A New Vision





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It is time to refocus our vision for children and young people in and leaving care. The care system continues to fail too many children and young people, despite the evidence that care can be the right option, and provide the security, stability, and love that children need.

Removing children from harmful situations is of utmost importance, but our efforts must not end there. It is well known that most children who come into care have been seriously neglected or abused, physically, emotionally or sexually. Left unaddressed, these traumatic experiences have a severe and lasting impact over a child's lifetime.

And yet for too long, there has been insufficient focus on helping looked after children and young people recover from the psychological impact of abuse and neglect, and promoting their resilience and emotional wellbeing. As a result, the primary importance of providing looked after children with stable, warm and affectionate relationships with trustworthy adults is undermined - despite being fundamental to children's development and for achieving their potential.

The Alliance for Children in Care and Care Leavers calls for a clearer framework on what care should be aiming for, and for the gaps in the system to be addressed. We would like to see:

- 1. A statement in law that the principal aim of the care system for children and young people who remain in care is to achieve recovery and healing from past harm, and promote resilience and emotional wellbeing.
- 2. A new child-led outcomes framework for looked after children so that meeting the principal aim is properly assessed and judged.

These specific measures would support improvements in the system where they are most needed:

Greater support and training for primary carers. Carers need to be equipped to support children to overcome the impact of past experiences and to nurture safe, positive relationships with people who are important to the child, often including their birth family. High quality support will mean foster carers and key workers in children's homes are better able to provide the stability children need to grow up safe and happy; it is also crucial to ensure a successful return home, where this is the right decision for the child. All primary carers require on-going training and support. However the Alliance believes that provision for foster carers requires particular attention.

The Government should:

Review the provision of ongoing high quality training and therapeutic support for carers to support them to understand and address the emotional needs of children at every stage of their development. This should result in sustainable improvement across local areas in:

- Sufficiency of appropriate training.
- Quality and accreditation of training.
- Access to joint training for carers, social workers, teachers and health professionals.
- Access to therapeutic support for foster carers and children.

Mechanisms for assessing 'good quality care' from the child's perspective and robust assessment and measurement of children's wellbeing. Currently the system itself can act against children's welfare; placement moves can go unchallenged, and children and young people are not always listened to or do not have their wishes and feelings taken into account. Currently no wellbeing measures are adopted or used consistently at a national or local level, and the SDQ measure used to assess mental health difficulties is not used systematically to ensure problems are addressed. We need robust assessment and measurement of children's wellbeing and progress through their care experience, rather than one off outcomes, so that we understand when children are doing well and when they need more support.

The Government should:

- Measure and report annually on looked after children and care leavers' wellbeing. This should combine available data and tools, including clinically validated measures and subjective measures based on children's own views about how their lives are going.
- Undertake longitudinal analysis of data relating to looked after children's outcomes, linking the SSDA to other datasets, to identify the effectiveness of care in improving looked after children's outcomes over time. This should include improved use of the SDQ to assess mental health difficulties amongst children in care to drive service development, strategy and commissioning in their area.

Care that meets the day to day emotional needs of children supported by specialist mental health support if needed. High quality care is fundamental for helping children negotiate the impact of experiences like severe neglect and for preventing mental health problems. Looked after children in England are between four and five times more likely to develop a mental disorder than children in the general population, with abuse and neglect putting children at greater risk of poor mental health. But children in care are not currently receiving the support that they need. Robust assessment of looked after children's mental health needs, clear pathways for accessing mental health support, and sufficient provision are all lacking. This means children and their carers frequently struggle to access support.

The Government should:

- Require every Clinical Commissioning Group to appoint a lead clinician to coordinate support for looked after children's mental health, similar to the role of the virtual school head in education.
- Introduce a statutory requirement for Clinical Commissioning Groups to have corporate parenting responsibility, together with the local authorities for care planning, to ensure that a spectrum of accessible, evidence-based therapeutic services is provided, and the mental health and wellbeing needs of all children in care are routinely met in care plans.

Continuing to provide care and support when young people leave care, including for families when children return home. Care leavers should not be expected to become independent much younger than their peers, and should be supported to manage ongoing and additional challenges. Currently, support from a personal advisor stops at 21 for care leavers who are not in education or training, while it continues to 25 for those who are. Often, it is these young people who are most in need of ongoing support. This includes help with transition from children's to adults' mental health services when gaps in support are common.

The Government should:

- Ensure that all care leavers have a personal advisor until the age of 25, whether or not they are in education or training, and so that they are supported to access adult services, including mental health.
- Ensure that care leavers can access CAMHS until they are 25, unless their individual needs are better met by adult mental health services.

Most importantly, these changes will ensure that relationships - the vital golden thread in children's lives – are better supported and help children and young people to move on from the adversity they have faced. Current failings are too costly for children and society. This must change.

The Alliance for Children in Care and Care Leavers is the pre-eminent sector-wide organisation that represents all the main voluntary sector organisations that work to support children in care and care leavers. We share a commitment to improving the care system and outcomes of children and young people who spend time in care.

The Alliance is comprised of:

A National Voice Action for Children Article 39 **Barnardo's** British Association of Social Workers (BASW) Catch22 **Children's Commissioner for England Children England** CoramBAAF **Coram Voice** Family Rights Group Fostering Through Social Enterprise (FtSE) Institute of Recovery from Childhood Trauma National Association of Independent Reviewing Officers (NAIRO) National Children's Bureau (NCB) NSPCC National Youth Advocacy Service (NYAS) TACT The Care Leavers' Association The Children's Society **The Fostering Network** The Prince's Trust The Who Cares? Trust **Together Trust Young Minds** differ children in care and care leavers