



Working with children,
for children

Children's residential care review: Submission from the National Children's Bureau to the independent call for evidence

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Introduction

NCB welcomes the unprecedented attention being paid by national government to the needs of looked after children and as part of this the children's residential care review. Our submission presents evidence from our various recent work relevant to this area and calls for:

- The skills and experience needed in the residential care workforce and current challenges in securing this, to be taken into account in any reform of the sector
- Any further development of standards for children's residential care to take account of children and young people's views, including lessons from the development and implementation of the Quality Standards introduced this year
- Arrangements for minor offences committed by children in residential care to be brought in line with those in schools, to reduce unnecessary criminalisation of these vulnerable children and young people
- The role of residential settings in supporting disabled children and young people to be fully considered in this review
- A new overarching duty of continuing wide ranging support up to the age of 21 for all young people leaving care, to ensure that those leaving residential care can benefit from at least equivalent levels of support to those in 'staying put' arrangements.

About NCB:

The National Children's Bureau is a leading research and development charity that works to improve the lives of children and young people, reducing the impact of inequalities. We work with children, for children to influence government policy, be a strong voice for young people and front-line professionals, and provide practical solutions on a range of social issues.

The residential care workforce

In 2013 and 2014, in partnership with TNS BMRB, NCB carried out research on behalf of the Department for Education into the children's homes workforce.¹ It gathered information on the training, recruitment and development of staff through a census of children's homes as well as through interviews with professionals and young people working in a number of case study areas.

Professionals we spoke to described a wide range of skills and experience that they thought was important for carrying out their roles. These included specialist skills such as parenting, building trusting relationships with children and young people, and understanding how to support children and young people with learning and physical disabilities and challenging behaviour. They also included more generic but still high level skills such as assessing and managing risk and communicating effectively with children's families and other professionals. This sat alongside the

¹ White, C et al (2015), Training and developing staff in children's homes, London: Department for Education http://www.ncb.org.uk/media/1215591/r438_-_training_and_developing_staff_in_children_s_homes.pdf

need for practical skills such as IT, driving and cooking and keeping accurate records.

Young people highlighted the importance of the more personal qualities a worker should have including being friendly and fun to be with, kind, caring and interested in them, understanding, approachable and easy to talk to, but also, firm and fair.

It is perhaps not surprising that this range of skills and experience are considered important for the residential care workforce when one takes into account the needs of children and young people that are placed in residential care. Around two fifths of the children have a statement of special education needs, nearly two thirds are thought to have had clinically significant mental health difficulties and nearly three-quarters are reported to have been violent or aggressive in the past six months.² Nearly a third of children in children's homes have had six or more placements (This is almost three times higher than the equivalent number of children in foster care). They are more likely to have been absent from school or excluded from school and more likely to have been involved in criminal activity and to have a substance misuse problem.³

Given these needs and what is at stake in terms of young people's future life chances it is important that the workforce is valued and that close attention is paid to the development of their skills. However, the census found that eleven per cent of the workforce were being paid less than the living wage rate. Average pay was lower in privately-run homes than in those run by local authorities, with hourly rates of £8.52 and £12.04 respectively.

Around 92% of staff (excluding registered managers) held or were working towards a level 3 qualification (as required by regulations), with the majority holding an NVQ in Caring for Children and Young People. Staff we spoke to valued the Diploma for how it helped them to consider the wider context of their work and reflect on their practice. Some had concerns that its content was both too generic and did not reflect the true nature and demands of their work.

In terms of how they learnt and were assessed, staff preferred interactive group training to individual reading and writing modules, and were concerned that the level 3 Diploma was assessed on written rather than practical work. They felt that ongoing staff development was important and the shadowing and learning from managers could be as instructive as formal training.

Staff suggested that the qualifications framework could be made more flexible to accommodate different routes into the profession and different learning preferences. However, reflecting on their concerns about the variable quality of training they had received, they also suggested that the Department of Education or some other independent body should provide guidance and support and quality assure the content and delivery of training.

Crucially, there are problems in the sector in recruitment of the right staff. Over half of all managers said that they found it difficult to recruit staff with the appropriate level of skills and training for the advertised position. 92 per cent said this related to a lack of experience among applicants and 52 percent mentioned a lack of qualification. This broadly reflects what staff said about the limited value of the Diploma and the importance of practical experience of working with children and young people with complex needs.

² Living in Children's Residential Homes, 2012: Berridge, D., Biehal, N. and Henry, L., Research Report, DFE-RR201

³ *ibid*

In summary, the residential care workforce seems to have low pay and modest qualifications considering the importance and complexity of their work. **Plans for the future of residential care need to take account of the skills and experience needed to work to meet the typically complex needs of children and young people in these settings. However it also needs to take account of the importance of relevant, practical experience, as opposed to theory-based qualifications and, given the current low pay and recruitment challenges, it needs to remain open to people joining the profession through a number of different routes.**

Children and young people's views on Quality Standards

In 2014 we carried out a consultation with care-experienced children and young people to gather their views on what were then the proposed new Quality Standards for children's residential care. We spoke to 31 young people via three children in care councils and one national voluntary sector organisation. Young people were generally favourable towards the idea of quality standards but were concerned about compliance and monitoring.

Young people's concerns mainly focussed on how a sustained focus on ensuring compliance could be assured. They made suggestions about how quality standards could be better embedded into daily reality for residential care for example, homes being required to provide and display child-friendly versions of the quality standards and young people being involved in the commissioning process. They also said that there needed to be a requirement for swift, effective and transparent complaints processes and for information about complaints and about advocacy to be provided without young people having to ask.

Some scepticism also stemmed from awareness of the challenges of recruitment and retention in the workforce, partly reflecting the findings of our research in this area (discussed above). Particular points were made about the relationships quality standard – that it was important, but difficult to implement given that staff move between jobs regularly and may not have enough time to build relationships with individual young people.

More specific gaps identified by young people were that the children's wishes and feelings standard was not specific enough in terms of action taken as a result of children's wishes being followed up in a timely manner, and that it was not clear, taking the standards together, how young people would be supported towards their transition to leaving care and independence. The final regulations and guide do reflect on the need to feed back to children and young people but not on the need to do this promptly. The quality and purpose of care standard includes reference to the transition to independence and is further explained in the relevant section of the guide.⁴

Any further development of standards for children's residential care must take account of children and young people's views, including lessons from the development and implementation of the Quality Standards introduced this year. Particular attention should be paid to ensuring children and young people are made aware of what they can expect and have a clear route of redress when care does not meet their expectations. Attention should also be paid to ensuring children and young people have a clear understanding of how their wishes and feelings are being taken account of in the planning of their care.

⁴ Department for Education (2015), Guide to the Children's Homes Regulations, including the quality standards <https://www.gov.uk/government/publications/childrens-homes-regulations-including-quality-standards-guide>

Reducing criminalisation of young people in residential care

In 2013 and 2014 the All-Party Parliamentary Group for Children (APPGC) held an inquiry into building good relationships with the police.⁵ The inquiry heard that children in care are far more likely to enter the youth justice system and be prosecuted than other groups of children. Higher prosecution rates for children in care can in part be attributed to current practices relating to the formal police recording of incidents taking place in residential children's homes. The Home Office Counting Rules for Recorded Crime (HOCR) stipulate that "all reports of incidents, whether from victims, witnesses or third parties and whether crime related or not, will result in the registration of an incident report by the police".⁶ Given this policy, the police must record an incident and allocate a crime number if they are called to a residential children's home, resulting in far higher crime rates than for foster homes.

In 2007, the Home Office, Association of Chief Police Officers (now National Police Chiefs' Council) and the Department for Children, Schools and Families agreed a protocol for the recording of crime within a school. This protocol is set out in Annex B of the Home Office Counting Rules and provides in effect an exemption from the National Crime Recording Standards (NCRS) and HOCR. **As recommended by the APPGC, crime recording practices in residential children's homes should be brought in line with those operating in schools.**⁷ This would lead to a reduction in recorded crimes as minor incidents taking place in children's homes could be dealt with by staff on-site.

Under the schools protocol, a police officer working in a school does not have to register a crime-related incident in accordance with the NCRS and HOCR as long as: The incident does not appear on the Serious Offences List; and it takes place on school premises or property during the school opening hours, on school provided bus journeys to and from school, or on school organised trips during school hours. In the above instances, the school should deal with the incident under normal school discipline procedures.

If a parent of child asks the police to record the incident as a crime, they should be informed that in the first instance, this should be dealt with by the school and be invited to report the matter to the head teacher. When a serious incident occurs, the school should record the incident and then report this to the police, who will then record it in accordance with the NCRS and HOCR.

The role of residential settings in supporting disabled children and young people

One of the areas where a root and branch review of children's residential care could really drive important improvements is in the care and support of disabled children and young people. Thousands of children and young people whose needs, for one reason or another, are not accommodated in their own homes and communities rely on the existence of safe, effective and personalised residential

⁵ All Party Parliamentary Group for Children (2014) "It's all about trust": Building good relationships between children and the police <http://www.ncb.org.uk/what-we-do/policy/all-party-parliamentary-group/inquiry-2013-2015-children-and-the-police>

⁶ Home Office (2014) *Home Office Counting Rules for Recorded Crime*. London: Home Office, p.2. Available at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/340315/count-general-july-2014.pdf

⁷ See also All Party Parliamentary Group for Children (2015) Building Trust: One year on Progress in improving relationships between children and the police <http://www.ncb.org.uk/what-we-do/policy/all-party-parliamentary-group/inquiry-2013-2015-children-and-the-police>

care to ensure they have a good childhood and progress towards their full potential as adults. Such care must always be provided with a clear view to enabling the child or young person to live as full and integrated life as possible, working towards the provision of a care package that allows them to live in their own community.

There are huge gaps in data but indicative data tells us that in 2014, 3,855 children with statements of special educational need were in boarding schools and 11,265 children were educated in independent special schools.⁸ The average boarding costs of these children is £99,798 per child per year, rising to £167,268 for 52 week boarding placements.⁹

There is very limited information about whether these costs produce good outcomes for children and families. In fact, for many young people return to the local area on reaching the end of compulsory school is very difficult to achieve. Instead young people often move to adult placements in residential care homes or colleges out of area.¹⁰ Some of these young people will also end up in inpatient health settings.

The Department of Health review, *Transforming Care*, published following the discovery of abuse of people with learning disabilities at Winterbourne View states that “the norm should always be that children, young people and adults live in their own homes with the support they need for independent living within a safe environment. People with challenging behaviour benefit from personalised care, not large congregate settings.”¹¹ In September 2014 there were still 160 children in such settings.¹²

Young people who are in residential setting because of their disability (or a failure or local services to meet their needs) face equivalent but unique challenges and risks to those that are in residential settings for other reasons. They are made vulnerable by being placed in settings that are sometimes hundreds of miles away from home, and communication difficulties can make it hard for them to raise concerns about sub-standard care. Just like for children who have entered residential care because their complex needs cannot be met by foster carers, there is a great deal at stake when disabled children have to leave their families for specialist support. Poor provision at this stage leaves such children at risk of very poor outcomes in adulthood, long term institutionalisation and as shown by the scandal at Winterbourne View, abuse.

To ensure that some of those most vulnerable to poor outcomes can see improvements in the provision of care, the role of residential settings in meeting the needs of children with special educational needs and disabilities must be reviewed alongside its role supporting other children. Particular attention needs to be paid to when and how residential settings are best used, how this provision supports young people to transition to life in their community and how children can be kept safe whilst they are away from home.

⁸ School Census 2014

⁹ Estimated average cost in 2011 of a 52-week boarding placement in a non-maintained or independent special school, from Clifford J., Theobald C (2012) Summary of Findings: extension of the 2011 cost comparison methodology to a wider sample, NASS/Baker Tilly. Updated to reflect 2012/13 prices.

¹⁰ Cooper, V et al (2014) Early intervention for children with learning disabilities and behaviours that challenge: Briefing Paper, London: Challenging Behaviour Foundation/Council for Disabled Children

¹¹ Department of Health (2012). *Transforming Care: A national response to Winterbourne View* https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213215/final-report.pdf

¹² Health and Social Care Information Centre (2015) Learning Disability Census Report England 30 September 2014 experimental statistics (Published 29 January 2015)

Supporting for young people leaving care from a residential setting

In 2014, working with the Who Cares? Trust, Action for Children, Barnardo's, Together Trust and Loughborough University and supported by seed funding from the Department for Education's Innovation Programme we explored options for providing an equivalent of 'staying put' for young people in residential care and the potential challenges and costs that will need to be taken into account for effective implementation.¹³

As part of this, a stakeholder workshop¹⁴ identified four different options for residential care staying put arrangements:

Option One: Care leavers live in the same children's home that they were living in when they were in care. They can stay there until they are 21.

Option Two: Care leavers live in a separate building but in the same grounds as the children's home that they were living in when they were in care. They can stay there until they are 21.

Option Three: This option is like supported lodgings. Care leavers live in a **different** house to where they were living when they were in their children's home. Young people have to be 16-years-old or older to live here and will have to move from where they are living if they want to stay put until they are 21. Not everyone who lives there might be from care.

Option Four: Care leavers 'stay close'. They live independently in their own flat. It's down the road, or very close to the children's home they were living in when they left care. They have a key worker from their children's home who they know really well to help them with support. They can visit their children's home if they want – for example visiting for tea.

We consulted care-experienced young people and adults on staying put in residential care and the four suggested options. There was a general consensus that staying put should, in some form, be extended to children who are living in children's homes. Young people consistently talked about no one option being right for everyone, and the importance of being allowed to make a choice.

The young people also gave suggestions as to the type of support that care leavers would need, and how it should be provided. For instance, young people were very clear that there should be support available at all times, not just during working hours. They highlighted the need to gradually be given responsibility for aspects of their lives, the value of relationships and stability and for interactions between care leavers and younger children in the same setting to be well managed. A common challenge cited in the transition to independence was loneliness.

To ensure that young people leaving residential care are entitled to at least an equivalent level of support to those leaving foster care, there would need to be a new duty placed on local authorities. The duty must be sufficiently strong to ensure that all local authorities are in no doubt of their responsibility to commission the requisite accommodation and support, and sufficiently broad to support the offer of a range of options. Our report therefore recommends that **the Department for**

¹³ National Children's Bureau et al (2015) 'Staying Put' for young people in residential care: A scoping exercise http://www.ncb.org.uk/media/1179020/staying_put_for_young_people_in_residential_care_-_a_scoping_exercise_finalweb.pdf

¹⁴ The facilitated workshop held in October 2014 was attended by 18 stakeholders and sector experts including local authority representatives; residential care home provider representatives and representatives from the voluntary sector.

Education should develop plans for a new overarching duty of continuing wide ranging support up to the age of 21 for all young people leaving care.

Young people and the other stakeholders we engaged also gave their views on some of the potential challenges in implementing an improved offer for care leavers. Consequently the report also makes recommendations on exploring regulatory implications and options and the need for children's homes staff to develop skills and expertise to meet the needs of young people.

The report from this work also includes a chapter produced by the Centre for Child and Family Research (CCFR) at Loughborough University to explore the potential costs associated with providing staying put options to children and young people placed in residential children's homes. This also outlines the key data items and evidence base that would be required to carry out a comprehensive costing exercise to inform discussions about the national cost implications of extending staying put to young people placed in residential children's homes.