Improving the outcomes for children in care is a goal shared by practitioners, managers, policy managers, children and young people and their carers which in recent years has been central to legislation and government policy. An important means of achieving this is through creating and supporting a workforce that is skilled, knowledgeable and confident in meeting the needs of each individual looked after child. The task is not easy and for front line practitioners, with their hectic daily schedule, finding the space to reflect on practice, consider new ideas and keep up to date presents challenges.

As a contribution to the process of informing the workforce of new policy initiatives and promoting discussion and reflection on good practice, the National Children’s Bureau has organised a series of regional based events for practitioners working with looked after children. Supported by the strategic grant from the former Department for Children, Schools and Families, this programme has taken place over a three year period starting in 2008. The events have provided participants with information on key policy issues and developments and the opportunity to share regionally based work related to those policy areas and other aspects of work with looked after children. Attendees were given the opportunity to hear from speakers on specific topics that relate to their work with looked after children.

The programme for each regional event has consisted of:
- A presentation by the government regional office responsible for the event’s location, outlining the latest national government policies and initiatives in relation to looked after children, followed by a summary of what is being done regionally to implement these policies.
- Presentations by specialist practitioners on key issues in relation to looked after children.
- Round table discussion groups on the topic of the day and how local practitioners are addressing the issues raised.

This briefing contains a selective account from the range of presentations made across regional events between October and December 2010, the third and final year of the Looked after Children Practice Exchange Network.

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<td>Birmingham</td>
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Attendees came from across the private, public and voluntary sectors and included social workers, residential workers, teachers, health and education professionals.
Topics included:
- Restorative approaches to managing behaviour and offending
- social pedagogy
- social work practice pilots
- supporting young people at risk of sexual exploitation
- multi-system therapy
- resilience.

Overview of current policy

Care planning for looked after children and care leavers

The Department for Education has published regulations and guidance to improve the quality and consistency of care planning, placement and case review for looked after children. There are also regulations and guidance available to improve the care and support provided to care leavers, provide clarity around short-breaks and guidance on the statutory ‘sufficiency’ duty placed on local authorities, which is intended to ensure that every local authority has secured sufficient accommodation to meet the needs of their looked after children. The full set of regulations and guidance will come into force on 1 April 2011.

http://www.education.gov.uk/childrenandyoungpeople/families/childrenincare

NICE and SCIE guidance

The National Institute of Clinical Excellence and The Social Care Institute for Excellence have developed evidence-based guidance on promoting the physical and emotional health and well-being of looked after children and young people.

Key messages are:
- Place children at the heart of decision making. Any placement moves must be due to the child’s needs and not the consequence of poor planning. Choice must not be dictated by funding implications.
- Provide a framework for agencies to access information on how best to support children with specific needs, including asylum seeking children, in a more effective way.
- Provide support to looked after young people in further and higher education so that they have the same opportunities in the workplace as their peers.
- Ensure health information is accurate and up to date and this is not lost when young people move on or change placements.
- Promote and support life story work.
- Promote better inter-agency working to ensure that information follows a child if they change placement or move on.
- Regulators and inspectors should monitor and audit all key agencies responsible for looked after children.
- Universal training for social workers, independent reviewing officers, primary carers and other professionals.
- Ensure carers have access to support and mental health services to promote placement stability.
- Ensure there is a flexible and responsible service for care leavers.
Children’s homes: Support challenge and improve

In September 2010, Tim Loughton announced a new programme of work to drive improvements in children’s homes to be led by the sector and the department. The aim of this programme is to:

- Help narrow the gap for the most vulnerable children.
- Support local authorities to be excellent corporate parents (especially for older children who may be more likely to be placed in children’s homes).
- Help drive improvements in children’s homes which have clearly identified underperformance in certain areas of their work and promote continuing improvements.
- Develop and share evidence of good practice.
- Improve transitions to adulthood.

Revised national minimum standards and regulations for residential child care

Last year the government set out to revise the national minimum standards for children’s homes, as well as the fostering and adoption standards. Consultations took place across the sector and the new standards are intended to be ready in April 2011 alongside the regulations that have been out for consultation more recently.


At the end of 2009/10 there were more outstanding children’s homes and fewer inadequate homes than at any time since Ofsted became responsible for their inspection.

Overall
14% of children’s homes were outstanding,
59% good,
23% satisfactory,
4% inadequate.

Guest speakers on specialist topics

Guest speakers from across the country were invited to present at each seminar. Professionals from research and practice backgrounds shared information about their work with looked after young people and discussed how their work may be incorporated into practice in other organisations.

PSS Social Work Practice Pilot Project

In 2008 the DCSF called for expressions of interest for organisations to run social work practice pilots (SWPPs). The aim of these pilots is for organisations
to run independent social work practices to support looked after children in their area and explore whether these were able to improve outcomes for these children. SWPPs were first outlined in the Care Matters Green Paper of 2006.

There are currently five social work practice pilots operating in England.

PSS is a charity with a long history of providing support in Liverpool and they are one of the organisations running the social work practice pilots. PSS are working with 120 out of the 1,000 looked after children in Liverpool.

Available research indicates that employee owned organisations have higher productivity, greater financial performance, greater innovation and lower staff turnover. The SWP team controls its own budget and the team’s ownership of this budget is very important. In their view it allows for better planning, and promotes an approach to the work which is less hierarchical than that of a local authority.

**SWP core principles**

A number of core principles are followed by the SWP in order to improve outcomes for children and young people:

- child-centred
- funded by local authority
- accountable
- independent
- social worker led
- small.

The July 2009 PSS consultation with the children in care council in Liverpool involved young people carrying out interviews for the pilot. Staff were then selected and recruited in October and November with the first transfer of children into the Liverpool pilot taking place in December 2009. Three full-time and two part-time social workers were appointed in January 2010. The present management structure was agreed in March 2010, with the last social worker in post by May of the same year. The last case files were received in September 2010, and the Liverpool pilot is running a full caseload of 120 young people (so no more are being taken on).

The pilots are expected to end in March 2012.

**What’s actually different in practice?**

- There is now dedicated administrative support.
- There is a whole team approach.
- The team is involved in decisions around the budget.
- There is a good work environment.
- A smaller team means quick decision making.
- The team is able to work with birth parents. Securing commitment from parents is an important part of the pilot work.
- The team has more autonomy when selecting placements.
There is less bureaucracy and increased flexibility with regards to service delivery (inspections still take place, though, as with any other organisation).

Young people who turn 16 within the life of the pilot will remain with their social worker rather than being transferred over to the leaving care team.

Achievements to date

- Six children/young people have returned to their parents or in-family carers.
- The team are currently working with five sets of parents with a view to returning children to their care in the near future and signs are positive.
- Two children have been placed with in-family carers when placement with parent broke down suddenly.
- There have been significant savings in the placement budget.
- The team are working with a grandmother/foster carer to support her with a special guardianship order application and with a plan that the SWP will continue to support the placement for the duration of the pilot.
- The team obtained a therapeutic placement in February 2010 for a child with funding shared between social services, health services and the education department. A good working relationship has been established with CAMHS team as a result of this case.
- The team also has a good working relationship with Looked after Children Education Service (LACES) and National Youth Advocacy Service (NYAS).
- The establishment of a young person’s participation group.
- The team obtained personal educational allowances (PEAs) for all children.
- The team agreed that the hours of the two FSWs should be increased from 26 to 32 a week.

Challenges to the SWP involve issues around recruitment and management. Recruitment proved difficult initially, as applicants were taking a huge risk. They were not seconded from other jobs so were reluctant to put their current job at risk. The management structure is still under discussion within the SWP; the practice has grown and now needs two full time managers. Other challenges include:

- The size of the practice.
- Newly qualified staff make up over half of the team.
- Cases are more challenging than expected (72 of children and young people known presently or in the past to the CAMHS team).
- Caseloads are high given the complexity of the cases.

The ultimate challenge for SWPs is to deliver the benefits of having a secure base and secure attachments for looked after children and young people.

Supporting looked after young people at risk of sexual exploitation

Two different organisations presented on work undertaken with young people involved or at risk with sexual exploitation. One team are based within the NSPCC in London. The other team are part of a wider multi-disciplinary service in Blackburn.
Blackburn Engage Team
Simone Taylor and Lindsay Dalton

The Engage Team is a multi-agency team based in Blackburn. From 2005-8, there was a police-led operation (Operation Engage) set up to tackle young people missing from home. It was noted that the ten young people who were most frequently reported missing were children in care. Through further investigation it became apparent that some of the young people missing from home were involved in sexual exploitation.

The vision for the Engage Team is to ‘free children from sexual exploitation in a non-judgemental way, supporting children to develop their full potential in a safe environment’. The team will work to prevent involvement, protect victims and prosecute offenders.

The team comprises of people from Brook, Barnardos, CROP (Coalition for the Removal of Pimping), Lifelines and Connexions all working together to reduce child sexual exploitation.

The work stream includes:
- a media campaign (posters to promote safeguarding)
- education for professionals including:
  - ensuring that professionals understand sexual exploitation and the complexities of the grooming process
  - risk factors
  - prosecution and how to make referrals
- training around risks related to new technology e.g:
  - social networking sites
  - texting
- promoting awareness of trafficking
- group awareness sessions
- parenting work
- intelligence gathering
- health assessments
- prosecution using:
  - the Sexual Offence Act 2003
  - Child Abduction Act
  - Warning Notices

Since the team has been in operation it has worked closely with young people to provide support and enable prosecutions to be made against perpetrators.

NSPCC: Supporting looked after children at risk of sexual exploitation
Hannah Franklin and Nancy Purdy

Hannah Franklin and Nancy Purdy discussed the work that they have undertaken at the NSPCC with young people at risk of, or involved with, sexual exploitation. The NSPCC has a centre in London where young women are able to access one to one and group support. Whilst all of the young people who access the centre have been affected by sexual exploitation, support is holistic and NSPCC professionals work with young people on any aspects of their lives in which they
request help. The service accepts self-referrals as well as referrals from professionals and are clear that attendance is entirely voluntary; young people choose when and if they wish to access support.

**Services provided**

- One to one and group support.
- Services are young person led (NSPCC will try and respond to any needs that the young person identifies).
- Support for trafficked young women.
- Partnership work with other organisations including relationship building with the police.
- School sessions on safe relationships.
- Creative and fun sessions including art work and off site excursions.

**Key points raised**

- The project does not currently have the capacity to work with young men and this is recognised as an unmet need. However, there is a different project in London that provides a service for young men.
- Historically children were criminalized for their behaviour, now because of this and other work by Barnardos it is seen as a child protection issue.
- Being in care is recognised as a risk factor for child sexual exploitation.
- If the young person already has an adult they trust, NSPCC will work with the adult to help them support the young person with issues around sexual exploitation.
- Recognition that some young people have had many adults in their lives and may find it difficult to trust adults. NSPCC will work with young people to develop trust and will try and maintain the relationship for as long as the young person feels that they want that support.
- NSPCC will continue to work with the young person if they move placements or leave London. They work closely with the National Working Group for Child Sexual Exploitation and have good links with services nationwide. They will also work with the young person to access local services.
- Over 50% of young people on the current caseload are Bangladeshi young women. However, they have stated that they do not want their worker to be Bangladeshi as they are scared that they will be judged by women from their own culture.
- Many of the young women have alcohol and drug issues and end up getting involved in sexual exploitation to fund their substance/alcohol needs.
- Targeting and grooming is frequently taking place on the internet.
- There is concern about the involvement of sexual exploitation in gang initiations and at present there is little work being undertaken with gangs to prevent this behaviour.
Charlotte Levene gave an overview of a social pedagogy fieldtrip to Freiberg in Germany. Working in partnership with Jacaranda, she accompanied a group of residential managers to visit a residential school in Germany and attended university seminars on social pedagogy and experiential education.

Social pedagogy is a way of working with young people which emphasises the value of shared, lived experience. This is a key study route for many residential workers in continental Europe. The government, in partnership with Thomas Coram Research Unit has been exploring the use of social pedagogy in residential homes in the UK and there are currently pilot projects taking place across the country.

Social pedagogy is concerned with educating the whole person; social pedagogues talk about developing the head, the heart and the mind.

The fieldtrip to Freiberg enabled participants to observe social pedagogy in practice. Participants visited a residential special school and spent time with children and staff observing and experiencing social pedagogy approaches to working with young people.

Many observations and discussions took place throughout the trip. One of the most common discussions was about trust and risk taking. Participants observed that adults and young people in German, using a social pedagogical framework and approach, were each given far more autonomy, responsibility and trusted more to exercise their judgement than is the case in the UK. This prompted conversations about factors which make working in the UK relatively risk adverse. The ‘blame culture’, thought by some participants to be prevalent in England, was remarked upon as a factor in this ‘In England you are always one mistake away from your P45’.

Participants considered current training and qualifications for residential workers in the UK and whether training in social pedagogy would change people’s perception of residential child care. There was acknowledgement that the qualification would have to be adapted to reflect UK systems, history and culture, and questions were raised around whether this would be possible.

Restorative justice
Zoe McLeod, Lewisham Youth Offending Service

Zoe McLeod works for Lewisham Youth Offending Service and provided an overview of how Lewisham has worked to reduce offending by young people and has worked across the borough to promote restorative approaches. Restorative justice training has been rolled out to police officers, safer neighbourhood teams, youth offending workers, neighbourhood wardens, housing providers, children’s residential homes, parents and community members; to reduce bullying and minimise the dangers of criminalising children and young people.

Restorative justice gives people a stake in reflecting on what has happened and moving forward in a way that works better for themselves and others. In
Lewisham restorative techniques have been very useful for responding to minor offences and preventing early entry into the criminal justice system, which can become self-perpetuating. Punitive sanctions can be both counter-productive and damage the relationships necessary for subsequent constructive work.

In restorative justice the emphasis moves from a punitive one, to one based on reflection and change. People often start with questions like ‘What did you do?’ ‘Why is she crying?’ Restorative approaches acknowledge that it can be more useful and productive to establish the facts. Tone and delivery are important. Young people can find it hard to articulate feelings and reflect on the causes of events. This approach enables situations to be broken down and explored safely in a way that does not simply cause further anger or self-justification, but rather promotes reflection and change.

The following questions are commonly used in the restorative approach:
- What happened?
- What were you thinking?
- What were you feeling?
- Who has been affected and how?
- What do you need to do now?

A restorative conversation need not be a formal event. It can be an everyday chat which helps to move the young person to reflection and to take actions to change their lives and future behaviour. It can be a safe way to move forward. It is better that restorative approaches are embedded in daily practice so that issues are dealt with lower along the restorative continuum, for example in daily conversation. So a broken window does not automatically mean ‘call the police’ (though on occasion this might be the right option). For example questions such as ‘What happened at school today?’ ‘How did you feel about it/ OK?’ ‘What would you like to happen?’ can begin the process of reflection and change.

Restorative justice needs repeated training for successful implementation. Staff need to feel confident that they will be backed up by their manager if they feel abused or manipulated. If they are to expose themselves and their vulnerabilities they need to be confident they will be backed if things get difficult.

**Questions and discussions from the group**

Participants suggested that some vulnerable young people may only think of themselves and their own point of view. Discussing the incident might mean they re-visit the feelings attached and trigger further anger. It was acknowledged that such strong feelings may still be there but suggested that young people need an opportunity to explore these in a way in which they do not feel punished for feeling angry.

People raised the issue of safeguarding other children and staff and stated that young people in care have a wide range of abilities and levels of emotional literacy. The feelings of other children have to be considered, sharing/honesty can be abused, especially by young people whose experiences may have led them to be highly manipulative as a survival technique or response to pain.
People also queried whether emotionally inarticulate young people (or staff) could understand the dialogue and questions which are central to a restorative conversation. Zoe explained that questions could be re-framed in more meaningful/simpler language to suit the young person’s level of ability and that this approach has frequently been used successfully with young people with different levels of understanding.

**Resilience and the interface between care, schools and communities**

*Jonathan Stanley, National Children’s Bureau*

Jonathan Stanley provided an overview of current national policy and practice. Jonathan outlined his understanding of the current context and discussed the DFE’s ‘Improving outcomes for children and young people and families: A national prospectus’. Jonathan then explored how resilience fits into government themes about the school, community and family.

Resilience is an inclusive concept that is understood in a variety of ways and from various perspectives and connects the professional task with that of procurement /commissioning.

It provides:
- Coherence - or the ability to handle stress-related problems.
- Connectedness - and the ecological model encompassing a lifespan approach, within key settings that influence the individual's psychosocial development.

Resilient young people have:
- The capacity for positive personal development in several domains, including emotionally, intellectually and creatively.
- The capacity to form and maintain positive and respectful relationships with others.
- The ability to identify and manage one’s own emotions and to understand the feelings of others.
- Skills in communication, including assertiveness, empathy and negotiation
- The ability to solve problems, make informed decisions and accept responsibility for one’s actions.
- The capacity to set realistic but rewarding goals and to actively work toward these.

**Research suggests that three factors are important in creating an environment that promotes resilience in young people**

These are:
- An environment in which caring and support are considered important, creating a sense of connection and belonging.
- Positive expectations of the capacity and behaviour of a young person, with consistent guidelines and support to help them achieve their goals.
- Genuine opportunities for participation and chances to contribute to decision making.
For a child to develop resilience, support needs to not only take place in all settings but across all settings so that carers, educators, families and other professionals are all working towards the same tasks with the child.

**Multi-systemic therapy (MST): Young people on the edge of care**

**The MST Pilot Project – background, learning and future opportunities**

**Tom Bowerman, Leeds City Council**

The national MST project aims to stop young people coming into care and support those aiming to return to their families. MST is a cross-government initiative funded by DH, DfE and YJ. In 2007, tenders were put out and 10 were selected. The four sites in the north chosen were Barnsley, Leeds, Sheffield and Trafford.

**What is MST?**

- MST is community-based, family-driven treatment for anti-social/delinquent behaviour in young people.
- Focus is on empowering caregivers (parents) to solve current and future problems – families are the solution.
- MST ‘client’ is the entire ecology of the young person – family, peers, school and neighbourhood. Intervention takes place in the young person’s environment if behaviour change is wanted in the young person.

**Who is MST for?**

- Adolescents between the ages of 12 and 17, who have serious criminal arrest histories and are at risk for out-of-home placements of custody.
- Adolescents presenting with serious clinical problems like drug abuse, violence, or emotional disturbance.
- Most referrals come from social care.

**How is MST implemented?**

- A single therapist working intensively with four to six families at a time (at no point does any worker have more than five cases).
- A team of two to four therapists plus a supervisor.
- 24/7 team availability.
- Three to five months is the typical treatment time.
- Work is done in the community: home, school, neighbourhood and peers.
- MST staff deliver all treatment – typically no services are brokered/referred outside the MST team and they have the lead role in clinical decisions.
- Highly structured weekly clinical supervision and Quality Assurance (QA) processes.
- There is a discretionary amount of funding for families.
Messages from practice exchange sessions

Participants were asked to consider practice examples from their organisations and share these with the group. A sample of these is outlined below.

**Looked after children: Education, stability, care and leaving care**

- In at least one authority a teacher is attached to support GCSE work and university transitions. Part of the intention is to encourage children and young people to move on much later than at present. The authority still has children in care at 18/19 and they are proud of this. Connexions staff are involved and they work with housing and the transitions team from age 17 to work out what best meets the young person’s needs.
- The team set up to address education needs of looked after children placed with kinship carers.
- In another area the virtual school has been devising a training package for local schools regarding trauma and attachment.
- Work is being undertaken concerning very young looked after children and their education needs. This includes PEPs for under-fives and training around attachment for early years teachers.
- Connexions have recently built up good relations with a local college. There is a designated teacher role within the college supporting looked after young people. Non-attendance and other issues can be addressed to try and prevent early exit from college. One college has put a question on their application to ask young people if they have had any experience with the care system.

**Health**

- In one authority two specialist nurses posts support looked after children’s healthcare and offer healthcare for care leavers and children with complex needs/disabilities. Co-located within the local authority looked after children social working team; benefits include greater understanding of roles thus providing a more joined-up service.
- D Card has been developed to ensure that all looked after young people can access dentists.
- A healthy schools team is working in partnership with residential care to promote good life standards including healthy eating and physical activity.
- In one northern region a team headed by a psychologist has been established to support carers to manage placements.

**Participation**

- Children in care councils were reported to be is working well in some areas. Meet regularly with, and are genuinely owned and run by, the young people. Other areas struggle with issues such as transport and commitment by carers.

**Residential child care**

- Care staff qualifications: In one region 94% have NVQ3; 100% NVQ4 (RM)s; 92% NVQ4 (CMs/ACMs) plus all homes are receiving training in
child protection, team teach, food hygiene, handling medication, health and safety and first aid.

- Break in Norfolk now has the NVQ diploma being taught in pedagogic way, leading to a degree course at UEA.
- The Boston Trauma Centre is training up residential staff and foster carers. Where placements are at risk, they will intervene to produce a package around the child. Now have a group of well-supported carers, who are integrated into the staff team (preventing escalation into more expensive levels of care). The team is supported by a psychologist, educationalist, and therapist. Packages are designed around particular attachment and relationship issues.
- Rochdale is developing an information pack for parents of young people who are living in residential child care. The ultimate goal is to enable parents to feel committed and able to drive forward with a sense of ownership so that they feel more involved with their child in residential childcare. The goal is shared responsibility.

**Fostering**

- Collaboration of smaller local authorities now working together to form one adoption/fostering team.
- The north west region is having a fostering recruitment drive and are aiming to recruit 150 foster carers by June 2011.
- A proposed new shared adoption service across areas including Warrington, Wigan, and St. Helen’s will be up and running by summer 2011.
- Hertfordshire County Council has created a team dedicated to recruiting foster carers which has resulted in many more foster carers being recruited in the area.
- An independent fostering agency provides activity holidays for all of their children and young people.

**Joint working**

- Warrington children in care team services are co-located with other services so social workers, support workers, CAMHS social workers, psychologist, LAC education worker, virtual head and LAC nurse are all accessible and able to work closely together.
- Liverpool locality multi-agency team is based around schools. The team holds a small budget and is identifying needs amongst the looked after children population.
- In Worcestershire integrated services for looked after children includes agencies such as social workers, psychologists, nurses, schools (as appropriate), as well as carers and residential homes.
- In one area there are quarterly meetings chaired by the council involving private and local authority children’s homes managers. An excellent way to share good practice and work in partnership to develop local protocols. An example of this is the joint protocol for children who run away from care. Worked in partnership with the police and defined ‘absconding’ and ‘missing’.
Other

- North/central Lancashire: In the last 12 months there has been a new children’s support service working directly with young people on a one-to-one basis.
- Flourish is a voluntary organisation that provides looked after young people with opportunities for development through art. Flourish have put on exhibitions of young people’s work and fund young people to attend events in London.
- A team of forty specialist staff for unaccompanied asylum seeking children has been established in the north west.