

# Building a Future

*An Evaluation of Process and Outcomes of Services to Young People in Planned Residential Care Within Durham Social Services Children's Homes*

## SUMMARY OF THE RESEARCH

### *Introduction*

This evaluation was commissioned by the Aycliffe Trust in 1999 (but undertaken mostly between 2002-2003). Its main aim was to consider the outcomes for young people in planned, long-term residential care in County Durham.

The original intention had been to premise the review of outcomes primarily around the Looked After Children developmental dimensions – as contained in the Assessment and Action documentation. However, it was found that use of the system was not in a healthy state within the local authority and so an alternative approach to outcome measurement was constructed.

This incorporated an overview of the LAC dimensions alongside a broader range of factors identified by recent research as being positive and productive contributors to good outcomes from substitute care – factors related to stability, continuity, attachment and resilience.

### *How the study was conducted*

The evaluation was undertaken with a mostly qualitative methodology. It was decided that the best way to understand how and why outcomes had occurred was to gather in-depth information on a number of young people who were in residential care during a particular period.

A sample of young people were recruited from across the planned care children's homes – including three who were (at the outset) in satellite units. Their ages ranged from 11 to 18 at the start of the study.

The primary method of data collection was via semi-structured interviews – conducted face-to-face with the young people (on three occasions over the course of approximately a year) and over the telephone with their social workers and residential key workers. (Plans to include the views of parents and young person's advisors – where appropriate – were only partially fulfilled. Their limited presence within the sample led to a decision not to include them in the analysis).

This was sometimes supplemented by self-completion questionnaires – to social workers at the beginning of the study (to establish 'benchmarks' against which to measure outcomes), to young people at each interview (to gauge emotional well-being and perhaps promote discussion of more sensitive topics), and to residential key workers for an update at the halfway point of the data collection period.

The methodology proved to be extremely effective and a large amount of rich data was generated, permitting a thorough analysis of many issues.

**THE UNIVERSITY** *of York*

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# Overview of Findings

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## Overall outcomes

[‘Younger’ young people are those who were 14 or younger at the outset of the study]

- A general **improvement with persistent problems** for all the young people was somewhat negated by the difficult behaviours of a few of the ‘most troubled’.
  - In terms of the **Assessment and Action Record developmental dimensions – general overall improvement**, especially for the younger groups in the sample – but a problem with education for those in the 16 plus age group, a stagnation around issues of identity; and a lack of progress with social relationships for all the groups of young people.
  - A **positive situation with regard to placement stability**. Many indications that staff were doing their best to overcome difficulties within placements and only moving young people when absolutely necessary, or when circumstances (mostly around moves towards or into independence) made it entirely appropriate.
  - A **clarity of forward thinking** and planning and an optimism about the future – which **often diminishes over time**. Most younger young people had a long-term plan which the professionals had confidence in – many of the older group had no plan and the professionals were pessimistic about future prospects.
  - A **mixed picture of educational continuity**. All of the younger group having positive experiences – many of the older group struggling.
- In residential care most of the young people became significantly ‘safer’ – where previously they expressed their turmoil in a variety of ways (from personal problems to anti-social behaviours such as criminal offending) once settled into a planned placement these difficulties were abated, especially for the younger group.*
- The ‘flip side’ of this was that a minority of the younger group then shifted the focus for their inner upset onto those closest to them in their residential placement – mostly to staff but sometimes to other young people as well.*

## LAC Assessment and Action Records

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The research found that the use of Assessment and Action Records was in disarray and there was disenchantment with the LAC system.

Local opposition to the use of Assessment and Action Records seemed to be premised around two main factors

- lack of understanding of the purpose of the records
- disillusionment over the balance between paperwork and direct practice

It was suggested that there were two options for the local authority – a re-energisation of the LAC project to change ‘hearts and minds’ about its merit, or, serious consideration of a different system for incorporating young people’s views into the planning of their care and for properly monitoring their progress (a potential model for this was put forward in the Conclusion to the evaluation report).

## *Leaving care*

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The findings on leaving care were impressionistic given the size of the sample and the general focus of the study. Issues identified as being a cause for concern and needing fuller appraisal were –

- o problems around the Pathway Planning system – most especially a dearth of proper needs assessments prior to the construction of the Plans (and a lack of guidance on this from the local authority)
- o inconsistency in the provision of Young Person’s Advisors – leading to huge problems around their input for young people in transition from residential care
- o variability in preparation for leaving care
- o an anomaly around the disposable income of a young person in care and their likely resources once they moved on
- o a lack of aftercare support.

*Findings for individual young people in the study were explored in a number of representative case studies - these considered not only the outcomes for the individual but also the issues within their situation which had either helped or hindered their progress during the evaluation period.*

## *Conclusions*

Suggestions were made around the need to –

- **revamp and improve foster care within the area [p 174 in the report]**

“This would seem to suggest a need to recruit and train more foster carers, to seek to boost foster carers skills and perhaps cultivate a number of specialist carers with enhanced skills (and enhanced rewards), perhaps in time developing ‘treatment’ foster placements for the most damaged young people for whom fostering could be the most beneficial option. And, given the current paucity of placements within the local authority, perhaps there is a need to develop links with the private sector to seek out extra provision.”

- **have a close look at issues of identity and mental health for all young people in residential care [p 176]**

“Clearly mental health and young people in residential care is a ‘big issue’ which would merit a more detailed consideration, but there were two key themes

- o young people’s perceptions of mental health and interventions
- o the needs of professionals to better understand psychological problems and treatments

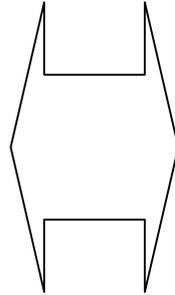
Perhaps a first step towards young people feeling less threatened – and staff becoming better informed – would be for closer relationships to be forged between the children’s homes and the STEPS and CAMHS teams. Each children’s home could have a particular link to a named person who made regular visits to talk to staff (perhaps about specific support needs for individual young people as well as to raise awareness amongst the staff team of general good practice in relation to psychological/mental health needs) and even to have informal contact with young people in the home.

This could provide a platform for future improvements in consultation and training in what seems a necessary development of specific services to boost favourable outcomes.”

## STRENGTHS

- **Outcomes for**
  - Education** – especially the under 16 group
  - Family relationships**
  - Emotional and behavioural development**
  - General, physical health**
- **Placement stability**
- **Planned admissions**
- **Long term planning for under 16s**
- **Satellite homes**
- **Care in homes**

young people report high standard of care – positive relationships with staff



## WEAKNESSES

- **Use of planning materials**

confusion over Assessment and Action Records / Pathway Plans
- **Education**

prolonging the productive involvement of over 16s
- **Mental health**

lack of therapeutic interventions – need for 'identity' work
- **Foster carers**

poor availability of carers and dearth of specialist skills
- **Long term plans for over 16s**
- **Post - 16 provision for the more needy**

what about young people not suitable for satellite?
- **Culture in homes**

staff too disrespected by young people and disempowered by managers (see section 9.9)

It was felt that the service had a number of *strengths and weaknesses* – as highlighted in the figure opposite.

Overall, there was a state of ‘productive containment’ for the younger young people – admissions were mostly planned, outcomes in some essential areas were good, placements were relatively stable, young people were happy with their care and staff and key workers were mostly optimistic on their behalf.

For the older group there were less encouraging signs – education seemed to become more fragmented and the outlook, as assessed by the professionals (and often the young people themselves), was often not positive.

Underlying this was a difficulty in engaging with all the young people to improve their core sense of well-being – they were being provided with good care, but a lack of ‘identity’ work and therapeutic intervention meant that their mental health needs were often not being addressed (perhaps storing up trouble for the future).

There was an overall problem with a lack of fostering options for those who might move from residential care prior to young adulthood – and a paucity of provision for those who were more needy but wanting to move on at 16+.

Many professionals felt that staff in the homes had had their authority undermined to an unhealthy degree – that young people were too quick to demand rights and not accept responsibilities (encouraged by a culture that had been actively promoted for some years) and that this was ultimately to their detriment in dealing with the ‘real’ world.

There was also a degree of confusion over the use and merits of the Assessment and Action Records and other issues around planning that required consideration

## *Conclusions [continued]*

- **consider the possibility of instituting a system whereby residential key workers can refer directly to other agencies [p 183]**

“In terms of the problem of referral to other agencies there would seem to be an obvious solution – establish a system which allows key workers to refer themselves (perhaps with the support their supervisor and with a responsibility to inform the social worker). This would offer one means of reducing the time it takes to connect a young person in need to a service that might help.”

- **radically reappraise the possibility of relocating the children’s homes away from the Aycliffe site [p 183]**

*Number one, it isolates you from the open world, basically; number two, you seem to get in a lot more trouble when you’re living here; number three, it’s just, really, not like a home atmosphere – you don’t get out, you don’t really go out and meet people, because people labelises you, from Aycliffe, if you live on the centre, like – so it’s a terrible place like to build a bloody centre. They all look at you like you’re the enemy – you’re the lad who smashes all the windows and that ... While you’re in this environment and you’re not getting out, you stay in the house more and it’s just a continuous circle of being pissed off all the time.*

(Young person)

“It would seem manifestly clear that the local authority should very seriously consider the possibility of relocating the children’s homes away from their current concentration on the Aycliffe site.”

- **develop new strategies for supporting over-16s through ongoing education or training [p 186]**

“This situation clearly suggests the need for a wholesale reappraisal of how young people are supported in their post-16 education paths – and perhaps most specifically, how they can be facilitated in making better informed choices and committing to courses, training or employment, since the attrition rate for those entering tertiary study was very high.

Without further work on this particular area it is difficult to propose definite answers, but one assumes there is a role in this for young person's advisors perhaps working closely with social workers and the Connexions service.”

- **look with a fresh eye at provision for the ‘most needy’ - those with ‘complex needs’ - especially when they are assessed and when they move on from care [p 187]**

“This is indicative not only of the problems around the transition from being looked after to independence and how the needs of the neediest should be met at this point (and who has responsibility for meeting them).

It also highlights how much earlier in their care career there is a necessity for comprehensive interagency assessments of young people entering residential care – which are timely (i.e. occur very soon after admission) and encompass an array of specialist professionals – i.e. to include CAMHS and therapeutic social work, as well as the more usual elements of physical health.”

## Ways Forward

A theme that emerged strongly from interviews with residential key workers and social workers was that the **'culture of care'** within the children's homes had perhaps been allowed to develop in a negative way –

*The commonly-held perception amongst those at the 'coalface' was that the balance within residential child care in the county had tipped too far in the direction of an overly protective, overly sympathetic and in many senses naïve model – a model which in the longer term often had negative impacts on those it purported to champion. [p189]*

The study suggested that managers of planned care residential homes should embark on a reappraisal of the culture within the homes – informed by an understanding of the principles of resilience theory and empowerment (see Frost *et al*, 1999, "Understanding Residential Child Care").

Some of the key factors for promoting resilience were already well implemented in care planning in Durham – but others were not. Hence priority should be given to improving

- o young people's social networks (beyond care)
- o the provision of mentors (committed and unconditionally supportive - especially where no birth parent is available to a young person)
- o the availability of activities and experiences to foster a sense of personal efficacy
- o young people's capacity to positively re-frame their adverse childhood experiences
- o exposure to challenging situations to help build coping skills
- o opportunities to 'make a difference' – either by helping others or via paid employment

In applying the ideas around empowerment the service will need to begin a participative process – including managers, residential homes staff, social workers and young people – to comprehensively reconsider issues of care and control.

Hopefully this can help

*"...restore belief in residential child care, thus furthering a practice based on engagement, negotiation and participation, a practice which may utilise different methods and approaches but not be a slave to them, being guided by the question, 'How will this empower the young person?' And finally, empowerment can bring about a practice which will not be polarised between a shallow token legalism which rejects all needs in favour of rights or conversely a crude and narrow pathologising which reduces young people to a receptacle of professionally defined needs."*

(Frost *et al*, 1999:127)

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