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Quick reference guide

# National Institute for Health and Clinical Excellence



# Looked-after children and young people

This is a quick reference guide to NICE and SCIE's guidance 'Promoting the quality of life of looked-after children and young people'. The guidance sets out how agencies and services can work together to improve the quality of life (that is, the physical health, and social, educational and emotional wellbeing) of looked-after children and young people. The focus is on putting the child or young person at the centre of every activity that affects their life.

The term 'looked-after children and young people' is used in the guidance to mean those looked after by the State where the Children Act 1989 applies, including those who are subject to a care order or temporarily classed as looked after on a planned basis for short breaks or respite care. The guidance covers children and young people from birth to age 25, wherever they are looked after.

The guidance is for all those who have a direct or indirect role in, and responsibility for, promoting the quality of life of looked-after children and young people. This includes directors of children's services, commissioners and providers of health (including mental health) and social care services, directors of public health, social workers and social work managers, carers (including foster carers), local authorities, schools, voluntary and independent agencies, organisations responsible for the training and development of professionals, universities and colleges, regulatory bodies and inspectorates. The guidance may also be of interest to looked-after children and young people themselves, their families, prospective adopters and other members of the public.

This booklet gives an overview of the topics that the guidance covers, and will help different professional groups identify which sections of the guidance are relevant for them. The guidance is available from www.nice.org.uk/guidance/PH28 and www.scie.org.uk

#### NICE public health guidance 28

This guidance was developed by SCIE and NICE using the NICE public health programme process. NICE public health guidance makes recommendations on the promotion of good health and the prevention of ill health. SCIE identifies and spreads knowledge about good practice in social care.

The guidance should be implemented alongside other guidance and regulations (for more details see the guidance document), including:

- 'Statutory guidance on promoting the health and well-being of looked after children' (Department for Children, Schools and Families and Department of Health 2009)
- 'The Children Act 1989 guidance and regulations volume 2: care planning, placement and case review' (HM Government 2010).

Organisational structures and statutory guidance may change as a result of government policies, so the NICE/SCIE guidance uses generic terms (for example, 'commissioners of health services' in place of 'PCT commissioners').

# **Principles and values**

The recommendations in the guidance are supported by the following principles<sup>1</sup>.

- Put the voices of children, young people and their families at the heart of service design and delivery.
- Deliver services that are tailored to the individual and diverse needs of children and young people by ensuring effective joint commissioning and integrated professional working.
- Develop services that address health and wellbeing and promote high-quality care.
- Encourage warm and caring relationships between child and carer that nurture attachment and create a sense of belonging so that the child or young person feels safe, valued and protected.
- Help children and young people to develop a strong sense of personal identity and maintain the cultural and religious beliefs they choose.
- Ensure young people are prepared for and supported in their transition to adulthood.
- Support the child or young person to participate in the wider network of peer, school and community activities to help build resilience and a sense of belonging.
- Ensure children and young people have a stable experience of education that encourages high aspiration and supports them in achieving their potential.

<sup>&</sup>lt;sup>1</sup> These were based on the principles in the 'Statutory guidance on promoting the health and well-being of looked after children' (Department for Children, Schools and Families and DH 2009), the six entitlements of the National Children's Bureau 'National Healthy Care Standard' (see its website at www.ncb.org.uk/healthycare) and discussion of a quality of care index developed by David Berridge and colleagues. For details of the index, see Stein M, editor (2009) Quality matters in children's services: messages from research. London: Jessica Kingsley Publishers. Available from www.rip.org.uk/qualitymatters/resources/overview

#### Guide to the recommendations

# Strategic leadership, planning and commissioning

High-performing local authorities have strong leaders with an aspirational vision of their role as 'corporate parents'. Partnership working is at the heart of their planning and children and young people are fully engaged in the design and delivery of services.

<ul> <li>Who should take action?</li> <li>Directors of children's services</li> <li>Directors of public health</li> <li>Senior staff with responsibility for commissioning and providing health services</li> </ul>	<b>Recommendation 1:</b> Prioritise the needs of looked-after children and young people
Commissioners of health services and local authority children's services	<b>Recommendation 2:</b> Commission services for looked-after children and young people

# **Audit and inspection**

A robust audit and inspection framework ensures that looked-after children and young people remain strategic priorities.

<ul> <li>Who should take action?</li> <li>Regulators and inspectors (including the Care Quality Commission and Ofsted)</li> </ul>	Recommendation 3: Regulate services
<ul><li>Ofsted</li><li>Care Quality Commission</li></ul>	<b>Recommendation 4:</b> Inspect services for care leavers

# Care planning, placements and case review

Care planning, led by social workers, reduces the need for emergency placements by supporting the quality of the relationship between the child or young person and their carer, and increasing attachment. This also helps promote a stable education.

Who should take action?	
Directors of children's services	<b>Recommendation 5:</b> Implement care planning, placement and case review regulations and guidance

#### **Professional collaboration**

To provide effective care, professionals need to collaborate closely and share information. Multi-agency teams that are supported are better able to collaborate and focus on outcomes when handling difficult and complex situations.

<ul> <li>Who should take action?</li> <li>Directors of children's services</li> <li>Directors of public health</li> <li>Senior staff with responsibility for commissioning and providing health services</li> </ul>	<b>Recommendation 6:</b> Support professional collaboration on complex casework
<ul> <li>Directors of children's services</li> <li>Directors of public health</li> <li>Senior staff with responsibility for commissioning and providing health services</li> </ul>	<b>Recommendation 7:</b> Ensure everyone involved understands their role

# Dedicated services to promote the mental health and emotional wellbeing of children and young people in care

Early intervention to promote mental health and wellbeing can help with managing challenging behaviours and reduce the risk of placement breakdown. Flexible and accessible mental health services are needed that offer skilled interventions and have the capacity and expertise to work with children and young people with particular needs.

<ul> <li>Who should take action?</li> <li>Directors of children's services</li> <li>Commissioners of mental health services</li> </ul>	<b>Recommendation 8:</b> Commission mental health services
Commissioners and providers of mental health services	<b>Recommendation 9:</b> Ensure access to mental health services for black and minority ethnic children and young people
Commissioners and providers of mental health services	<b>Recommendation 10:</b> Ensure access to mental health services for unaccompanied asylumseeking children and young people who are looked after
<ul><li>Commissioners and providers of health services</li><li>Social work managers</li></ul>	<b>Recommendation 11:</b> Ensure access to specialist assessment services for young people entering secure accommodation or custody

# Placements for children and young people – residential care, foster care and care by family and friends

To meet the diverse needs of all looked-after children and young people, an adequate range of suitable placements is needed, including secure and custodial care. Children and young people need to be involved in decisions about placement changes, and they value honesty about which decisions they can and cannot influence.

<ul> <li>Who should take action?</li> <li>Directors of children's services</li> <li>Senior staff with responsibility for commissioning health services</li> </ul>	<b>Recommendation 12:</b> Plan and commission placements
<ul><li>Social workers and social work managers</li><li>Placement teams</li><li>Independent reviewing officers</li></ul>	<b>Recommendation 13:</b> Use current information to make decisions about placement changes
<ul><li>Independent reviewing officers</li><li>Placement teams</li><li>Social workers and social work managers</li><li>Leaving care teams</li></ul>	<b>Recommendation 14:</b> Ensure looked-after children and young people in secure and custodial settings have their care plan or pathway plan reviewed

# Sibling placements and contact

A sibling group is part of the identity of a child or young person and can help their sense of belonging, self-esteem and emotional wellbeing. Good management of sibling placement and contact is important to encourage and nurture healthy relationships, and can help children and young people manage relationships they may find difficult. 'Siblings' can include those who are not looked after and 'sibling-like' relationships that develop in a care setting.

#### Who should take action?

- Placement teams
- Social workers and social work managers

**Recommendation 15:** Support sibling placements

# Supporting babies and young children

Frequent moves and parents' physical and mental health problems can impair the ability of babies and very young children to form the attachments that lead to healthy emotional and physical development. Planning of permanent placements, based on high-quality assessments and comprehensive, flexible service provision can help promote attachment and healthy development.

<ul> <li>Who should take action?</li> <li>Social work managers</li> <li>Providers of health services (including child and adolescent mental health services – CAMHS)</li> </ul>	<b>Recommendation 16:</b> Assess the needs of babies and young children and ensure access to services
<ul> <li>Directors of children's services</li> <li>Senior staff with responsibility for commissioning and providing health services (including CAMHS)</li> </ul>	<b>Recommendation 17:</b> Ensure there are specialist services for babies and young children
<ul> <li>Directors of children's services</li> <li>Senior staff with responsibility for commissioning and providing health services (including CAMHS)</li> <li>Senior staff in fostering services and residential care</li> </ul>	<b>Recommendation 18:</b> Ensure carers and frontline practitioners working with babies and young children receive specialist training
<ul><li>Social workers and social work managers</li><li>Independent reviewing officers</li><li>Placement teams</li></ul>	<b>Recommendation 19:</b> Reduce moves and achieve permanence for babies and young children

#### Health assessments, records and information

Accurate and up-to-date personal health information is important for the wellbeing of children and young people during their time in care and afterwards. Understanding their own 'health history' is an essential part of growing up securely. Inconsistent record keeping can lead to wrong decisions by professionals.

<ul> <li>Who should take action?</li> <li>Commissioners and providers of health services</li> <li>Social work managers</li> </ul>	<b>Recommendation 20:</b> Assess the health needs of looked-after children and young people
<ul> <li>Social work managers</li> <li>All service providers including independent and voluntary sector providers</li> <li>All primary and secondary healthcare providers (including child and adolescent mental health services and adult mental health services)</li> </ul>	<b>Recommendation 21:</b> Share health information and ensure consent is obtained
<ul><li>Social work managers</li><li>Commissioners and providers of health services</li></ul>	<b>Recommendation 22:</b> Update the personal health record (red book) and ensure this follows the child or young person
Social work managers	<b>Recommendation 23:</b> Share information from assessments for court processes

# Personal quality of life

Developing a positive personal identity and a sense of personal history is associated with high self-esteem and emotional wellbeing. Life-story work – where children and young people gather information and talk about their life – can help them understand their family history and life outside care. Children and young people also need participation in the wider community to build their selfesteem and assertiveness.

<ul><li>Who should take action?</li><li>Social workers and social work managers</li><li>Independent reviewing officers</li></ul>	<b>Recommendation 24:</b> Meet the individual needs and preferences of looked-after children and young people
<ul><li>Social workers and social work managers</li><li>Independent reviewing officers</li></ul>	<b>Recommendation 25:</b> Explore personal identity and support ongoing life-story activities

#### **Diversity**

A disproportionate number of looked-after children and young people are from black and minority ethnic backgrounds, or have physical or learning disabilities. Other looked-after children and young people who may have particular needs include those who are gay, lesbian, bisexual or transgender, unaccompanied asylum seekers, those from travelling communities and those who belong to faith groups. These children and young people need special attention and expertise to champion their rights. Strategic plans need to identify how services will be commissioned to ensure these children and young people are not marginalised.

<ul> <li>Who should take action?</li> <li>Directors of children's services</li> <li>Senior staff with responsibility for commissioning and providing health services</li> </ul>	<b>Recommendation 26:</b> Ensure everyone understands diversity issues
<ul> <li>Directors of children's services</li> <li>Senior staff with responsibility for commissioning and providing health services</li> </ul>	<b>Recommendation 27:</b> Share learning about diversity
Directors of children's services	<b>Recommendation 28:</b> Appoint a diversity champion
<ul> <li>Senior staff with responsibility for commissioning health and children's services</li> <li>Directors of public health</li> </ul>	<b>Recommendation 29:</b> Produce and use a diversity profile
Directors of children's services	<b>Recommendation 30:</b> Ensure there is a diverse range of placements
<ul> <li>Social workers and social work managers</li> <li>Independent reviewing officers and their managers</li> </ul>	<b>Recommendation 31:</b> Carry out core assessments
Directors of children's services	<b>Recommendation 32:</b> Embed diversity in local plans
<ul><li>Social work managers</li><li>Providers of health services</li></ul>	<b>Recommendation 33:</b> Provide expertise relating to unaccompanied asylum-seeking children and young people who are looked after
<ul> <li>Directors of children's services</li> <li>Senior staff with responsibility for commissioning and providing health services</li> </ul>	<b>Recommendation 34:</b> Provide expertise relating to black and minority ethnic children and young people

# Supporting foster and residential care

Foster and residential care is a complex activity. Carers who feel supported by their social worker and have ready access to support services are better able to use their skills to encourage healthy relationships and provide a more secure base, and so reduce the risk of placement breakdown. These skills should be reflected in the recruitment of foster carers and residential staff, and in the training and support they receive.

<ul><li>Who should take action?</li><li>Directors of children's services</li></ul>	<b>Recommendation 35:</b> Assure the quality of foster and residential care
<ul> <li>Social workers and social work managers</li> <li>Professionals in child and adolescent mental health services</li> <li>Private and independent fostering agencies</li> </ul>	<b>Recommendation 36:</b> Train foster and residential carers
<ul> <li>Social workers and social work managers</li> <li>Professionals in child and adolescent mental health services</li> <li>Private and independent fostering agencies</li> </ul>	<b>Recommendation 37:</b> Support foster carers and their families
<ul><li>Children's Workforce Development Council</li><li>Social work managers</li><li>Independent fostering agencies</li></ul>	Recommendation 38: Train supervisors

# Care provided by family and friends

Care provided by family and friends can lead to good long-term outcomes for many children and young people. However, it can be placed under strain without adequate financial support, help with identifying services and timely access to child and adolescent mental health services.

<ul><li>Who should take action?</li><li>Department for Education</li></ul>	<b>Recommendation 39:</b> Consider developing a national strategy to implement statutory guidance for care provided by family and friends
<ul> <li>Directors of children's services</li> <li>Social work training bodies</li> <li>Senior staff with responsibility for commissioning and providing health services</li> </ul>	<b>Recommendation 40:</b> Promote care provided by family and friends

# Improving education for looked-after children and young people

Stable education that encourages aspirations and achievement improves outcomes for looked-after children and young people. This improves their opportunities for further education, employment and training. Education professionals need to be equipped with the skills, knowledge and understanding to help looked-after children and young people get the most out of their time in education.

<ul><li>Who should take action?</li><li>Training and Development Agency for Schools</li></ul>	Recommendation 41: Develop teacher training
<ul><li>Local authorities</li><li>Schools</li></ul>	<b>Recommendation 42:</b> Involve designated teachers for looked-after children and young people
<ul><li>Local authorities</li><li>Schools</li></ul>	<b>Recommendation 43:</b> Monitor the quality of education for looked-after children and young people
<ul><li>Leaving care teams</li><li>Social workers and social work managers</li></ul>	<b>Recommendation 44:</b> Support access to further and higher education
Universities and colleges	<b>Recommendation 45:</b> Support looked-after young people in further and higher education

#### Preparing for independence

The transition to adulthood for young people in care can be difficult. Services designed with young people in mind and delivered by friendly, approachable professionals can help young people find the right support and advice at the right time, to help them become independent.

<ul><li>Who should take action?</li><li>Directors of children's services</li></ul>	<b>Recommendation 46:</b> Support preparation for the transition to adulthood and moving to independent living
Directors of children's services	<b>Recommendation 47:</b> Provide leaving-care services
<ul><li>Social workers and social work managers</li><li>Leaving care teams</li><li>Designated health professionals</li></ul>	<b>Recommendation 48:</b> Conduct a comprehensive health consultation when young people move on to independent living
<ul> <li>Managers of mental health services (including child and adolescent mental health services)</li> <li>Social workers and social work managers</li> </ul>	<b>Recommendation 49:</b> Support transfer to adult mental health services

# **Training for professionals**

The experiences and needs of looked-after children and young people are not well understood by all professionals who come into contact with them. Developing national training curriculums for a wide range of professionals will help increase understanding, support high-quality care, promote educational stability and achievement, and encourage timely access to services, which will help promote emotional health and wellbeing.

<ul><li>Who should take action?</li><li>Children's Workforce Development Council</li></ul>	<b>Recommendation 50:</b> Develop a national core training module
Social Work Reform Board	<b>Recommendation 51:</b> Train social workers to support looked-after children and young people in education
Social work managers	<b>Recommendation 52:</b> Train independent reviewing officers to support looked-after children and young people in education

# Implementation tools

SCIE and NICE have developed tools to help organisations put this guidance into practice. These are available on our websites at www.nice.org.uk/guidance/PH28 and www.scie.org.uk

# **Further information**

You can download the following from www.nice.org.uk/guidance/PH28 and www.scie.org.uk

- A quick reference guide (this document) for professionals and the public.
- The guidance the recommendations and how they were developed.
- Details of all the evidence that was considered and other background information.

You can download Social Care TV films about looked-after children, with links to the guidance, at www.scie.org.uk/socialcaretv

For printed copies of the quick reference guide, phone NICE publications on 0845 003 7783 or email publications@nice.org.uk and quote N2317.

The NICE website has a screen reader service called Browsealoud which allows you to listen to our guidance. Click on the Browsealoud logo on the NICE website to use this service.

# **Related SCIE and NICE guidance**

For information about related SCIE and NICE guidance that has been issued or is in development, see the guidance document at www.nice.org.uk/guidance/PH28 or www.scie.org.uk

# **Updating the recommendations**

This guidance will be reviewed 3 years after publication to determine whether all or part of it should be updated. Information on the progress of any update will be posted at www.nice.org.uk/PH28

This guidance represents the views of SCIE and NICE and was arrived at after careful consideration of the evidence available. Implementation of this guidance is the responsibility of local commissioners and/or providers. Commissioners and providers are reminded that it is their responsibility to implement the guidance, in their local context, in light of their duties to avoid unlawful discrimination and to have regard to promoting equality of opportunity. Nothing in this guidance should be interpreted in a way which would be inconsistent with compliance with those duties.

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