



Keeping children in care out of trouble: an independent review

Call for written views and evidence

Published: 23 June 2015

Closing date: 4 August 2015

RESPONSE FORM

Please see the end of this document for information about the review and its background. A separate response form and guidance for children and young people responding to the review are available at: www.prisonreformtrust.org.uk/carereview

Please send us your evidence by 5.00pm on Tuesday 4 August 2015.

By email: carereview@prisonreformtrust.org.uk

By post: Care review, C/o Prison Reform Trust, 15 Northburgh Street, London EC1V 0JR

For more information, contact Katy Swaine Williams, Care review co-ordinator, on 020 7251 5070.

Your contact details and data protection

You do not have to give us your name or contact details in order to take part in the review. We will still take your evidence into account. If you do give us your name and contact details, we will only use them for the purposes of the review, including to send you a copy of the review’s final report. We may also try to contact you during the review with any follow up questions arising from your evidence. Please let us know if you would prefer not to be contacted other than to receive the report.

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|----------------------------------------------------------------------------------------|---------------------------------------------------------------------|--------------|--|
| Full name | Emily Roberts, Policy Lead Renu Jainer, Consultant Paediatrician | | |
| Organisation and job title (if relevant) | Policy Lead, Royal College of Paediatrics and Child Health | | |
| Postal address | 5-11 Theobalds Road, London WC1X 8SH | | |
| Email | emily.roberts@rcpch.ac.uk | | |
| Telephone | 020 7092 6093 | | |
| Are you happy for your evidence to be published? (Please delete as appropriate) | Yes | | |
| Signed: | | Date: | |

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All evidence received will be taken into account by the review. However, not all the evidence received will appear in the final review report. Where evidence is included in the report from children and young people or their families in relation to their personal experience, it will only be published or referred to in anonymised form, from which the individuals in question cannot be identified.

The questions the review wants to address are set out below. Please cite quantitative or qualitative evidence to support your response where possible. In all your answers, please try to reflect the diverse needs and characteristics of children and young people of different genders and ethnic backgrounds, to the extent that your experience allows. Please use the space at the end of the form to add examples of best practice that you know of, and any further comments.

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| 1. How does the experience of being in care affect the likelihood of offending? |
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| 2(a) Which features of the care system increase or reduce the chances that a child or young person will offend? |
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| 2(b) What other factors (including pre-care and post-care experiences) influence the chances whether a child or young person with experience of care will offend? |
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| 2(c) When decisions are made regarding a child in need that prevent entry into the care system, such as placing a child in kinship care, what influence can that have on the chances of a child or young person offending? |
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3. Which features of the youth justice system* increase or reduce the chances that a child or young person with experience of care will get involved in the criminal justice system and/or reoffend?

** The term 'youth justice system' is intended to mean the law, policy and practice relating to the treatment of children and young people by the police, youth offending teams, courts, secure children's homes, secure training centres and young offender institutions.*

4. Are there parts of the youth justice system* that have an unfair impact on children and young people with experience of care?

** 'Youth justice system' is defined here as at question 3 above.*

5. Which features of other services, such as education, health and housing, increase or reduce the chances that a child or young person with experience of care will offend?

Looked-after children and young people (LACYP) generally have greater mental health needs than their peers, including a significant proportion who have more than one mental health condition and/or a serious psychiatric disorder^{1,2}.

A national survey of the mental health of LACYP in England¹ found that among those aged 5 to 17 years, 45% were assessed as having a mental disorder, 37% had clinically significant conduct disorders, and 12% were assessed as having emotional disorders. About two-thirds of children living in residential care were assessed as having a mental health disorder, compared with a half of those living independently, and about four in ten of those placed with foster carers or with their natural parents¹.

Looked after children are also thought to be at much greater risk than their peers of having an attachment disorder, usually associated with early and severe abuse from 'attachment figures' such as parents¹. Studies have also shown that a significant proportion of young children will already have a serious psychiatric disorder at the time they enter local authority care³.

¹ Meltzer et al. 2003. The mental health of young people looked after by local authorities in England. <http://www.ons.gov.uk/ons/rel/psychiatric-morbidity/mental-health-of-young-people-looked-after-by-local-authorities/2002-survey/mental-health-of-young-people-looked-after-by-local-authorities-in-england.pdf>

² McCann J B, James A, Wilson S and Dunn G (1996) Prevalence of psychiatric disorders in young people in the care system, BMJ 313, 1529–1530. <http://www.bmj.com/content/313/7071/1529>

³ Dimigen G, Del Priore C, Butler S, Evans S, Ferguson L and Swan M (1999) Psychiatric disorder among children at time of entering local authority care: questionnaire survey. BMJ 319, 675–675. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC28219/>

Mental health difficulties experienced by LACYP mean that they are at an increased risk of poor educational outcomes, reduced employment prospects and involvement with the criminal justice system. The provision of expert mental health services is therefore imperative for reducing the immediate and longer term impacts of poor mental health, however despite this need, many studies suggest that sizeable proportions of children in care who manifest mental health problems do not receive adequate and timely clinical assessment or access to health services.⁴

Specialist LAC Child and Adolescent Mental Health Services (CAMHS) have a vital role for reducing the chances that a child or young person who has been looked after will offend. These services are equipped with psychologists and psychotherapists with the necessary skills and experience in undertaking long term therapeutic work and building and nurturing trusted relationships with this particularly vulnerable group of children and young people; skills and expertise that are not common within mainstream mental health services. A survey by Young Minds of LACYPs experiences of mental health services emphasised a need to focus on building relationships with professionals in order to access emotional support from them⁵.

Health professionals who work with LACYP must have a solid understanding of the particular needs of this cohort with the right knowledge, skills, attitudes and values as set out in the *Intercollegiate Role Framework: Looked after children: Knowledge, skills and competences of health care staff*⁶. This can be achieved through appropriate training and professional development. If professionals are not skilled in undertaking holistic assessments it can be a missed opportunity to signpost LACYP to appropriate services, risking further delay in improving outcomes.

Health assessments of children under five years of age should include consideration of attachment behaviours and foetal alcohol spectrum disorder. Assessments for older children should include assessment of mental and emotional health including conduct disorders, depression, Attention deficit hyperactivity disorder (ADHD) and Autism spectrum disorder (ASD) behaviours. The Strengths and Difficulties Questionnaire (SDQ) is a useful validated screening tool for the assessment of mental health issues⁷.

Transfer of care from paediatric to adult services can impact on outcomes, with young people often becoming lost in the system. Without access to services to support this transition young people can end up unemployed, homeless or in custody, experiencing a downward spiral of rejection⁸. The National Institute for Health and Care Excellence (NICE) guidance *Promoting the quality of life of looked-after children and young people* sets out clear recommendations for ensuring young people are prepared for and supported in their transition to adulthood which should be followed⁹.

LACYP may also face difficulties when they are placed outside of their local authority, being less likely to receive services from CAMHS in their new location. NICE guidance recommends that LACYP should be regarded as a priority group for specialist mental health services, especially when moving from one area to another⁷.

The recently updated DH and DfE statutory guidance *Promoting the health and wellbeing of*

⁴ Tarren-Sweeny & Vetere (Eds.) *Mental Health Services for Vulnerable Children and Young People: Supporting Children who are, or have been, in Foster Care*. Routledge Advances in Health and Social Policy. New York.

⁵ https://www.youngminds.org.uk/assets/0000/1440/6544_ART_FINAL_SPREADS.pdf

⁶ http://www.rcpch.ac.uk/system/files/protected/page/Looked%20After%20Children%202015_0.pdf

⁷ <http://www.sdqinfo.org/>

⁸ NICE. 2010. *Promoting the quality of life of looked-after children and young people*. <https://www.nice.org.uk/guidance/ph28>

⁹ NICE. 2010. *Promoting the quality of life of looked-after children and young people*. <https://www.nice.org.uk/guidance/ph28>

looked after children directs local authorities, provider NHS Trusts and Clinical Commissioning Groups in England regarding the provision of care to improve long term outcomes including education, employment and training¹⁰. Adherence to this guidance coupled with accessible timely access to LAC CAMHS is vital for improving outcomes and reducing a child's chances of involvement with the criminal justice system.

6. What can be done to help children with experience of care to avoid getting involved in the criminal justice system, and who should do it?

7. What are the barriers to reform, and how might these be overcome in an environment of limited resources?

8(a) In relation to all your answers above, have you reflected the diverse needs and characteristics of children and young people of different genders and ethnic backgrounds? Please add any further comments here.

¹⁰ <https://www.gov.uk/government/publications/promoting-the-health-and-wellbeing-of-looked-after-children--2>

8(b) Please describe any examples of best practice that you are aware of, where these are not covered above.

8(c) Is there anything else you would like to say to the review team?

About the review

This independent review, chaired by Lord Laming and established by the Prison Reform Trust, was launched on 23 June 2015 to consider why looked after children are more likely than other children in England and Wales to get involved with the criminal justice system, and what can be done to help more children in care stay out of trouble.

The review team is formed from a broad cross-section of senior policy makers and practitioners, including social workers, police, magistrates, academics and other experts. It will be informed by a consultation group of children and young people who have been in care and been in trouble with the law. For more information about the review and a list of its members, go to www.prisonreformtrust.org.uk/carereview

Background

Most children in care do not get into trouble with the law. However, children and young people who are, or have been, in care are over five times more likely than other children to get involved in the criminal justice system. In a 2013 survey of 15-18 year olds in young offender institutions, a third of boys and 61% of girls said they had spent time in care. This is despite fewer than 1% of all children in England being in care. For nearly two-thirds of looked after children, the main reason they are in care is because they have suffered abuse or neglect.

The review wants to hear about your experiences, and your views, on what could change this, thereby transforming the life chances of children and young people in care.

How to respond

The review wants to hear from those who have experience of local authority care and the criminal justice system, including children and young people, their families and carers, social workers, youth offending team managers, police and local authority leads, and others who work with children in care and children in the criminal justice system.

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Guidance for children and young people who want to respond to the review, and a separate response form, can be downloaded at www.prisonreformtrust.org.uk/carereview

This revised response form was published on 3 July 2015. Please contact Katy Swaine Williams, the care review co-ordinator, on 020 7251 5070 with any queries.