

## **Ian Dickson: Submission to the Children's Home Review. (November 2015)**

I am a care leaver. I was in the care of the local authority for most of my childhood, from 1952 until 1968, and spent time in a variety of different foster care and residential placement. Some were good, and some were most definitely not so good, but this applied to both foster and residential placements. I left care without support or ongoing contact with the placing authority in 1968, and within six months was homeless. Thanks to the kindness and commitment of the foster parents who had cared for me until I was 18, I was able to return to live with them until I married in my 20's. I have no doubt that this personal kindness, unsupported by the local authority or legislation, saved my life.

I am also a retired social worker who has been in social work since 1973. I qualified in social work with a Certificate of Qualification in Social Work (CQSW) from Manchester University, and spent over 40 years as a professional social worker. I also attained my PQSW and a 1<sup>st</sup> class Honours Degree in Inspection and Regulation from Salford University. During my career, I have worked as a field social worker in local authority children and family services, as a manager in a local authority secure unit for girls, as a manager of a number of different children's homes and also as a district manager of children's residential services in two local authorities. From 1993, I specialised in the regulation and inspection of children's services, initially within the local authority, and then within the National Care Services Commission (NCSC), Commission for Social Care Inspection (CSCI) and then Ofsted. Whilst at Ofsted, I also specialised in the regulation and inspection of the secure estate for children and young people as part of a specialist team, inspecting secure children's homes and secure training centres nationally. I retired from full time employment in 2010, but have since acted as an independent advocate for looked after children and young people in conflict with placing local authority, and since December 2013 as a member of the management team of the 'Every Child Leaving Care Matters' (ECLCM) campaign.

I identify a number of key issues that have a significant impact on the quality of care afforded to children and young people in both residential care and foster care.

### **Equality and individuality of ALL children needs to be respected and prioritised.**

One of my overwhelming memories of life in care was not feeling valued. My 'care career' was spent in both children's homes and foster placements and I experienced the good and bad in both. I met children similar to me and with the same issues that I had in both care settings. Children in care are the same, with the same needs, fears, challenges and aspirations. Where they are placed often has as much to do with demands on resources as individual needs assessment. Even so, current social policy and to some degree, professional prejudice, has differentiated between children and young people in different care settings in the community. Indeed, there are different regulations different systems to monitor and regulate placements, different services and support systems in place for children in different care settings which are frequently based on placement not need or individual assessment. In my view this is contrary to the letter and the spirit of the Children Act 1989 and poor social work practice, I contend that all decision making processes related to children in the care system must begin with recognition that all children are equal, and all children need to have their needs and aspirations addressed as individuals.

The best interests of each child are paramount. All need to be treated and regarded as individuals, and their needs addressed and met individually.

### **Children and young people in all care settings need to be much more thoroughly consulted and listened to about their care and future**

My care career was many years ago, but I still recall being moved between placements without any real consultation, and being moved from a grammar school where I was settled and doing well to a high school at the other side of the city where I never settled and which set back my education by years. Sadly, throughout my social work career I have continued to see children and young people moved from place to place and taken away from significant loved ones or educational settings without their consent or agreement. Young people aged over 16 years are still being routinely compelled to move from placement frequently based on local authority policy not assessed need, and even being compelled or pressurised to leave care before they are ready. In spite of the requirements of legislation and best practice, placing authorities and providers still fail to attach sufficient weight to young people's opinions. I contend that this is a direct contributory factor to the disproportionate percentage of care leavers who subsequently are over represented in disadvantage statistics – homelessness, unemployment, involvement in the criminal justice system, suffering from acute mental health issues and even suicide.

### **Multiple moves of children in care**

Related to the above, the number of placement moves I experienced in my own care career are in double figures. This made forming positive continuous professional and personal relationships and being able to put down roots as part of any community impossible and made my transition into adult life much more difficult. It is astonishing that decades later, looked after children still experience multiple moves. A massive majority of children and young people have two and more changes of placement during their care careers. This is damaging, disruptive to any settled life and totally unacceptable.

### **Failure by planners and regulators to consider and factor in the impact on young people and placements of a young person's cumulative care experience**

In a care career that spanned about 16 years and included multiple moves, I never felt valued, loved or important, and each move imposed upon me reduced my sense of well-being and my self-worth. 'Ordinary' people live a continuous life in which each stage of their lives are related and evolve naturally. This is not true for children in the care system whose lives appear to be measured in the number of different placements. Children in the care system are people, and their lives cannot be reduced to or addressed as placement 'chunks'. Each placement, each failure to settle, each breakdown in relationships has an impact on the child. As I was so many years before, children in the care system continue to be affected by the cumulative experience of all their placements, and the cumulative effects of all previous placements can impact negatively on their current one. Together with the human need for permanency, this needs to be taken into account more rigorously when care planning and managing behaviour in order to minimise avoidable changes.

### **Separating siblings in care.**

Siblings continue to be separated too easily within the care system. I was one of six siblings who were separated between different placements in different care placements in different local authorities when I was a very small child. There was no attempt made to maintain contact between members of the family. One of my siblings was adopted and links with the rest of us severed completely, even though there was no risk presented by maintaining contact. The family were never to grow up together and were strangers as adults. It was 40 years before I met my adopted sibling for the first time. Expedient decisions taken by social workers to meet short and medium term objectives can result in long term damage. Children's lives don't end when they leave care.

Still today, larger families are being split and some siblings being fostered as others are placed in residential placements. This can cause irreparable damage to future family relationships and needs to be given far greater priority in planning and provision of care placements.

#### **Lack of therapeutic input to children across the care system.**

As a child and as a young care leaver I was never offered emotional support or the close professional relationships that would permit me to grow and develop safely. That resulted in many difficult years in adolescence and early adulthood. Although the need for individual therapy is now recognised and often included in individual care planning, a large percentage of young people in the care system still do not receive any qualified one-to-one work/therapy. Time alone cannot heal emotional wounds. The provision of therapy to young people placed within the care system needs to be more accessible, better monitored and given a higher priority. All children's homes should provide a safe and therapeutic environment where suitably qualified staff are able to offer emotional support to the vulnerable young people in their care. This is clearly not the case presently.

#### **Criminalising children in care.**

Most of my professional career as a social worker has been around the residential care of adolescent young people and the inspection and regulation of children's homes and the juvenile secure estate. I have frequently observed children and young people in children's homes and foster care being criminalised and drifting rapidly into the juvenile justice system for challenging behaviour which might be considered as a 'normal part of growing up' in ordinary families. The shift into the criminal justice system is frequently indicative of poor quality support from carers who are not trained, equipped or supported to deal with challenging behaviour and press for children to be moved, or even criminally charged in order to manage them. Residential and foster carers need to be appropriately assessed, trained, equipped and supported to ensure they can cope with young people's behaviour and young people should be carefully assessed and matched to placements and not simply slotted into available vacancies.

#### **Poor preparation for Independence for all children in care.**

When I left care at 18 years of age, I had no idea how to manage money, cook, budget, or manage domestic tasks. Perhaps more importantly, I had no idea how to deal with other people as equal and valued adults, to manage time, frustration or disappointment. I had never been taught. Life in care was about being 'done to', rather than being 'done with'. In spite of overwhelming research into the needs of young people leaving care, it remains common for children in the care system to receive little or no 'independence training' until they are 15 or even 16 years of age. It is seen as a stage rather than a normal and ongoing development from child into adult as happens in 'ordinary families'. Young people are still not emotionally or practically prepared for living in the community. Most "Pathway Plans" that I have inspected over the years have been very general and failed to critically address the practical, emotional and ongoing needs of young people. The idea of a 'pathway plan' that suddenly needs to be agreed when a child reaches 16 is not consistent with young people developing normally over time and treat young people in care setting differently than other young people. Pathway planning should not be a separate part of planning; it must be a routine part of all care planning from the day a child or young person is admitted into a care setting.

**Inconsistent behaviour management and use of restraint across the care system.**

As a residential manager and then as an inspector inspecting children's homes and the juvenile secure estate across the country, it was very evident to me that there was no single accredited and effective school of behaviour management or restrictive physical intervention across residential and foster placements in England which was mandatory for care providers to follow, fully backed by law, include clear stipulated clear methods, identified minimum staffing requirements and included clear quality control/monitoring/safeguards to ensure children are not mistreated in care. Young people are often blamed and sometimes moved as a consequence of incidents that could have been managed successfully if carers were sufficiently trained, monitored and supported. There should ideally be one accepted school of behaviour management/restrictive physical intervention that should have the force of law, and be rigorously monitored by Ofsted or a recognised professional body across residential and foster care.

**Poor recognition of critical importance of positive professional relationships.**

The one fact that is universally accepted across social work and the care of children is that the most powerful tool those working with children and young people have at their disposal to influence positive change and accelerate the healing process is positive professional relationships. It is my experience that positive professional relationships between carers and children and young people are still paid scant regard in routine practice. Children and young people continue to be moved around, and even now providers and significant others are actively discouraged from maintaining ongoing contact with young people. The 'system' does not recognise, promote or safeguard such relationships throughout the young person's care career. This can profoundly impact on the young person's capacity to form meaningful relationships and trust people in their lives and requires attention.

**Failure to recognise importance of home community of looked after children.**

Throughout this submission, I repeatedly cite the negative impact that repeated changes of placement can have on young people. As well as the number of placements, the distance of placements from the young person's identified home base can be a significant factor. Young people are still being moved to placements long distances from their home base for reasons other than risk posed by family and others if they remain in their own community. This may suit the needs of placing authorities but again is potentially damaging for children and young people, affecting their stability, capacity to maintain relationships, self-confidence and local links, and should not happen without very clear reasons and only following assessment.

**Poor access to independent advocacy and transparent complaints systems for looked after children across the care system.**

It has been my experience as a social worker and advocate for children and young people in the care system that they do not have easy access to independent advocacy and transparent complaints procedures which do not depend on carers/staff in placement and/or local authority social workers to access. Truly transparent and independent advocacy and complaints procedures are still not routine for all children and young people in the care system. This potentially places children and young people in care settings in a very vulnerable position and needs early attention.

### **Multiple changes in social workers for looked after children.**

I had so many social workers during my care career that I cannot recall most of them, and few had any significant impact on me. I did not enjoy a positive professional relationship with any of them. Throughout my career in social work, I have observed that children and young people still face constantly changing social workers during their care career, adding to their difficulties in trusting those with authority and officialdom. For children and young people for whom trust and relationships are key issues, this remains unacceptable.

### **Poor regulation, inspection and quality monitoring systems for foster care and children's homes.**

It was my experience as an independent advocate, a 'Regulation 44' visitor to several children's homes and an inspector of residential services for children for about 17 years that young people in care settings and care are still not appropriately consulted or their views properly considered and taken into account by the regulatory systems in force in care settings.

Ofsted inspections still do not actively involve young people from care and are NOT child centred. In spite of their claims, they often measure short term outputs not outcomes for young people in the care system. Not all young people in placements are consulted during inspections or during monthly monitoring visits, and young people are rarely "tracked", visited or spoken with individually across their care career and following leaving care. "Quality of care" is measured in 'chunks' based solely on current placement. Inspection and regulation remain irrelevant for many looked after children. Similarly, "Regulation 44" visits still do not involve or consult young people effectively. It is my view that the Review should address regulation/quality assurance in care settings as a matter of urgency.

### **'Placement bias' – Assumption that family based care is the better option for all young people when initial placements are considered**

It is my view that government policy has led child care practice into a generally accepted belief that family placement is invariably the best option for children needing care. I firmly contend that this should be based upon and led by the child's assessed needs and wishes. The view that 'family placement is best' is not the view of all looked after children, many of whom prefer the different care environment provided by residential care. I believe that the Review should recognise that a child's initial placement in a residential setting may indeed sometimes be a better option than foster care.

### **Poor and inconsistent mental health support and provision for looked after children and young care leavers.**

CAMHS support and mental health services for children and young people in the care system are recognised by most professionals to be inadequate. Research shows that many children and young people in all care settings have significant mental health issues that profoundly affect their ability to engage in a fulfilling and happy life and places them at significant risk. I urge the Review to address the serious lack of mental health support for these young people.

### **Quality of individual aftercare support workers for young care leavers.**

The training, qualification experience, numbers, availability and accessibility of pathway plan/personal advisors is inconsistent and inadequate nationally to meet the demands of their work with young care leavers. The provision is simply unable to address the needs of young care leavers. Those providing aftercare support need to be sufficiently resourced, trained, experienced, supported and employed in sufficient numbers to be able to address this vital area of need. I believe that the Review must urgently address this area.

### **Quality of housing, accommodation and practical support for young people leaving care.**

When I left care in 1968, I received very little practical or emotional support and within six months I was homeless. I believe based upon my professional experience of working with young people leaving care over 40 years that the situation for care leavers is even worse now. As noted elsewhere in this submission, the percentage of young care leavers represented in every disadvantage statistic - custody, homelessness, mental health, teenage pregnancy, suicide, etc. is disproportionately high as support to this vulnerable group nowhere near approaches demand. It is clearly apparent that no matter how good the care provided to children and young people whilst they are in care, the likelihood of young people failing when they leave care is massively increased if there are inadequate arrangements and resources in place to continue to support them through the transition into adulthood. I contend that any review of residential (and indeed foster) care must include reference to aftercare support and provision by all departments of government and the local authority that impact on care leavers if it is to be meaningful.

### **'Emergency' or 'crisis' placements**

Studies of reasons for placements in children's homes show that a significant percentage of all residential placements continue to be made as 'emergencies'. This practice is unacceptable on the part of both placing local authorities making the referrals and of the care providers, be they the local authorities themselves or independent providers of fostering or residential placements. Care providers may precipitate the 'crisis' by issuing 'notice' that a placement must end 'forthwith'. In some cases, when children are missing, as soon as the child returns the provider insists that the placement be terminated. These practices are potentially very damaging to vulnerable young people. Crisis or 'emergency' placements are rarely successful and by definition tend not to be planned and matched to the child's assessed needs.

### **Discriminatory leaving care policies - "Staying Put" for young care leavers.**

It continues to be my experience that young people from all care placements are still being required to leave their care settings at best when they reach 18 and often earlier. Many are ill prepared emotionally or practically to cope. In spite of 'Staying Put', many local authorities are not offering extended care in foster care to age 21 because of inadequate funding or provision. Young people in residential care and other care settings are excluded from 'Staying Put' rights by discriminatory legislation. ECLCM argue that only centrally government funded Staying Put aftercare support for ALL care leavers to age 21, enshrined in legislation and including a 'right of return' for young people who may have ill advisedly left care at or before 18, will address the crippling disadvantages faced by care leavers and reflected in national statistics. The ECLCM campaign firmly believe that this change is required if young care leavers are to be given a fair chance of sustaining the positive relationships that enable personal growth safely and support the safe transition into adulthood.

I want to see these issues addressed by the Children's Home's Review. However, I take the view that it is neither possible nor sensible to seek to review children's homes without looking at the wider issues that impact on looked after children, their carers and care leavers.

### **The vulnerability of children and young people placed in single occupancy children's homes.**

It remains quite common for young people deemed to present significantly challenging behaviour to be placed in single occupancy children's homes, staffed units in which they are the only young person placed. These homes are regulated in the same way as larger children's homes even though the children placed are potentially much more vulnerable and more dependent upon staff for access to complaints procedures, advocacy, contact with others and access to resources. The education the young people receive is often delivered 'on site' because they are unable/unwilling to attend community education facilities. I contend that education and quality of care in these homes should be more rigorously monitored than larger homes, and there is improved access provided that does not depend upon staff for the young people to have immediate contact with Ofsted and other support services.

### **Young people placed in secure settings**

I have worked as a manager in a secure children's home, and for many years was involved locally and nationally in the regulation and inspection of the juvenile secure estate. This required me to visit secure children's homes and secure training centres across England. I am very concerned that due to lack of funding, secure children's homes across England are being forced to close. This is resulting in young people being placed in Young Offenders' Institutions which do not offer the small and more therapeutic environment that can be achieved in the secure children's homes. Such YOI placements also frequently require young people to move further away from their home bases, with the resultant difficulties caused to contact with families and significant others and positive resettlement.

It is my view that the quality of care and risk of bullying, self-harm and distress to young people is greatly increased by the closure of secure children's homes and the use of YOI's for young people in custody and hope the Review addresses this as a serious issue.

The reduction in funding to local YOT teams is also making the support for young people in care settings at risk of descending into the criminal justice system much more acute.

I hope these observations prove helpful and remain happy to discuss them in greater detail

Ian Dickson