

MISS RECORDER HENLEY

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Before:

MISS RECORDER HENLEY

IN THE FAMILY COURT

Case No. NE17C00390

SITTING AT NEWCASTLE UPON TYNE

In the matter of the Children Act 1989

Date: 15 May 2018

In the matter of

C (Born in the month of June 2003)
ML (Born in the month of September 2004)
BL (Born in the month of August 2006)
EL (Born in the month of April 2011)

BETWEEN:

LA

Applicant

-and-

(1) M

(2) F

(3) C AND BL

(4) ML AND EL

(Minors acting through their Children's Guardian, CG)

Respondents

JUDGMENT

Representation

Applicant – Miss S (Counsel)

Respondent Mother – Mr C (Counsel)

Respondent Father – Mr P (Counsel)

Respondent Children C and BL – Mr D (Solicitor)

Introduction

1. The Court is concerned with four children:
 - C (Born in the month of June 2003) now aged 15 years old
 - ML (Born in the month of September 2004) now aged 13 years 10 months old
 - BL (Born in the month of August 2006) now aged 11 years 10 months old
 - EL (Born in the month of April 2011) now aged 7 years 2 months old
2. The Mother of all four children is M (born in 1983) now aged 35 years old.
3. The Father of all four children is F (born in 1970) now aged 48 years old. He holds PR for all four children by virtue of his marriage to the Mother.
4. This matter comes before the Court for Final Hearing originally with a time estimate of 4 days, to commence on Monday 14th May 2018.
5. On at 12.43pm on Wednesday 9th May 2018, two and a half working days before the commencement of the final hearing, I was contacted by the children's solicitor Mr D by email inviting me to agree to meet two of the children, C and BL. The information I was given was as follows:

“ The children, C, aged 14 years, and BL, aged 11 years, have expressed a wish to meet you. The purpose of the proposed meeting(s) is to enable the children to gain further understanding of what is going on, to feel that they have been involved and connected with the proceedings, to understand the nature of your task and to be reassured that you have understood their wishes and feelings.

The Guardian believes that the proposed meeting(s) accords with the welfare interests of the children. If you decide to meet both or either of the children, it is proposed that they are accompanied by their Guardian, having been prepared for the meeting by her.”

6. I advised him that I had no knowledge of the case and would need a bundle of papers and the opportunity to read them before any meeting could take place. I took the view that if I was going to meet them, I needed to meet them before the hearing, due to commence on Monday the following week, rather than attempt to meet them during the hearing itself and in that way I could inform the parties of the outcome of the meeting at the outset of the hearing. Unfortunately despite the fact that the children had been asking to meet the Judge since January 2018, no arrangements had been made for a meeting to take place. I was informed that this was due to some uncertainty as to who the trial judge would be. I had had no involvement with this matter before. I enquired whether any of the parties objected to me meeting the children and I was informed that they did not.
7. I duly obtained and read a copy of the bundle on Thursday 10th May 2018. I arranged to meet the children on Friday 11th May 2018 at 4.30pm. At the request of the children, I met them separately in the presence of their Guardian and Mr D, their solicitor. The meetings were recorded by a hand held recording device. After

the meeting, I contacted Mr D by email to ascertain whether the children were being separately represented given that their views were in clear conflict with their Guardian. I expressed my view that these were articulate, intelligent children and that I would be surprised if it was thought that they lacked capacity to instruct a solicitor.

8. I was extremely concerned to discover that although the separate representation of the children had been raised as an issue since at least October 2017, no steps had been taken to make arrangements for this prior to the first day of the final hearing. The issue of C potentially requiring separate representation was one of the issues that had necessitated the case being transferred from the Family Proceedings Court.
9. Whilst I was informed that C and BL's views were expressed more forcefully to me than they had expressed them previously these are children who have always sought to return home to their parents' care and opposed placements in foster care. The bundle contains evidence from the local authority and from the Children's Guardian which makes clear the longstanding conflict between these two children and their Guardian and also indicates that all three of the oldest children may well have capacity to instruct a solicitor should they wish to.
10. On the first morning of the final hearing I informed the parties of the content of the discussion that I had had with the children I met and my view that those children were in conflict with their Guardian. I indicated to the parties that I had expressed my expectation to Mr D that he would represent the interests of those children rather than their Guardian. The Guardian sought to arrange representation for herself and for the remaining two children and all parties invited me to stand the matter down to allow her to secure alternative representation. I expressed a clear view that I was extremely reluctant to adjourn this case due to the delays that had already been encountered, the length of time that the children had been in foster care already, some 15 months, and the express wishes of the children I met who wanted to have a decision made as soon as possible. They made clear to me that they were utterly opposed to an adjournment and I did not consider that I should permit one as a consequence of the actions of those representing their interests. I took the view that it was contrary to the interests of all of the children to adjourn the case.
11. I agreed to stand the matter down with a view to commencing evidence the following morning, on the basis that that would allow the two remaining children, ML and EL to be represented, and for their new solicitor to meet them that afternoon with their Guardian.
12. This case had not had an effective IRH hearing and had not been before the Court since 5th February 2018 when final evidence had been directed. Although I was informed the threshold criteria for the making of public law orders pursuant to s.31 Children Act 1989 was conceded, the basis for those concessions was not known. The Court bundle needed to be updated and contact recordings which the Father had been requesting for some time had not been circulated or sent to the expert Dr Hill – it being a key part of the Father's case that he had changed and that recent contact recordings supported that proposition.
13. The lack of an IRH caused considerable difficulties with this case both administratively in terms of the Court bundle, and with a failure to ensure that the timetable for the completion of the case was extended. It also caused considerable difficulties in the smooth running of the hearing and with my meeting with the children.

I informed the parties during the course of the case that I saw it as a collective failing that none of the parties or the Court had ensured that an IRH was listed in this case given the length of time between its last hearing and the final hearing. The need for an effective IRH was particularly acute in this case given that the Mother was pregnant on 5th February when the final hearing had been listed, with a history of premature labour and the listing of the final hearing fell close to her due date. An IRH was also clearly required to deal with issues in respect of the separate representation of the children and to explore issues in connection with the children meeting the trial judge. The guidelines in respect of Judges meeting children had clearly not been followed in this case.

14. The Mother in fact had her baby in March 2018 and he died later that month. The matter was not returned to Court to address the issues that arose from that tragic event and its evidential implications for the case.
15. I heard evidence in this matter on 15th, 16th, 17th and 18th May 2018. Unfortunately, one whole morning of the hearing was lost on 16th May due to the unavailability of one of the advocates. The hearing also took significantly longer than expected due to the lack of recent written evidence from the local authority. This resulted in oral evidence being elicited from the social worker, often during cross-examination that went far beyond the written documentation. I made clear to the advocates that I saw it as a collective failing in this matter that this case was not brought back before the Court following the death of OL and prior to the commencement of this hearing so that the Court could time table for updated evidence to be filed in light of that hugely significant event. As a result of these issues, the matter did not conclude on 18th May 2018 – an additional day that I had found for it as a result of clearing my list that day – and I made arrangements to forego a day of planned leave on 21st May 2018 to complete the evidence in the case.
16. On Monday 21st May 2018 the case could not proceed as the Paternal Grandfather had unexpectedly taken seriously ill over the preceding weekend and was in hospital awaiting heart surgery that day. The Mother was part heard in her evidence from the Friday of the week prior to that. The Father would have fallen next to give evidence. Neither parent felt able to give evidence that day and understandably wished to attend the hospital. I agreed therefore that the hearing could not proceed as planned and agreed to release the Mother from her oath. I agreed to forego another day's leave, following my return from a planned holiday, on 11th June 2018 to resume the evidence. I heard the remainder of the Mother's evidence that day and the start of the Father's evidence. Unfortunately the evidence did not conclude that day and the matter was listed for a further day on 18th June 2018 to complete the Father's evidence and to hear from the Children's Guardian.
17. On 18th June 2018 I heard from the Father and the Children's Guardian, directed the advocates to file written submissions and listed the handing down of this judgment.

Background

18. The parents formed their relationship when the Mother was 18 years old and the Father was 31 years old. They married, had five children, one of whom sadly died and remained in a romantic relationship until November 2017 – a relationship of some 16/17 years duration.

19. The family moved from Kent to Gateshead in August 2016. The family had local authority involvement in the Kent area as a result of allegations of domestic abuse in the parent's relationship, the parents' lack of honesty with professionals, M's poor mental health, in part due to her childhood experiences of physical, emotional and sexual abuse, the children's poor school attendance and the older two children's role as young carers for their siblings. Additionally allegations were made that the children had been neglected with multiple missed health appointments, physically abused by the Father and exposed to domestic abuse causing them emotional harm. The Mother has a history of alcohol and drug misuse. The children held Child in Need status in the Kent area. The local authority states that it has experienced difficulties in accessing children's services records from the Kent area. Save for it being recited on previous orders that it would continue to seek disclosure of these recordings – the last order dating back to 5th February 2018 – no efforts were made to secure disclosure by way of a third party disclosure order. Similarly, no third party disclosure order was sought against the Police, and I refused to make one, in circumstances in which it was ultimately accepted that the local authority had failed to invoke the local protocol for Police disclosure prior to the commencement of the final hearing notwithstanding its assurances that it had done so which were recorded on the face of earlier Court orders. It is to the great credit of the Police that once a protocol compliant request was made, disclosure was provided immediately and prior to the Father's evidence commencing.
20. The lack of contemporaneous recordings has therefore presented some difficulties in respect of ascertaining historical facts in this matter, although the police disclosure that has been received during the course of the hearing has been of assistance.
21. The parents had another child, S who was born on 28th June 2010 and who very sadly died on 19th September 2010 aged three months old as a consequence of medical complications arising from her premature birth.
22. In 2016, following the Mother being informed that her sister had made a complaint of historic sexual abuse against their father, the Maternal Grandfather, she began to misuse alcohol and cocaine. The effects of her use of these substances had a significant impact upon the children. During the same year, there were a number of incidents of domestic abuse between the parents, witnessed by the children. On 13th August 2016 the Mother attempted suicide by deliberate overdose. She was admitted to hospital until 16th August 2016 and was diagnosed with Post Traumatic Stress Disorder and an Adjustment Disorder.
23. Following the family's move to the North East in September 2016, a number of multidisciplinary meetings were held and the children were made the subject of Child in Need Plans on 15th December 2016. The Mother had no family or friends in this area and the move was prompted by the Father's desire to move closer to his family who originate from the North East although his parents now reside in Cumbria. The Mother's established support network remains in the Kent area.
24. A section 47 enquiry commenced in January 2017 after a child concern notification was received which detailed police attendance at the family home after they had been called to the address by C who reported that M was being assaulted by F. The Mother refused to give a statement to the police or to support a prosecution of the Father.

25. An initial child protection conference was held on 24th January 2017 and the children were all made subject to child protection plans under the category of risk of emotional abuse.
26. On 30th January 2017, the children were removed from their parents' care under police powers of protection and placed in two local authority foster placements with C and EL being placed together in one placement and ML and BL in another. This followed a physical altercation between parents, which led to M taking an overdose and being admitted to hospital and to F being arrested. A legal gateway meeting was held the following day and on 1st February 2017, M agreed for the children to be accommodated pursuant to s.20 Children Act 1989. F also provided his consent save for in relation to EL.
27. It is recorded that the Mother refused to support a Prosecution of the Father arising from these events and would not give a statement to the Police. The Police attempted to arrange a place in a women's refuge for the Mother but she chose to return home to live with the Father after spending just one night in the refuge.
28. The police applied for and obtained a Domestic Violence Protection Notice on 2nd February 2017, which stipulated that the Father was not permitted to evict or exclude the Mother from the home address.
29. On 22nd March 2017 the Father is reported to have assaulted the Mother causing facial injuries. Again the Mother refused to make a statement to the Police and refused to support a Prosecution. The Father was arrested. A second Domestic Violence Protection Notice was put in place, preventing the Father from going within 100 metres of the Mother or the family home or from contacting her either directly or indirectly. The parents continued their relationship, in breach of this and the Father applied to have the Domestic Violence Protection Notice removed on the basis that he asserted that he was the Mother's carer.
30. The Local Authority applied for care orders and interim care orders on 8th June 2017 following F indicating that he no longer agreed to the children's accommodation in foster care. He subsequently reconsidered his position once proceedings were issued and the children remained accommodated on a voluntary basis. By the time that these proceedings were issued the children had been in foster care for over five months.
31. On 28th July 2017, ML and BL joined C and EL in placement and all four siblings continue to be placed together in the same foster care placement to date.
32. In late August 2017 and continuing until around mid September 2017 the Mother had a significant lapse of alcohol and cocaine misuse. She states that this amounted to three days of drinking spanning this period of time. On one of the nights concerned – the night of 26th /27th August 2017 - she alleged that she had been raped by a stranger following a night of drinking alcohol with the Father. The parents had had a disagreement and separated, the Father returning home. The Mother did not follow and ended up alone. She was discovered in Bensham Park having raised the alarm indicating that she had been assaulted. A police investigation followed. The Mother accepts Police information that on 23rd September 2017 they were contacted following her attending the Father's home after she had been drinking alcohol. She states that this was the end of the relapse period and that she only took drugs on the night of the rape. The Mother's admission in respect of drinking on 23rd September 2017 was prompted by receipt of the Police disclosure

during this hearing and prior to that the Mother had not disclosed it to professionals claiming that she had forgotten about it.

33. In October 2017 it was discovered that the Mother was pregnant. She indicated that the Father was not the biological father of the child but refused to disclose who the father was, citing a “one night stand”. Very sadly that baby, OL, died shortly after his birth on 9th March 2018 as a result of medical complications on 18th March 2018, arising from his premature birth.
34. The parents assert that they have maintained a separation since the latter part of last year – since around November 2017.
35. Following the death of OL the Mother misused alcohol – this is said by her to have amounted to drinking “a couple” of drinks on one occasion. She also accepts turning to the Father for support and staying with him overnight at his home over a number of nights following OL’s death and then again following some surgery that she had connected to the birth. That second period of overnight stays being in mid April 2018. The parents maintain that this was not a reconciliation.
36. During the course of this hearing the parents have accepted being in contact with each other and following news that the Paternal Grandfather was awaiting urgent heart surgery, the parents travelled together to Cumbria to be at his bedside and the Mother has offered her support to the Paternal Grandparents.

Positions of the parties

37. The LA’s care plans in respect of all four children are dated 10th January 2018. They provide for all four children to be placed in long-term foster care placements, under the auspices of care orders. The intention is to place them in two separate sibling groups – C and BL together and ML and EL together. It is proposed that the parents are to have separate contact, the Mother once per month, the Father four times per year. All parental contact is to be supervised by the LA. The foster carers are to arrange sibling contact for all four children on a monthly basis.
38. The Mother does not actively oppose the care plan for ML or the making of a Care Order in respect of him but seeks the return of the other three children to her care.
39. The Father supports the Mother to care for the children but in the alternative puts himself forward as a carer for them or for as many of them as it may be deemed that the Mother is unable to care for. On the second day of the hearing he indicated that he accepted, that in light of ML’s wishes and feelings he should remain in foster care and does not therefore actively oppose the making of a Care Order in respect of him. I commend both parents for adopting the position that they have done in respect of ML. If the children cannot be returned to either of the parents, the Father opposes the separation of the siblings and advances a case for them to continue to be placed together in one foster care placement. He seeks a higher level of contact with the children than is proposed in each child’s care plan.
40. C wants to return home to the Mother and ideally would seek a shared care arrangement whereby she would live with the Mother through the week and the Father on weekends. She seeks to live with as many of her

siblings as she is able to. If she cannot live with her parents, she seeks to live with other family members in the South of England, or failing that, with one of three of the Mother's close friends who she regards as "Aunties". She is opposed to living in foster care.

41. BL wants to return home to live with the Mother and seeks unsupervised contact with the Father. He does not want to live in foster care. He would like to live with as many of his siblings as he can.
42. The Children's Guardian supports the local authority's care plans and the making of Care Orders in respect of all four children. There is no conflict between the Guardian's recommendation and the wishes and feelings of ML and therefore he does not require separate representation.

Threshold Criteria

43. The parents concede that the threshold criteria for the making of public law orders pursuant to s.31 Children Act 1989 is crossed by virtue of the following:
 44. At the time protective measures were taken, namely on 30th January 2017, the children had suffered and/or were likely to suffer significant harm and the harm and/or likelihood of harm is attributable to the care given to them and/or likely to be given to them if the order were not made, not being what it would be reasonable to expect a parent to give to them. Such harm and/ or the likelihood of harm is both physical and emotional and arose for the following reasons:
 45. The parents have a dysfunctional and turbulent relationship characterised by verbal abuse, aggression and physical assaults that have necessitated police involvement on occasion. These incidents of parental conflict have, at times, taken place in front of the children.
 46. M has shown an inability to protect the children by continuing to remain in a relationship with F despite his volatility and his abusive behaviours.
 47. M has a history of mental ill health, including low mood and anxiety and has attempted self-harm/suicide by overdose. This has impacted upon her ability to cope and to safely care for the children.
 48. M has misused alcohol and drugs (cocaine and MKat) including at times when the children have been in her care and has utilised the same as a coping mechanism.
 49. F has used inappropriate parenting techniques namely, physical chastisement of the children.

As a consequence of these concessions, I am satisfied that the threshold criteria for the making of public law orders pursuant to s.31 Children Act 1989 is crossed.

Guidance in respect of Judges meeting children

51. The Guidance for Judges meeting children is contained in the “ Guidelines for Judges Meeting Children who are the subject of Family Proceedings 2010”

52. The relevant part of the 2010 Guidelines, which remain in force and have not been amended, state as follows:

" Guidelines

1. The Judge is entitled to expect the lawyer for the child and/or the Cafcass officer:

(i) to advise whether the child wishes to meet the Judge;

(ii) if so, to explain from the child's perspective, the purpose of the meeting;

(iii) to advise whether it accords with the welfare interests of the child for such a meeting take place; and

(iv) to identify the purpose of the proposed meeting as perceived by the child's professional representative/s.

2. The other parties shall be entitled to make representations as to any proposed meeting with the Judge before the Judge decides whether or not it shall take place.

3. In deciding whether or not a meeting shall take place and, if so, in what circumstances, the child's chronological age is relevant but not determinative. Some children of 7 or even younger have a clear understanding of their circumstances and very clear views which they may wish to express.

4. If the child wishes to meet the Judge but the Judge decides that a meeting would be inappropriate, the Judge should consider providing a brief explanation in writing for the child.

5. If a Judge decides to meet a child, it is a matter for the discretion of the Judge, having considered representations from the parties –

(i) the purpose and proposed content of the meeting;

(ii) at what stage during the proceedings, or after they have concluded, the meeting should take place;

(iii) where the meeting will take place;

(iv) who will bring the child to the meeting;

(v) who will prepare the child for the meeting (this should usually be the Cafcass officer);

(vi) who shall attend during the meeting – although a Judge should never see a child alone;

(vii) by whom a minute of the meeting shall be taken, how that minute is to be approved by the Judge, and how it is to be communicated to the other parties.

It cannot be stressed too often that the child's meeting with the judge is not for the purpose of gathering evidence. That is the responsibility of the Cafcass officer. The purpose is to enable the child to gain some understanding of what is going on, and to be reassured that the judge has understood him/her."

52. The issues involved in Judges meeting children was recently considered by MacDonald J in the case of London Borough of Brent v D and Ors (Compliance with Guidelines on Judges Meeting Children) 2017 EWHC 2452 (Fam).

“[48] The 2010 Guidelines exist to ensure that when a judge meets a child, the purpose of that meeting and the expectation of all who are party to it are clear both to the child and to the parties to the proceedings.

The need for the purpose of the meeting, and the expectations of those who are party to that meeting to be clear is emphasised by the clear injunction in the Guidelines against using the meeting to obtain evidence and in favour of using the meeting to ensure that the child feels more involved and connected with the proceedings.

[49] I accept that the Guidelines are silent as to the point during proceedings at which the question of the judge meeting the child should be addressed. Plainly, there are good reasons for not being too prescriptive about this. Each case will turn on its own facts. Further, children do change their minds. A child who has indicated they do not wish to see the judge may change his or her mind very shortly before the hearing.

[50] However, as a starting point, the question of the judge seeing the child should ordinarily be raised and determined at the issues resolution hearing. This will allow the solicitor for the child or the Cafcass officer to deal with those matters set out in Paragraphs 1 of the 2010 Guidelines, will allow the other parties to make any representations pursuant to Paragraph 2 of the Guidelines and, if the judge accedes to the request to meet the child, will allow those matters set out in Paragraph 5 of the guidance to be settled with input from all parties. Where it becomes apparent only after the IRH that a child wishes to see the judge, the steps required by the 2010 Guidelines should be commenced immediately so as to ensure that a timely decision is made on the child's request and properly considered arrangements put in place if the judge accedes to the request to meet the child.”

The Law in respect of Factual Determinations

54. The law to be applied when considering the issues before the court is well settled. When considering the findings sought by the local authority the court applies the following well established principles.
55. The burden of proving the facts pleaded rests with the local authority. In cases of alleged inflicted injury, it is for the local authority to establish on the balance of probabilities that the injuries in question were inflicted. There is no requirement on the parents to show that the injuries have an innocent explanation.
56. The standard to which the local authority must satisfy the court is the simple balance of probabilities. The inherent probability or improbability of an event remains a matter to be taken into account when weighing the probabilities and deciding whether, on balance, the event occurred (*Re B* [2008] UKHL 35 at [15]). Within this context, there is no room for a finding by the court that something *might* have happened. The court may decide that it did or that it did not (*Re B* [2008] UKHL 35 at [2]).
57. Findings of fact must be based on evidence not on speculation. The decision on whether the facts in issue have been proved to the requisite standard must be based on *all* of the available evidence and should have regard to the wide context of social, emotional, ethical and moral factors (*A County Council v A Mother, A Father and X, Y and Z* [2005] EWHC 31 (Fam)).
58. In determining whether the local authority has discharged the burden upon it the court looks at what has been described as ‘the broad canvass’ of the evidence before it. The role of the court is to consider the evidence in its totality and to make findings on the balance of probabilities accordingly. Within this context, the court must consider each piece of evidence in the context of all of the other evidence (*Re T* [2004] 2 FLR 838 at [33]).
59. In this context, and self-evidently, I am not limited to the expert evidence before me but may take account of a wide range of matters, including my assessment of the credibility of the witnesses and inferences that can be properly drawn from the evidence. The opinions of the medical experts need to be considered in the context of all of the other evidence.

60. The evidence of the parents and carers is of utmost importance and it is essential that the court forms a clear assessment of their credibility and reliability. The court is likely to place considerable reliability and weight on the evidence and impression it forms of them.
61. The court must always bear in mind that a witnesses may tell lies in the course of an investigation and the hearing. The court must be careful to bear in mind that a witness may lie for many reasons, such as shame, misplaced loyalty, panic, fear and distress. The fact that a witness has lied about some matters does not mean that he or she has lied above everything (*R v Lucas* [1982] QB 720). I make clear that in reaching my conclusions in this matters, I have given myself this direction in respect of the evidence of both the Mother and the Father.
62. It is also important when considering its decision as to the findings sought that the Court take into account of the presence or absence of any risk factors and any protective factors which are apparent on the evidence. In *Re BR* [2015] EWFC 41 Peter Jackson J (as he then was) sets out a useful summary of those factors drawn from information from the NSPCC, the Common Assessment Framework and the Patient UK Guidance for Health Professionals.

Legal Framework in respect of welfare decisions

63. I remind myself that each child's welfare is my paramount consideration. That is section 1(1) of the Children Act 1989. In considering what orders to make I have regard to the Welfare Check List found in section 1(3) of the 1989 Act.
64. In relation to the threshold criteria of section 31(2) Children Act 1989 I have regard to whether I am satisfied that each child has suffered or is at risk of suffering significant harm. As I have already stated I am satisfied that at the time that protective measures were taken, each child had suffered and was at risk of suffering significant emotional harm and neglect and that they were at risk of suffering physical harm as a consequence of exposure to domestic violence.
65. When considering which orders if any are in the best interests of the children I start very clearly from the position that, wherever possible, children should be brought up by their natural parents and if not by other members of their family. The state should not interfere in family life so as to separate children from their families unless it has been demonstrated to be both necessary and proportionate and that no other less radical form of order would achieve the essential aim of promoting their welfare. In *Re B* [2013] UKSC 33 the Supreme Court emphasised this, reminding us such orders are "very extreme", and should only be made when "necessary" for the protection of the child's interests, "when nothing else will do". The court "must never lose sight of the fact that (the child's) interests include being brought up by her natural family, ideally her parents, or at least one of them".
66. It is not for the court to look for a better placement for a child; social engineering is not permitted. In *YC v United Kingdom* [2012] 55 EHRR 967 it was said: "Family ties may only be severed in very exceptional

circumstances and.... everything must be done to preserve personal relations and, where appropriate, to 'rebuild' the family. It is not enough to show that a child could be placed in a more beneficial environment for his upbringing."

67. I have looked again at the words of the President in Re B-S (Children) [2013] EWCA Civ 1146 as well as the judgments in Re B (supra) and reminded myself of the importance of addressing my mind to all the realistic options for the children, taking into account the assistance and support which the authorities or others would offer.
68. In considering making a Care Order I have had close regard to the Article 6 ECHR and Article 8 ECHR rights of each family member and of each child, but I remind myself that where there is tension between the Article 8 rights of an adult family member, on the one hand, and of one of the children, on the other, the rights of the child prevail; *Yousef v The Netherlands* [2003] 1 FLR 210.

Evidence

69. During this hearing, I have heard from the legal representatives for each party. I have read the bundle of documents filed for this hearing. I heard oral evidence on 15th, 16th, 17th and 18th May 2018 from the following witnesses: BW, social worker from LA who undertook the sibling assessment of the children; Dr Hill, Consultant in Forensic and Clinical Psychology who assessed both parents; RR, the children's key social worker; VF, Team Manager and the Mother.
70. This hearing then resumed part heard on 11th June 2018. A further statement from the key social worker had been filed, which was not challenged and the Mother was recalled and re sworn to conclude her evidence. Mr C, counsel for the Mother, did not seek to elicit any further evidence in chief from her, which I would have permitted given the passage of time, and none of the parties who had already cross examined her sought to ask her any further questions. Mr A commenced and concluded his cross-examination of her in one piece. I then heard from the Father, unfortunately his evidence was not completed in one piece and it went part heard over the course of one week to 18th June 2018, when it resumed. I also heard from the Children's Guardian that day.

Welfare analysis

71. The children's Paternal Grandparents, PGPs, were the subject of a negative viability assessment carried out by the local authority dated 2nd March 2017. They have not sought to challenge that assessment, either themselves or through one or both of the parents. During the assessment they indicated that they would be unable to provide a long-term placement for the children and would struggle to manage the care of them all together, indicating that they may be able to care for one or two of them during weekends and school holidays. They have not challenged the negative viability assessment of them, have not sought to join these proceedings as parties or made witness statements and any case they may have wished to pursue to care for the children was not put forward by either of the parents.
72. ML expressed a wish to be cared for by KS, a family friend, who ML lived with for a period of time in the

Kent area, prior to the family moving to the North East. The local authority undertook a negative viability assessment of him, which has not been challenged. None of the parties seek to advance a case for ML to reside with him.

73. No other family members or family friends have been assessed as potential kinship carers. The parents have not put forward anyone else to care for the children. In her meeting with me, C put forward some alternative carers, they have not been assessed to date and I did not consider that it was proportionate or necessary for the hearing to be adjourned for those family friends to be approached and assessed given the delays that have already occurred in this case and C's clear view that she did not want to hearing to be adjourned. These alternative carers were not put forward on her behalf by Mr D during the hearing.
74. There are three possible realistic placement options for the children: with the Mother, with the Father or in local authority foster care.
75. The Mother and Father now concede that in light of ML's wishes and feelings he should remain placed in local authority foster care and do not actively oppose the making of a care order in respect of him.
76. ML is a 13 year old boy. He is an intelligent child who presents as measured and mature beyond his years. He loves school and is ambitious about his future educational aspirations. The parents have raised concerns about whether ML suffers from Autistic Spectrum Disorder. These concerns have not been evidenced in foster care nor have they been supported by medical professionals.
77. He has been consistent in respect of his accounts of his life at home, alleging that he and his siblings experienced abuse at the hands of the parents and that his parents are not able to care for him or his siblings safely. He has been placed in local authority foster care since the end of January 2017. Prior to that he lived with his parents and siblings. He has never been separated from all of his siblings, having only been briefly separated from C and EL when he was first removed from the care of the parents. ML has expressed clear wishes and feelings that he does not wish to return to the care of the Mother or the Father and that he wishes to remain in foster care. He accepts that it is best for the sibling group to be separated and that he should be placed with EL. He is enthusiastic about the prospect of staying with his current carers. He is a resilient child. He accepts the contact proposals in his care plan including that he would see the Mother during school holidays and the Father four times per year. He would like the choice whether to attend contact with his parents or not. He has chosen not to attend contact with the Father for the last few months.
78. I am satisfied that ML's care plan is an appropriate one for him, and that foster care is the only realistic placement option for him given the strength of his wishes and feelings and his parents' decision to accept his views. I have no doubt that their decision has been a difficult one for them to make and I commend them for taking a child centred approach in respect of ML's placement and for their ability to respect his strongly held views. I am satisfied that in the circumstances there are no other realistic placement options for him within the family and that long term foster care is both necessary and appropriate to meet his needs and keep him safe. I consider that it is not in his best interests to delay making a decision about his long term care and welfare arrangements and am satisfied that a Care Order is both necessary and proportionate in his case. I therefore make a Care Order in favour of LA in respect of him and approve his care plan.

79. When considering what is in the best interests of each of the remaining three children of this sibling group, I must consider their needs now and in the future.
80. C is 15 years old. She is an intelligent teenager who has no complex health or developmental needs. When she was received into foster care she suffered from some nocturnal enuresis for which she was medicated. This difficulty does not appear to have had an organic cause. She is also said to have a history of self-harm by cutting. She relied upon sucking her thumb to comfort herself when she was first accommodated. She needs a safe, stable, nurturing placement where she can be supported to meet her potential. She also has a clearly expressed need to have her future placement determined so that she can focus on her future and feel settled.
81. C has been separately represented during this final hearing as a consequence of the conflict in views between her and her Guardian. When I met C on Friday 16th May 2018 in the presence of her solicitor and the Children's Guardian she presented as an articulate and intelligent child, and I have no doubt that she has the capacity to instruct a solicitor in respect of her views. She told me that when she first went into foster care she wanted to live with the Father but that she has "now seen that some people have made progress and some have not, according to the social workers". She told me that she wants a shared care arrangement; to live with the Mother during the week and the Father at weekends and that if that were not possible she would like to live with a family member as she does not like living with someone she doesn't know. She told me that was how it felt living with her current foster carer, she said "I don't feel like I'm part of their every day life, I feel like they're just doing it for their job." She told me she was aware that ML does not want to go home and said that EL is very young. She told me that if she was "not allowed to be near the Father but could be with the Mother that would be alright". Ideally she would want both of her parents and all of her siblings to live together but she knows that won't happen. She said, "That's my dream". She told me if she could stop what happened to her mother when she was a baby she would, as then her mum wouldn't have been on drugs and her dad would not have been violent and they would be a happy family. She said she would like to live with the Mother or the Father. She told me that the last thing she would want is foster care and that she would hate to be in foster care with people that she doesn't know as she would feel out of place. She said, "up here is not my home, down South is my home where my Nan, my cousins and my friends live". She said the only reason she would have for living up here would be to live with the Mother, the Father or her brothers. She said that she speaks to her friends "down South" a lot and that she had "lots of them". She said that if she could not be placed with a family member then she would wish to be placed with one of the Mother's close friends who all live in the South of England – L, or K or A who she's thinks of as her aunts, and "as family" and so asked me to consider them. She also asked me whether she could visit her sister's grave on special occasions, when I would make a decision and how quickly she could move to either the Mother's care or a long term foster care placement if that was my decision. I informed her that those were questions that needed to be explored during the hearing and that I would endeavour to make a decision as soon as I could. She also wrote me a letter in advance of our meeting stating that if I decide that she could not return home then she knows that is for the best. My meeting with C was recorded and took place separately to her brother, at her request. What she told me was unsolicited and spontaneous. I avoided asking her questions and allowed her to simply tell me what she wished to.

82. C experienced a childhood in which she had adult responsibilities and issues thrust upon her. She has been made aware of the Mother's childhood abuse, mental health issues and substance misuse. She was exposed to the domestic abuse and difficulties in her parents' relationship and intervened to protect her siblings from violence in the home. She has taken on a parenting role whereby she seeks to ensure that her brothers' needs are met, especially EL's, the youngest child of the sibling group. Her carers have had to impose strict rules and boundaries to prevent her from continuing to 'parent' EL in placement. Until recently she has been protective of her father and resentful of her mother, blaming the Mother for problems in the family and seeking to excuse the Father's behaviour. She has struggled to manage her emotions in placement and feels that she failed to protect her siblings from abuse. C recently sought to abscond from her placement and sought out the Mother. She was ultimately persuaded to return to her placement later that same night. C needs to have a placement that will keep her safe from harm and allow her to complete her childhood without adult responsibilities. She will shortly be starting work towards her GCSEs and is therefore at an important stage of her education. She is anxious to have decisions made about her future without delay.
83. BL is 11 years old. He is under the care of a Paediatric Neurologist arising from concerns about the way he walks. He has good mobility. He also has difficulty following instruction and paying attention. The cause of these difficulties is under investigation but may be linked to his premature birth. He presents as a bright and articulate child. He needs a safe and secure placement and is anxious for his future care arrangements to be determined without delay.
84. BL has been separately represented during this final hearing as a consequence of the conflict in views between him and his Guardian. When I met him on Friday 16th May 2018 in the presence of his solicitor and the Children's Guardian he presented as a bright and intelligent child with strongly held views, and I have no doubt that he has the capacity to instruct a solicitor in respect of his views. BL told me "I think Mum is perfect. I think she has done nothing wrong – she's gone past the perfect stage. If she had a break down she lives in supported accommodation with trained staff. I see no reason why we can't live there with her. I really really want to go home to my mum and would do anything to achieve that. I'd do anything I could to make that happen. I think she's achieved all she had to, to get to that standard. I don't want to live with dad; I would like to have contact with dad without social workers there. If I can't live with dad or have unsupervised contact with dad I want to see him. I want to stay with mum, not foster care. I knew from the start of foster care, that I wanted to go back to Mum. Mum has got so much better from the person who couldn't care for us to the person who can. She's got a job, supported accommodation, she takes control in contact."
85. I consider it to be a serious failing that these two children were not separately represented in these proceedings earlier than they have been. Whilst they may still have requested to meet me even if they had been represented, a number of the questions that they had of me could have been addressed by an advocate acting on their behalf, they could have been given advice and reassurance and would have had a greater understanding of the Court process which I consider would have been of advantage to them in allaying some of their anxieties in the lead up to the final hearing. Each of these children approached their meeting with me as an opportunity to argue and advocate their cases to return home. I got the sense that they had prepared for their meeting with me and had approached the meeting as though this was a hearing at which they were forced to represent themselves and put forward their arguments to me for why they should each return home.

I consider that they would not have felt the need to put their positions to me in the forceful way that they did, had they known that they had the benefit of an advocate in Court to argue their cases and ask any questions they had. I hope that they each went away from their meeting with me reassured that they had been listened to but I have no doubt that each of them must have felt frustrated that no one was advancing their cases for them. I also consider it likely that had they known that they would be represented during the final hearing, their meeting with me would have been very different, far less formal and with far less of an emphasis on them carrying the weight of responsibility to persuade me of their views. I made clear to the children that their wishes and feelings could not be determinative and that although they were important, ultimately it was my decision and not theirs as to where they lived. Due to the failure by those acting for the children to follow the guidelines in respect of me meeting the children, the children's expectations had not been appropriately managed before the meeting and although I have been careful to caution myself not to treat the meeting as an evidence gathering exercise, and was careful not to question the children when I met them, the meeting was not at all what I had expected when I agreed to it taking place.

86. I was particularly troubled when it emerged from the oral social work evidence that on Thursday 26th April 2018, C had refused to return to her placement. The Team Manager's evidence was that this was as a result of C's frustration at the Court process, the length of time it had taken for decisions about her future to be made and her feeling that she was not being listened to within this process. The Team Manager gave evidence that C had made a series of demands that evening in exchange for agreeing to return to her placement because she did not feel that she was being listened to. One such demand had been to meet me, another was to meet her Guardian again and a third was to have her own solicitor. C had apparently been doing research into her options in this regard on the Internet. It beggars belief that after this event separate representation was not arranged for C. A clearer message from this otherwise compliant, bright and capacious child could scarcely have been sent that her voice was not being listened to. The failure to arrange separate representation for C played a part in a situation in which she placed herself at risk of harm. I consider that this was an incident, which may well have been avoided by appropriate steps being taken to secure separate representation for her much earlier in these proceedings. This matter should have been returned to Court by those acting for the children to request and make arrangements for C to meet the trial judge and for the guidelines for that meeting to be followed. Proactive enquiries should have been made to find out who the trial Judge would be rather than simply waiting to find out who it was the week before the Final Hearing.
87. On behalf of C and BL Mr D makes the following observation about the needs of those children in his written submissions:
88. Both children have endured significant challenges in their lives including but not limited to:
- (a) Moving to the North East;
 - (b) Witnessing domestic violence;
 - (c) Being separated from their parents;
 - (d) Being placed in January 2017 in foster care, the configuration initially being (1) C with EL and (2) BL with ML. In July 2017 ML and BL joined their siblings in their placement;

- (e) Death of their maternal great-grandmother;
- (f) Being informed that their mother was pregnant;
- (g) Death of OL;

23. In the circumstances, the children both need:

- (a) Consistent and nurturing care;
- (b) Security and stability;
- (c) The chance to settle;
- (d) Decisions to be made regarding their future without delay; and
- (e) Counselling.

89. I agree with these observations but would add that C has also had to take on feelings of responsibility for parenting her younger siblings. Both children also suffered the death of their sibling S and C made a specific request to be able to visit her grave. During the height of the Mother's addiction to alcohol and drugs she was frequently staying out of the family home for long periods of time and returning in the early hours of the morning. She was also regularly intoxicated to the point that she could not meet the children's needs.

90. EL is now 7 years old. He had significant health needs when he was younger as a consequence of his premature birth and at the time he entered foster care he was fed via a PEG tube into his stomach. He now eats food orally and has made significant progress in respect of his health needs since being accommodated. As a younger child he used a wheelchair but his mobility is said to be good and this is not required. He has been under the care of Dr K, paediatrician in respect of his growth and development and a paediatric physiotherapy team. His gross motor skills and overall physical development is now in line with his peers and he is meeting his developmental milestones. EL has a Special Education Needs Plan at school due to him missing a large amount of school when the family moved to the North East. EL needs safe, predictable and stable care arrangements, which meet his physical and emotional needs and promote his education.

The Mother

- There are significant advantages to the children being cared for by their mother. She is their natural parent and had cared for them continuously prior to their removal to foster care.

92. The Mother's ability to meet the children's physical and emotional needs to a good enough standard when her mental health is stable and when she is not under the influence of drugs and alcohol is not in question. Her ability to protect them from exposure to domestic abuse however is in issue.

93. C and BL have expressed clear and unequivocal wishes to return to her care.

94. The Mother has engaged very well with a range of services to address her substance misuse and has moved to Ridley Villas, specialist supported accommodation for parents with drug and alcohol difficulties, to assist her to continue with that work. Ridley Villas is staffed and monitored with CCTV cameras; F would not be

permitted on the premises.

95. She has been engaged with Evolve and Rape Crisis who have offered her regular and lengthy counselling. She has completed the Freedom Programme. She commencing work with Oaktrees – an intensive daily 12 week rehabilitation programme for drug and alcohol abuse on 8th May 2018. She is highly motivated and committed to having the children returned to her care. The Mother has also engaged well with the local authority and the Children’s Guardian.
96. The Mother is supported in her quest to resume the care of the children by the staff at Ridley Villas and by the Father. The Mother can remain at Ridley Villas for up to 2 years and thereafter would be supported to find appropriate independent accommodation.
97. The Mother has made significant strides with regards to her sobriety during these proceedings, which has been confirmed by hair strand testing, she presents well and her contact with the children is of good quality and takes place in the community.
98. The Mother has had a very difficult set of life events to contend with – she suffered sexual and physical abuse during her childhood and has suffered the death of two of her children, one during these proceedings. She also suffered a rape from a stranger last year. She suffered domestic abuse during her relationship with the Father. She has therefore experienced multiple traumas in her life.
99. The issue in respect of the Mother’s ability to care for the children is one of risk and the capacity for that risk to be managed. There are three sources of risk to the children in the Mother’s case: her alcohol and substance misuse, her mental health and her relationship with the Father.
100. The Mother has had two known lapses of alcohol misuse during these proceedings – in August 2017/ September 2017 and in April 2018.
101. The Mother has suffered a very recent bereavement due to the sad death of her baby son OL in March 2018.
102. The Mother has no established support network in the North East; all of her friends and family remain living in the Kent area.
103. The Mother remains in contact with the Father and relied upon him for support in April 2018 following the death of OL, she also gave him and his parents support when his Father was critically ill and awaiting surgery during this final hearing.
104. Dr Hill does not consider that the work that the Mother has been undertaking is of the right nature and considers that she needs at least 6 months’ worth of targeted therapeutic work to address the underlying causes of her alcohol and substance misuse and poor mental health. This work is yet to commence and it is unknown how the Mother will cope with it or what the outcome of it will be. In evidence Dr Hill repeated her recommendations that M required more targeted, structured work around abuse, loss and trauma in order to sustain deeper, more meaningful cognitive and emotional change. The duration of the recommended work

would be influenced by the skill of the therapist and the availability and accessibility of the work. It was her opinion that, following the NICE guidelines, M would require 8 – 12 sessions of Cognitive Behavioural Therapy for trauma but may require multiple sessions over a longer period; weekly and probably not less than over 6 months and possibly up to 12 months. Dr Hill did not rule out the possibility of the children being rehabilitated to the care of the Mother alongside this work but did express caution about such a plan as the Mother's capacity to cope with the work proposed, which is of a wholly different nature to any work that she has previously undertaken, is untested.

105. Dr Hill considers that any plan to rehabilitate the children alongside this work would require confidence that M has the requisite coping mechanisms and emotional and physical space to process the work as well as manage the children and their needs. The Court sought to explore what the risks were if M was unable to cope and Dr Hill considered these to be relapse to drink and/or drug use, emotional instability and the potential need to be with F as "her primary attachment... her only main attachment in adulthood." The Mother has not started this work.
106. Dr Hill considers that the Mother needs a longer period of sobriety before the Court could have confidence in her ability to manage her alcohol addiction – somewhere in the region of eighteen months to two years.
107. All professionals involved in this matter, including the social worker, team manager, service manager, the rest of the care team (save for the staff at Ridley Villas) and the children's guardian view the decision as to whether the children could be safely returned to the Mother's care as a finely balanced one. However, on balance they have each concluded that all of the children should be placed in foster care and that rehabilitation to the Mother's care cannot be safely managed, even under a Care Order and even if injunctive orders are made against the Father.

The Father

108. There are considerable benefits to the children residing with the Father – prior to their removal to foster care they had always resided with him and he had always played an active role in their care. He is their natural parent.
109. The Father states that he is supportive of the Mother and her ability to care for the children.
110. The Father has undertaken courses designed to improve his parenting and address his behaviour in intimate relationships.
111. C and BL would prefer to live with him than be in foster care.
112. The Father has a very poor relationship with the children's key social worker, who he considers to be "unprofessional". The Father has behaved in a critical and negative way towards the children's foster carer, the leader of the "Caring Dads" course and the children's social worker.

113. The Father has been assessed by Dr Hill as requiring “many months” of Cognitive Behavioural Therapy to address his rigid and entrenched views, which unless changed, pose a risk of significant emotional harm to the children and preclude him from working effectively with professionals. Whether the Father can access this work and within what sort of timescales is unknown. Equally unclear is whether the work will be successful. During her oral evidence she stressed that the work would take “at least 6 months” but that such work is often not available unless it is paid for privately. The Father has not started this work.

Long term foster care

114. If this option were followed for EL then it would allow ML an opportunity to live with one of his siblings, rather than be placed on his own.

115. If placed in long term foster care, the children would have the opportunity to continue to have contact with their birth family and with each other.

116. The children would be placed with a suitably assessed foster carers, who would be able to ensure that their needs are met to a high standard and that they are kept safe from harm.

117. Trained foster carers would work with services to ensure that each child reaches their potential.

118. As looked after children they would continue to have the support of the local authority.

119. However, long term foster care would mean that the children would be cared for by professional carers, rather than belonging to a family of their own.

120. Children in foster care can experience a number of moves of placement, which can be disruptive to them. Foster care is therefore regarded as a less stable option than a placement with a family member or an adoptive placement.

121. Some children grow to resent being looked after children with the associated stigma of growing up in the care system and the continued professional oversight it entails. Being a looked after child can result in greater restrictions being placed around day to day life than other children experience.

122. If a child is placed in long term foster care, there is a possibility that they can be reunified with their birth family in the future. Whilst this can be a positive for children, there is also a risk that children seek out illicit contact with their family and can gravitate back to their care in an unplanned way, which can present a risk of harm to the child concerned.

123. There is a risk that C and indeed BL may reject their placements and seek to abscond from them, placing them at risk of significant harm.

124. C and BL are firmly opposed to this option.

Overall analysis and conclusion

125. There are a number of troubling features to this case – not least the local authority’s failure to issue care proceedings in respect of these children between 30th January 2017 and 8th June 2017. The justification for this as far as the local authority is concerned, is that although it accepts that the criteria for issuing proceedings was met, it wished to work with the Mother with a view to rehabilitating the children to her care. Whilst this is a commendable aspiration, this does not obviate the need to issue proceedings so that the care planning and arrangements for the children had the oversight of the Court and the children had the benefit of a Children’s Guardian. Proceedings were only finally issued in response to the Father’s indication that he would withdraw his consent to the children’s continued accommodation in foster care. I make clear that I make no criticism of him for adopting this stance, which was simply borne out of frustration at the delay by the local authority in bringing this matter to Court. The delay in issuing proceedings is not at all acceptable from the children’s point of view and simply served to delay the commencement of assessment work in these proceedings.
126. The children have remained voluntarily accommodated throughout these proceedings notwithstanding that the local authority has complained throughout them of its very poor working relationship with the Father and what it describes as his negative attitude towards professionals – in particular towards the children’s key social worker and the foster carer. In July 2017 the Father made an application for contact with the children pursuant to s.34 Children Act 1989. That issue proceeded by negotiation without the need for contact orders to be made but what appears clear from the evidence in this case is that the local authority acted as though it had Parental Responsibility for these children without in fact holding it during the time that the children have been accommodated and that relations with the Father in particular were so poor that the children’s placements should have been secured under the auspices of interim care orders. The making of interim care orders is an impartial step, designed to hold the balance in a case whilst assessments are carried out. Orders would not have prejudiced the position of the parents but would have formalised these arrangements and allowed the local authority to share Parental Responsibility for the children. Persistent issues have arisen throughout these proceedings in respect of contact – with the parents requesting a greater frequency and duration of contact and with the Father’s behaviour during contact being the subject of a written contract of expectations. In my view all of the parties would have benefitted from the making of interim care orders in this case, with arrangements being set out in interim care plans that could have been updated as and when changes were made, not least the children. This is particularly so because in October 2017, when the Mother’s pregnancy was revealed, the Father briefly disengaged from these proceedings. During these proceedings the Mother has suffered a rape, the loss of a baby, a significant lapse into alcohol use last Summer and a recent lapse in April 2018 following the death of her baby son. On 26th April 2018 the Mother threatened to withdraw her agreement to C’s voluntary accommodation and it took several hours of negotiation to persuade C to return to her foster care placement. On 3rd June 2018 the Mother again threatened to withdraw her voluntary agreement to C’s accommodation when C was admitted to hospital and she wished to stay with her there overnight. Ultimately an agreement was brokered. The children would have benefitted from the local authority sharing Parental Responsibility for the children during these episodes, which were not drawn to the attention of the Court at the time that they occurred.
127. There have been a series of administrative difficulties with this case – the failure by the local authority to file

its final evidence on time, its failure to invoke the Police protocol to obtain disclosure, its failure to secure information from Children's Services in Kent, difficulties with the court bundle and with producing contact recordings for the hearing which were requested by the parties, its failure to seek an extension of the Court timetable for the children.

128. The local authority filed additional evidence from the Head of Legal Services and the Director of Children's Services at the conclusion of the oral evidence to address these issues. I am grateful to them for doing so and for their apologies with regards to the difficulties encountered in this case and their commitment to lessons being learned from it.
129. In formulating my overall analysis and conclusion in this matter I have been assisted by reading and hearing evidence from a variety of sources – the local authority, Dr Hill, the Children's Guardian and from each of the parents.
130. I found BW to be a measured witness who gave helpful and considered evidence to the Court. He undertook an assessment of the children to inform whether they should be placed together or apart. He did not dissent from his written recommendations in oral evidence. His evidence was balanced and he made appropriate concessions. Plainly the decision to separate siblings is a very difficult one but I found his rationale for the division of the sibling group and for the pairings that were suggested and which ultimately form part of the care plans for the children to be thoughtful and persuasive. I accept his opinion in this regard.
131. Dr Hill is a very experienced expert witness who gave impressive evidence to the Court. I found her evidence to be insightful and fair. Her observations and assessment of the parents mirrored my own in many respects and I accept her opinion in respect of each of them, including her recommendations in respect of the work that they each require.
132. I accept Dr Hill's opinion that F poses an emotional risk of harm to the children. Dr Hill reached this conclusion in both her November 2017 and March 2018 assessments. She noted that "F's black and white, rigid thinking makes conflict with others more likely as he cannot see things from others' perspectives and is, therefore, more primed to feel antagonised by and angry at others' behaviour, particularly where this rubs up against his morals and stated values. He also externalises responsibility, finding it difficult to reflect on his own role within difficulties, over-emphasising others' short-comings instead." This opinion mirrors my own assessment of F.
133. Dr Hill concludes that F requires target worked to address his issues as his "...traits are fixed and entrenched. Change is possible but this will be gradual and require many months of weekly sessions, whereby F could be appropriately brought to reflect more upon his personal issues and problems and begin to truly accept personal responsibility as a precursor to change. Whilst it is possible, I am not confident this would occur within the foreseeable future and certainly not within a timeframe suitable for the children". I accept this opinion.

134. I found the current social worker to be an impressive and truthful witness. She clearly knows this case and each of the children well. She was able to give detailed, thorough evidence. It was clear that she was well prepared to give her evidence; her written work is of good quality although it would have assisted me if it had been updated prior to the hearing commencing, which would have avoided a lot of fresh and important information having to be elicited orally from her. I do not consider that her evidence was unfair or unprofessional. She was balanced and able to make appropriate concessions where necessary. She has continued to undertake her role under exceptionally difficult circumstances amid repeated, and in my view unfounded allegations, being made against her by the Father about the way that she carries out her work. His behaviour towards her has involved her facing a barrage of criticism, much of which is personal and all of which is unjustified. I am satisfied that he has chosen to target and blame her, quite unjustifiably, for much of the predicament he finds himself in and I commend her for continuing to perform her role despite the way that she has been treated. She came across as a robust and decisive professional who was well able to articulate her views. I accept her evidence.
135. I found the Team Manager to be clearly ‘hands on’ in her role – she had a good working knowledge of the case, had undertaken the parenting assessment of the Father herself and was actively involved in securing C’s return to foster care when she refused to return to her placement. She was open to criticism about her work and if anything, a little too quick to accept and make concessions that her analysis was lacking. Her assessment work was not completely without analysis as was suggested to her on behalf of the Father. She indicated that she found assessing the Father exceptionally difficult – probably the most difficult assessment that she had ever had to undertake – as a result of the way that he presented, his fixed agenda and his inability and/or unwillingness to answer questions asked of him and lack of focus upon the topics that needed to be addressed. I accept her evidence.
136. I found the Mother to be a likeable and at times, truthful witness who I am satisfied has worked hard in the timescales provided to her to attempt to address the issues she faces, despite the devastatingly difficult circumstances that she has faced. I make clear that I have not formulated my assessment of her solely upon her performance in the witness box. I have given myself a *R v Lucas* direction in respect of her evidence as I am satisfied that the Mother has not always been honest with professionals during the investigation into her care of the children and that she was not always truthful during her evidence. She is, on the face of it, coping with day to day life without resorting to alcohol or substance misuse to any significant degree, notwithstanding that she has continued to experience trauma during these proceedings in the form of rape and the death of a baby. It is to her great credit that she is functioning in the way that she is and that she is able to attend contact with the children and make it a positive experience for them. She has engaged well with a range of professionals during the time that the children have not been in her care and presents well in Court. I have a great deal of sympathy for her and commend her for the work that she has undertaken and the changes that she has attempted to make to improve her circumstances and therefore her prospects of having the children returned to her care.
137. However, my own assessment of the Mother mirrors that of the professionals involved in this case. I found her to be superficially understanding of the issues and willing to accept advice and support but am satisfied that her appreciation of domestic abuse in particular is fundamentally flawed, notwithstanding that she has already completed the Freedom Programme. She acknowledges that it would be helpful for her to repeat that

work. I would encourage her to do so. What her oral evidence highlighted was that she still seeks to minimise and defend the Father's behaviour. She still seeks to excuse his actions and states that he has changed. She could not articulate why it may be that the Father's contact with the children would need to be supervised. Nor could she recognise the impact of her continued contact with the Father upon herself or upon the children. She could not see the risk that it presented nor did she have any insight into the way it may make the children feel. Like the Father, she seeks to give explanations to the children to justify her continued contact with him. The parents' belief that this can all be explained as normal, and even healthy, on-going contact for 'the sake of the children' represents their distorted perceptions that they can simply ignore all that has gone before. I am satisfied that without undertaking the interventions that have been recommended to them by Dr Hill it is unlikely that either of them have significantly changed their way of functioning or their way of interacting and responding to each other.

138. The Mother is a highly vulnerable individual. Vulnerable not only because of her negative childhood experiences and the abuse she suffered as a child but also because of the abuse that she suffered as an adult at the hands of the Father. She was the victim of rape last Summer. She has suffered the loss of two babies. This multiple and repeat trauma is something that I am satisfied the Mother is yet to fully process and come to terms with. I accept the evidence of Dr Hill that the Mother requires in depth, targeted psychological intervention. This will however force the Mother to face the issues that lie at the root of her addictive behaviour. By her own account the Mother used alcohol and drugs as a coping mechanism when her sister made complaint to the Police about their father's abusive behaviour. She accepts that she "fell apart" at that time. I accept that the Mother has availed herself of services in the North East to assist and support her but share Dr Hill's concern that her use of services has included attendance for several hours of the day, often amounting to whole days, which appears to me to represent a dependence on services rather than a viable and sustainable support network. Whilst it is commendable that the Mother has accessed counselling from Rape Crisis, referred herself for drug and alcohol support services and moved into supported accommodation for parents facing substance misuse issues, what she has failed to do to date is undertake work that challenges rather than supports her and that looks to address the underlying causes of her mental health and addiction issues. I am satisfied that until and unless she is able to truly distance herself from the Father and completely separate from him she will not be able to successfully complete this work or indeed successfully complete and fully comprehend the Freedom Programme. The Father has fixed and entrenched views; he is dogmatic in his opinions. I am satisfied that any on going contact with the Father will prevent the Mother from being able to truly reflect upon her circumstances and the abusive way that he has behaved towards her and the children.

139. I am satisfied that the Father did his best to give thoughtful and relevant evidence to the Court and that he tried to answer the questions asked of him rather than 'go off on a tangent' as he had when first assessed by Dr Hill. He presented calmly and respectfully. What was however striking from his evidence was that his belief system still involves him seeking to minimise and deny his own behaviour by blaming others. He accepts two incidents of physical violence and six further occasions in which he slapped the Mother during the course of their relationship. He however, seeks to explain other occasions when violence was reported by stating that the Mother has, in his opinion, Bi Polar Affective Disorder, and that on the two occasions that she was witnessed by the Police to have injuries, she must have caused those herself. I reject his account of that as implausible. It is far more likely that the Mother presented with injuries to Police Officers following being

assaulted by the Father. I do not accept that she reported matters “to make him look bad”. The Mother failed to support any prosecutions of the Father or make witness statements against him. Had she wished to “make him look bad” she would have pursued complaints with the Police. He also seeks to deny that the children, other than C who is clearly documented as having contacted the Police to report an incident of violence, witnessed domestic abuse. I am satisfied that he accepts this because there is incontrovertible evidence that she witnessed it and was involved in an incident. What he denies are clear accounts from all of the children. His behaviour in this regard continues to minimise and deny their experiences. In response to ML’s descriptions of life at home, which implicates him in domestically abuse behaviour, he sought to accuse ML of having Autism. Again, I am satisfied that this accusation is made in an attempt to discredit ML, he also sought to blame the social worker and “possibly” the foster carer for putting these ideas in the children’s heads. I am satisfied that the children’s descriptions of an abusive home life and their recollections of feeling scared are borne out their memories of what life was like for them. I do not accept that the children have been negatively influenced in this regard. I am also satisfied, based upon the oral evidence that he gave and his behaviour to date, that he has no intention of breaking contact with the Mother – he described such a notion as “ridiculous”. It was also increasingly apparent as he gave his evidence that notwithstanding his agreement to abide by restrictions, he in fact aspires to be able to assist the Mother with child care. This was particularly obvious when he was cross examined on behalf of the Mother. Equally, in answer to questions put on behalf of C and BL he said “I’d like to have the power to make our own arrangements... everything needs to be flexible to work... why is me being on hand not in their best interests?”

140. I was greatly assisted by the evidence of the Children’s Guardian in this matter who I am satisfied has made her own independent enquiries and formulated her opinion and conclusions, separate and apart from the local authority. She explained the careful consideration that she had given to the children being returned to the Mother under care orders and the discussions she had with the social worker, team manager and Independent Reviewing Officer about that option. I accept her opinion that the risks are dynamic in this case and that it remains a significant concern that each parent is unable and/or unwilling to accept the children’s recollections of home life and that this renders the Mother unable to meet their emotional needs or be able to assist them to come to terms with their experiences. I agree with her that the Mother is avoidant and is in clear need of in depth and targeted therapy and that the Father is dismissive of concerns. I also agree with her view that the Mother would need to have successfully completed the work that Dr Hill recommends before a rehabilitation of the children could be countenanced. I accept her opinion that these children have been significantly damaged by their experiences of living with the parents and have high emotional needs. I also agree with her that the children’s need to recover from their experiences with therapeutic input must take priority and that a higher level of contact with the Father than is proposed in the care plans is likely to disrupt that. I share her concerns that the Mother is not able to recognise the risk that the Father poses and that because she cannot see the difficulty in her continued contact with him, residing at Ridley Villas does not address the risks that he poses. I agree with the Guardian that these are parents who are likely to make their own arrangements to meet up away from Ridley Villas and they are each likely to undermine a safety plan notwithstanding any protective orders that are made because they cannot accept and recognise the need for them to remain apart from each other.

141. Mr P on behalf of the Father put to the Children’s Guardian that this was not a classic domestic abuse case because the Father did not seek the Mother out and perpetrate violence towards her. Whilst I accept the latter

proposition I disagree with the former. This case does involve many of the classic features of domestic abuse and coercive control. The Father's presentation and belief system and the circumstances of the case as a whole is indicative of domestic abuse; this includes:

- (a) Minimising, denying and blaming – the Father making light of the domestic abuse, denying that it happened, shifting responsibility onto the Mother for it and saying that she caused it as a result of being in his words “repetitive” or as a result of her substance misuse.
- (b) Isolation – the move of the family away from the Kent area to the North East effectively isolated the Mother and the children from all of their family and friends save for the Father's parents who are very much aligned to him, as evidenced by the local authority's assessment of them.
- (c) Emotional abuse – trying to persuade the Mother and others that she is mentally unstable / has Bi Polar Affective Disorder to attempt to discredit her
- (d) Using the children – at the outset of this case the children, but especially C, were firmly aligned with the Father and blamed the Mother for the domestic abuse that took place

142. Domestic abuse is far wider than physical assaults. It is not about the number or frequency of physical assaults, it is about a pattern of behaviour and the mind set of those involved. When I look at the whole picture in this case, it is not as the parents wish me to accept. I am not satisfied that theirs was a happy healthy relationship until the Mother started drinking alcohol in 2016. I accept that they will have had good times and that at times the care that they provided the children was good. The children are delightful, well mannered and respectful children, some of that is a credit to their parents. However, what the Father admitted, but the Mother failed to disclose, is that he had “slapped” her on perhaps six occasions starting at the beginning of their relationship. Theirs is and was a domestically abusive relationship and that was the position not only once the Mother started drinking alcohol in 2016 but from the outset.

143. Both parents continue to minimise and deny the extent of the domestic abuse that existed and exists between them. Domestic abuse does not end when a romantic relationship ends. The parents seek to convince me that they are able to function as “mam” and “dad” and can have civil and platonic relations, which pose no risk of harm to the Mother or the children. I disagree. Theirs is an enmeshed and unhealthy relationship. They were able to monitor each other's communications by having joint access to each other's social media accounts and emails that continued until April 2018 notwithstanding that they claim to have separated in November 2017. This represents controlling behaviour. The Mother responded in a jealous way in April 2018 when the Father began to have some form of relationship with another woman. Neither is in a relationship with anyone else at the current time. The only way that the Mother felt able to end her relationship with the Father last year was to prompt him to end it by having a one-night stand with another man and to continue with the resultant pregnancy. This demonstrates an inability on her part to assert herself and stand up to him. For as long as they remain in contact with each other there remains a significant risk that they will disagree. Flashpoints for such disagreements are likely to be caused by either of them entering into new relationships and by the Mother taking decisions that the Father disagrees with. These disagreements may well escalate into physical altercations and domestic abuse and violence.

144. Despite the united front the parents present superficially, there is in fact no consensus about the role that the Father would play if any of the children were to be rehabilitated to the Mother's care. I am satisfied that the Mother is, as the Father suggested in evidence, “scared” to disagree with professionals about the need for his

contact to be supervised and his time with the children to be restricted. That was apparent when she gave oral evidence and was quite unable to explain why the children could not return to the Father's care and why he would need to be supervised around them. She was extraordinarily reluctant to say that he posed any risk to the children. Her evidence in that regard may well have been inhibited by the Father's presence in the Courtroom and the conflict that she faced in saying what she felt she needed to, whilst not giving answers that he may disagree with. At times during the course of his evidence it appeared clear from her body language and facial expressions that she disagreed with his attempts to discredit her, by for example asserting that she had Bi Polar Disorder, but notwithstanding that he did so and how insulting and degrading these unfounded accusations on his part were, she continued to sit next to him in the courtroom and present as being on good terms with him. His evidence in this regard was emotionally abusive towards her and yet she simply accepted it and chooses to remain in contact with him. This is not a supportive relationship; it is a manipulative and abusive one.

145. I am satisfied that the Father has no intention of really stepping back from the Mother and allowing her to live her life. There were far too many caveats and exceptions that he placed around his offers to abide by a safety plan to have any confidence that he really understands why he would need to do so. The way that he seeks to justify his involvement in the life of the Mother and of the children if they were in her care is precisely the type of heartfelt plea that will so easily manipulate the Mother and the children into permitting him to see them without restriction. There will always be an opportunity for him to make an excuse as to why it is 'perfectly reasonable' for him to be the person to assist the Mother with child care, or be a shoulder to cry on. The Father presents as very persuasive and persistent. It is this behaviour and his method of communication, the 'heartfelt pleas' and seemingly innocuous and altruistic offers of assistance that she is likely to find so difficult to resist. Riddled throughout his oral evidence were the examples by which I am satisfied he will use to manipulate her into breaching agreements and permitting contact. He presents these reasons by which she should turn to him and rely upon him in an entirely plausible and even logical way but by so doing it is evident that he does not in any way accept the risks that he poses to her or the significant harm that he is likely to cause the children.
146. I am satisfied that the Mother is conditioned to be entirely dependent upon the Father. They remain emotionally dependent upon each other. It may be that this is in part driven by the Mother's own underlying vulnerabilities but I am satisfied that those vulnerabilities have been exploited and manipulated by the Father such that it has become second nature for the Mother to rely upon the Father in times of crisis. The times that the Mother has lapsed into alcohol use has included times when she has been with the Father. This is a highly negative and destructive occurrence. Had the Father been acting in the Mother's best interests he would not have been drinking alcohol with or around her. The precipitating incident that led to these children being accommodated in foster care involved an incident of domestic violence following which the Mother felt so helpless that she attempted to take her own life. I am satisfied that this indicates the degree of control that the Father has over her and dependence she feels upon him. Her expressed fear of losing her children at that time was an acknowledgment that she could not end her relationship with the Father in the best interests of herself or her children. She saw only one way out – suicide.
147. The Father has a very negative view of the children's social worker. I am satisfied that this view has been formulated, not because she behaved in an unprofessional way, but because she has challenged him and

sought to challenge the Mother's and the children's way of thinking about him – namely to challenge their perception, no doubt influenced by the Father, that the Mother had been responsible for the abuse that she suffered and that he was justified in his behaviour towards her.

148. I consider that the parents' continued contact with each other presents a continued and a high risk of domestic abuse and that in fact theirs continues to be an abusive relationship. Until the Mother breaks free entirely from the Father she is simply unable to recognise the extent and degree of control that she is subject to. She is also unable to understand the impact of that abuse upon the children. These four children have each been the victims of that abuse. They need assistance and support to come to terms with what they have experienced and need to be able to break free themselves from mixed messages that seek to justify, explain, minimise and excuse the Father's behaviour. That cannot happen if they are to reside with the Mother who I'm satisfied will continue to promulgate her own distorted views about it to them until and unless she is able to truly break free of the Father and undertake the work she so desperately needs.
149. I am satisfied that the Mother's established coping mechanisms, namely alcohol use, a dependence on services and in times of extreme distress seeking solace in the Father's company, are likely to be those that she turns to during any targeted psychological assistance that she engages in. She simply does not have any other family or established friendships that she can rely upon in this locality; such is her isolation and vulnerability. I am not confident that such work will be successful unless and until she can find different coping strategies. To an extent this is a circular problem, as she needs the psychological intervention to identify and address her behaviours in this regard. I am satisfied that the children could not be safely placed with her whilst this work is carried out.
150. I accept that the Mother is well supported in so far as her alcohol and substance misuse is concerned – particularly because as a resident at Ridley Villas that is their area of expertise – however the underlying causes of these difficulties remain unaddressed. I accept Dr Hill's opinion that caution is required when dealing with addictions of this nature and that for the Court to have confidence that she really is on the right path, a two year period of abstinence is required. The Mother, by her own account, last drank alcohol in April 2018. I accept that that was alcohol use under exceptionally difficult circumstances but in the context of an addiction, which she accepts she has, it provides worrying evidence. As does her major relapse last Summer – less than a year ago.
151. Having seen the Mother give evidence, including evidence about the death of OL, a very recent event, there was no sign of emotion from her. I accept and agree with the key social worker's opinion that she is yet to fully grieve for the loss of her baby. Her focus, understandably, has been on these proceedings and successfully seeking the return of these children to her care. I consider it highly likely that the targeted intervention recommended by Dr Hill would serve to force the Mother to face the trauma that she has suffered repeatedly throughout her life.
152. In her oral evidence she sought to explain that now that the prosecution of her father has been discontinued/ no further action is being taken, that is effectively the end of that as far as the resurrection of those issues for her. Listening to her perspective about this has led me to the clear conclusion that she has very little understanding of the nature of the work that has been recommended for her and how difficult and

challenging that work is likely to be. She will, through that work, be forced to face grief and trauma. I accept the Guardian's evidence that the "head space" that she requires to digest this work may well not simply fit in with the hours that the children are in school. In 2016, by her own admission, she completely unravelled when her sister's complaint to the police brought up memories of her own abuse. That complete unravelling involved substance abuse, very heavy alcohol use, going out of the home for lengthy periods, returning in the small hours of the morning and effectively being unable to parent the children to any meaningful extent. It was not a 9am-3.30pm occurrence. The risk is that the work that is envisaged may trigger such a relapse. With the right kind of support in place it may not, but it is a very high risk to take and I am not satisfied that the Mother has the right sort of support in place to manage and prevent such an occurrence. If she had, she would not have turned to the Father in April 2018.

153. Of course the risks that present to these children should they be rehabilitated to the care of either of the parents must be weighed against the risks to them of being placed in foster care on a long term basis. The risk of that for EL is that he remains a relatively young child to be in the care system and that there is a risk that he will face instability and moves of placement in the future. The risks to C and BL are that they will abscond from their placements, reject the decision of the Court and seek out one or both of their parents in an unplanned and illicit way. Should they abscond from placement the risks to them in the community would be high ones. However, I accept the Guardian's assessment of these risks – I consider that these are generally compliant children who are likely to accept the decision of the Court. It may not be what they want but I am satisfied that much of the difficulty that these children have faced in the last few months is the protracted uncertainty of these proceedings. I am satisfied that it is likely that once they are made aware that the Court's decision is that it is not safe for them to live with either or both of their parents that the decision will assist them to move on and settle into foster care placements, focussing on their futures. I am satisfied that the risks posed to the children in the care of either of the parents outweigh the risks to them in foster care and that only foster care placements will give them the safe and consistent care that they need to allow them each to address their emotional needs and come to terms with their life experiences. I agree with the Guardian that the children need to be able to focus on themselves and not have to continue protecting their parents. They need to be assisted to recover from the domestic abuse that they have experienced and neither of their parents are able to help them to do that – the Mother because she is unable to recognise the domestic abuse that they have suffered and has not even begun to recover from her own experiences in that regard, and the Father because he dismisses and denies that they are the victims of domestic abuse at all.
154. I accept that there is work that each parent can do and which each is expressing a willingness to undertake however the true timescales and prospects of success of that work are unknown. I do not consider that there is a strong evidential base upon which to delay the decision making for these children any further. I am satisfied that these children have waited long enough for decisions to be made about their future care arrangements and that they need to be able to move forward and make plans without being left in limbo. A placement with the Mother during the completion of therapeutic intervention is a very high risk option for these children and one, which I cannot countenance for them. Any suggestion that they wait to see whether the Mother can engage and successfully complete the sort of targeted intervention that is required is in my view harmful in itself. The delays that they have already experienced in this case and the uncertainty about their futures is, I am satisfied, one of the key causes of C seeking to leave her placement. I consider that any further delays to the decision making for these children runs a high risk of a repetition of that behaviour. The

Mother's case is a speculative one, based upon unknown timescales and unknown prospects of success. It is detrimental to the welfare of these children to have to wait any longer for their futures to be decided.

155. I am satisfied that the only proportionate response to the risks posed to each of these children if placed with the Mother or the Father is a placement for each of them in local authority foster care. Such a placement is necessary for their own safety; to protect them from further exposure to domestic abuse and emotional harm and to allow them to have their individual and significant emotional needs to be met. They need to be in a neutral placement, free from the negative influences of either of the parents who I am satisfied will each try to minimise, excuse, deny and/or avoid addressing the abuse that they have experienced and who will be quite unable to assist them to make sense of their experiences and to recover from them.
156. I agree with the unanimous professional opinion that C is in need of domestic abuse work to assist her to recognise the extricate herself from her parents' negative and abusive relationship and to enable her to process her experiences without being manipulated by the Father or having to feel responsible for protecting the Mother and her siblings. This work could not be successfully achieved if she was to live with either of her parents.
157. I am satisfied that if any of these children were to live with the Mother, her needs would eclipse theirs and rather than be able to focus on their own recovery, they would be simply attempting to support hers, that is plainly not in their best interests. C and BL are children who are presently still bound up in feelings of responsibility for and loyalty towards their parents. Understandably they recognise the hard work and progress that the Mother has made and consider that she should be rewarded for that but I consider that their wishes and feelings are driven out of a sense of responsibility towards their parents and a prioritisation of the needs of their parents above their own.
158. The needs of the parents have, in my view, overshadowed the needs of these children for far too long. Now is the time for the children to have their own needs met, free from the worry and feelings of responsibility for their parents. For that reason, I endorse the care plans that I have been provided with, including the contact proposals for each parent.
159. I accept the recommendations of BW in so far as the separation of the siblings is concerned. This recommendation has been supported by the care team, the IRO and the Children's Guardian. Separating siblings is not a step that any Court sanctions lightly but I accept that it is not in the best interests of these children to continue to remain placed together in one placement. Should C continue to be placed with EL then there is a risk that she will continue to attempt to parent him and take responsibility for his welfare. I am satisfied that being placed with him continues to distract her from focussing on her own needs. I accept BW's analysis that the extent of the rivalry and disagreements between ML and BL goes above and beyond ordinary sibling rivalry and that the difficulties between them are exacerbated by their diametrically opposed views of their parents. C and BL's desire to return home and very positive perceptions of their parents are not shared by ML who has very strong opinions to the contrary. This is a source of conflict between the children and has the capacity to destabilise their placements. C and BL's views also have the capacity to destabilise EL's placement and thwart his ability to form attachments with his carers. It is not in ML's best interests for him to be placed alone and his positive views of foster care are likely to assist EL to settle into

his placement. For all of these reasons I am satisfied that C and BL should be placed together in one placement and that ML and EL should be placed together in another. I approve the contact proposals for the children to have regular sibling contact, separate to their parents, facilitated by their carers, which should be regularly reviewed under the Looked After Children procedures.

160. I consider that monthly contact for the Mother is an appropriate level of contact which meets the children's best interests and strikes the right balance in allowing them to enjoy seeing her on a regular and predictable basis, whilst permitting them to invest in their long term placements and focus upon their own individual recoveries from the abuse that they have suffered. I acknowledge that the children want to see their Mother and enjoy the contact that they have with her but the children need to be given the opportunity to move on from their desires to be rehabilitated to her care and need physical space and time to allow them to consider their own needs and futures. The frequency and duration of this contact can and should be monitored through the Looked After Child Procedures.
161. I have had an extended opportunity to read the notes of the Father's contact with the children, in addition to reading the Court bundle and hearing evidence about it. The Father's contact has been the subject of a written agreement, which was designed to prevent him from discussing these proceedings with the children. I am satisfied that he has repeatedly broken that written agreement and that he struggles to refrain from discussing the children's future care and welfare arrangements with them, and indeed from discussing adult issues with them. The risk of emotional harm that the Father presents in contact is significant due to his black and white thinking, his very negative perceptions of the social worker and the children's foster carer. I am in no doubt that he will struggle to accept the decision of the Court and will find it extremely difficult to refrain from making his feelings known to the children. Equally, whilst I accept that it is not always the Father who initiates these topics of conversation in contact, he is unable to distract the children or appropriately manage comments that they make. I am satisfied that until and unless he completes the work that has been identified by Dr Hill there is a significant risk that his contact with the children will provide a platform for him to undermine the stability of their placements and to continue to seek to manipulate them into accepting his perspective. His perspective is one in which he seeks to invalidate their experiences of domestic abuse, excuse his own negative and abusive behaviour and seek to blame it upon the Mother. Whilst he does acknowledge his own failings those acknowledgments are equivocal and punctuated by excuses, minimisation and deflection of responsibility onto others. I am satisfied that the priority for these children must be for them to be individually nurtured within settled, stable foster care placements and for them to be provided with therapeutic support to enable them to come to terms with their experiences and recover from the domestic abuse that they have suffered. I am satisfied that each time they have contact with the Father, even when that contact is professionally supervised, which I am satisfied it must continue to be, it represents an opportunity for him to seek to destabilise their placements and undo their progress. These opportunities should be kept to a minimum until and unless he successfully completes the identified therapeutic intervention that he needs. I am therefore satisfied that direct contact on four occasions each year is a proportionate contact plan for him which will permit the children to continue to see the Father and will meet their needs in that regard, whilst protecting them from the risk of emotional harm that such contact presents.
162. I make Care Orders in respect of all four children in favour of LA.