dear: *[parent name]*

You've been working with fdac for over 3 months now - well done for making it this far, I'm sure it hasn't been easy. I wanted to share some reflections with you because even though I didn't realise it at the time, this was about the point where the bad days started to get easier, and they might for you too.

As you know by now, fdac is intense - it isn't something you can just half-arse. I was still going in for meetings 3 times a week at this point, and it was taking up all of my time. I felt like I had made good progress, and didn't see why it was necessary to still have such intense support.

If you're feeling this way too, I want to let you know that it's ok, and you're not alone. I learnt that you don't have to hold your feelings in - tell your worker if you're struggling, or feeling frustrated. In the past, I had always felt pressure to put on my best face and smile nicely to workers. But the fdac workers saw straight through that and never judged me for feeling upset. In fact, my most beneficial sessions were those where I was honest about being frustrated.

Since completing fdac, my life has been completely different to what it was before. I've stopped my old habits and I've never been so confident in my own abilities as a mum and a person. But I don't expect perfection - there are still bad days, and days when I feel frustrated. But fdac taught me that it's ok to feel this way, and that by being open and honest, I can work through those feelings in a healthy way.

You should be proud of making it this far, and I know you wouldn't have gotten to this point without putting the work in. All the meetings, hard days and sacrifices will be worth it. Remember, as much as fdac have supported you, you have done the work and you are capable.

From: *A parent who made it through the bad days*



Increasing parental engagement with FDAC

Process for developing the letters

In this document, we set out the steps undertaken to draft the parental engagement letters.

1. Recruitment of parents and pre-interview preparation

BIT reached out to two FDAC sites who have pre-established mentoring programmes in place. We asked if they were happy to put us in touch with graduated parents who would be willing for us to interview them in relation to developing the letters.

Sites connected us with parents who had volunteered to be interviewed. When arranging interviews, all parents were given the option of having a worker present during the interviews, however, none of the parents took this option up.

This project was put through BIT's internal ethics procedure in which members of our qualitative research team led by Dr. Matthew Barnard reviewed the process and materials (e.g. information sheets for parents, interview scripts etc.) used to gather information from parents. The project was given ethical approval.

To ensure interviewees understood the purpose of the project, all three parents were emailed a copy of the information sheet, which detailed the aims of the project, consent, and their rights with regards to their personal data.

2. During the interview

During the first few minutes of the call, each parent was asked to confirm they had read the information sheet and understood its content. Parents were then asked to provide verbal consent to participating in the interview. Parents were given reassurance that they could withdraw at any point. Parents were also given the opportunity to ask any questions they might have about the project before the formal interview questions commenced. Interviews lasted for 30-40 minutes each, exploring themes such as any adversity experienced during the FDAC process and advice for new/ current parents participating in FDAC.

3. Drafting the initial letters

Based on the parents' responses to the interview questions, BIT drafted the first versions of each of the three letters. These first drafts aimed to strike a careful balance between authentically reflecting the parents' individual experiences and protecting their privacy (i.e. not divulging too much personal information). With this in mind, it was decided that each letter would not be signed off with a name or pseudonym, rather with a short phrase that reflected the main theme of the letter.

It was important that the letters were written in a way that the parents who had co-created them felt comfortable with, and reflected their experiences and feelings truthfully. BIT therefore shared the first draft of the letters with the parents and asked them to provide feedback and comments (either via email, phone call or both).

4. Feedback from parents on the initial letters

One parent was happy with the letter and had no further suggestions for edits. This parent confirmed via email that she was happy for the letter to be shared with sites for piloting.

The other two parents provided more extensive feedback and requested that the letters be re-drafted based on their comments. BIT re-drafted these letters and again shared them with the two parents to ensure they were happy with the edits. BIT also spoke with each parent over the phone (after seeking permission from the worker) to talk through the changes and gain any further feedback/ comments.

After the parents had read through the letters, they both confirmed via email they were happy with the new drafts and gave BIT permission to share the letters with sites.

If you have any questions or comments on the above development process, please do not hesitate to contact Dave (dave.wilson@bi.team) to discuss further.