



Consultation on Draft Recommendations

The physical, emotional health and well-being of looked after children and young people

Full Report: April 2010

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1. Introduction and Background

NICE and SCIE are currently engaged in a 2 year work programme to produce guidance for the Department of Health on improving the physical and emotional health and wellbeing of looked after children and young people.

As part of this work programme, Action for Children was commissioned to undertake a practice survey which involved interviewing managers, practitioners and commissioners across a range of social care, education and health organisations in contact with looked after children and young people across 5 authorities in England. The survey also involved interviews with looked after children and young people.

Draft recommendations have now been produced and a consultation period is under way. In order to involve children and young people in this process, further work has been commissioned from Action for Children to go back to some of the sites where looked after children and young people were interviewed and to consult them further about how they view the relevance, usefulness, acceptability and the potential barriers of the draft recommendations.

2. Aims and Objectives

This consultation with looked after children and young people was considered important as the final guidance should be relevant not only to those who will implement it, but also to the target population itself.

The objectives of the consultation were to:

- Seek looked after children and young people's views about the recommendations, including their relevance, usefulness, acceptability, and the potential barriers and levers.
- Ask looked after children and young people whether they consider that implementing the recommendations will help to improve outcomes for looked after children and young people.
- Seek looked after children and young people's views about what will help to facilitate the implementation of the recommendations and whether they can identify potential barriers. If so, ask them what suggestions they have to overcome them.

3. Sample

The project brief acknowledged that this was a numerically limited consultation with children and young people, taking into account the resources available to the project team and the availability of children and young people to participate.

It was envisaged, in the brief, that thirty looked after children and young people would participate, including care leavers and that those invited to consultations would include children and young people who were involved in the practice survey. Where these children and young people were unavailable, then other participants from the sites would be included.

Thirty children and young people have now participated in consultation workshops held at four sites. Ten of the children and young people had also participated in the earlier practice survey.

The four sites selected for this consultation were considered to have established groups of children with the greatest range of participants in relation to age, gender, ethnicity and care status including those in foster care, residential care and independent living. In the practice survey, these groups

had also included unaccompanied young people and young people with disabilities.

The identified groups and sites have been given the same identifying code as in the practice survey and are as follows:

Site A is a county council situated in the West Midlands that covers a wide geographical area. 80% of looked after children and young people in Site A are placed within foster placements. During the practice survey a consultation took place with thirteen members of the Children in Care Council aged between 12- 19 years.

Site C is a district council in the North of England. Approximately 70% of the looked after children and young people are fostered with local authority foster carers. During the practice survey a consultation took place with twelve young people ranging from 14-19 years of age.

Site D is a small, inner city unitary with contrasts of extreme wealth and poverty. It has a large and diverse BME community. Fostering and kinship care are the placements of choice for looked after children and young people regardless of their age or placement history. There is one in borough residential unit commissioned from the independent sector. During the practice survey a consultation took place with thirteen members of a leaving care group with an age range of 16- 21 years.

Site E is a county council with one of the largest children's services divisions in England. It has responsibility for over 200 unaccompanied asylum seeking children and young people (UASCYP) with a further 600 unaccompanied asylum seeking young people supported under the Leaving Care Act 2000. During the practice survey contact was made with a voluntary sector organisation that is commissioned by Site E to provide foster care, supported lodgings and training flats for UASCYP. Although the young people known to this organisation did not take part in the practice survey, agreement was secured from Site E for them to be included in the consultation on the draft recommendations.

Background Information about the thirty children and young people participating in this second consultation is detailed in Appendix 1. This includes numbers of young people consulted at each site and details of their age range, gender and ethnicity.

The fourth consultation at Site E was attended by 8 unaccompanied young people who were all male. This reflects the gender profile for unaccompanied young people in this site where entry to UK is via the ports. It has resulted in an overall gender imbalance in the consultations with the participation of 10 females and 20 males overall.

4. Method

In carrying out the earlier practice survey, Action for Children secured research support from The Association of Directors of Children's Services. An extension to this support was gained to conduct the consultation on the draft recommendations with looked after children and young people.

Although this project brief was not categorised as primary research, the consultation adhered to the standards set out in the Department for Health Research Governance Framework for Health and Social Care and ensured that the required national standards in ethics were upheld. Additionally, Action for Children's Research Standards were applied.

The work lent itself to a qualitative approach, with workshops seen as the main method to enable looked after children and young people to discuss the relevance, usefulness, acceptability and the potential barriers of the draft recommendations.

Liaison took place with the lead professionals for the established groups for LACYP and arrangements were made concerning dates, venue etc. Support to facilitate children and young people's participation in the events included the timing of meetings, provision of expenses, use of interpreters and a voucher to value their contribution was provided. The option of having a one to one interview was also offered.

Background information about why the consultation was taking place and inviting children and young people to take part was sent to the groups' lead professionals prior to the proposed event. Consent forms were completed by the young people or a responsible adult once agreement to participate was secured. Support staff from within the children and young people's own network were identified to be available during and after the interview as required.

Once the draft recommendations were produced and opened for consultation, liaison took place with the SCIE and NICE Project Team about which ones were the most appropriate to address with looked after children and young people.

A workshop structure with topic guide was developed that considered the principles and values included in the draft consultation and clustered a number of the recommendations into several themes (Appendix 2.) These themes included the following headings:

- Getting the right help
- Contact with the people who are important to you
- Attending meetings and reviews
- Feeling settled
- Knowing your story
- Who can you call on?
- Having your say
- Growing up and Moving out - Independence Day

Each workshop lasted between 2-3 hours and the lead facilitators for these established groups were also present during the consultation. At Site C, the LAC nurse also attended the event.

Each workshop took into account the age of the children and young people taking part, their

ethnicity and their care status so that the consultation could focus on draft recommendations that had a particular relevance to them. This was because it was too overwhelming for the young people to cover too many of the recommendations within the workshop and it ensured that as wide a spread of recommendations could be looked at in the different consultations taking place.

The looked after children and young people worked either as a whole group or in small groups going through some key questions relating to each recommendation. Following the discussion, participants graded their response to the recommendation either through discussion or by placing it on a display board with a continuum line rating from one to five with a sad face at the lower end and a happy face at the higher.

The looked after children and young people were also asked their views on best ways to promote the guidance.

Written notes were taken during the workshop and note was taken of where children and young people graded the recommendation on the continuum.

At the end of the workshop, discussion notes and a summary of key points was shared with the lead professionals for the groups as well as with the children and young people to confirm content accuracy.

The analysis of the group consultation was carried out at the end of each interview.

5. Report Structure

This report presents the key findings and summary statements on recommendations from across the sites and then gives more detailed comment on the findings at each site.

The key findings are written under the headings used in the topic guide which cluster the recommendations into several themes.

The summary statements list the recommendations that received strong support. They include looked after children and young people's views about the barriers to implementing the guidance as well as their suggestions to strengthen some recommendations and gaps they have identified.

6. Key Findings across Sites

6.1 Overview

Each consultation considered recommendations of particular relevance to the children and young people taking part. This impacts on the extent to which findings can be generalised across sites. However, the majority of recommendations were considered at more than one site and several were discussed at all sites.

Looked after children and young people welcomed the draft recommendations. They scored them highly on a satisfaction scale that graded their response to the recommendation from one to five,

with one reflecting the lower and five the higher level of satisfaction. All recommendations scored three or higher with the majority scored at five.

At one site there was concern at how easy it would be to implement the recommendations and some feelings expressed that limited resources, reorganisation and heavy caseloads get in the way of best practice.

In looking at the best way to promote the guidance to looked after children and young people, most felt that this was best achieved locally through newsletters, information to foster carers and through peer groups. One group expressed a willingness to be involved in producing a DVD or similar on the guidance which could then be used to disseminate the key messages to looked after children and young people.

6.2 Getting The Right Help

In three sites, young people viewed health reviews as acceptable and embedded into current practice. In one consultation, however, young people identified the reasons why they did not attend their health reviews. These included misunderstandings about what would happen in a health review with two young people associating it with gynaecological investigations. There was also a reluctance to be lectured about smoking, diet and their life-style. In one consultation where the LAC nurse was also present, it was clear that group discussion enables some of the myths to be dispelled and results in greater likelihood of the young people participating in health reviews in the future.

Consultations in two sites had good representation from black and minority ethnic young people and, in particular, unaccompanied asylum seeking young people.

At both of these sites, the young people were strongly in favour of recommendations that would share learning and promote understanding of the issues affecting looked after children and young people from black and minority ethnic communities.

Views differed as to the importance of being placed with carers from the same ethnic background. More significantly, unaccompanied asylum seeking young people felt that they should have the same range of placement options as host community children. This included the use of foster care and supported lodgings for those over 16 years and a commitment to exploring opportunities for children and young people to live with extended family members in the UK.

The young people felt that the recommendations should include an advocacy role for social workers to ensure that children and young people have access to reputable legal advice and that they receive copies of interview transcripts etc in their first language as these are of lasting importance in pursuing their asylum application.

Recommendation that emphasized the value of peer support and enabled young people to have links with their community and religion were welcomed.

Unaccompanied asylum seeking young people acknowledged that their experiences had impacted on their emotional well being which in turn affected their physical health. They recognised that their trauma would be different to the presenting needs of most children and young people in the UK and that it would be good if psychologists had skills and understanding of the best way to support them.

6.3 Contact with the people who are important to you

One area that generated considerable discussion in three consultations concerned sibling placements and by extension the contact children and young people have with siblings who are not living with them. In principle, the children and young people felt strongly that siblings should be placed together but there were accounts of how even when this had happened things hadn't worked out. Examples included placements being right for one sibling but not the other. Significantly, many of the young people talked of the loss of other siblings who had been adopted or had been born in subsequent relationships formed by their parents. The general view was that it was simplistic to think of siblings coming into care on the same day and needing a placement together and they felt that the recommendations could be strengthened by addressing the ongoing contact needs between siblings including those who have been adopted.

Young people at one site felt that there was value in promoting kinship care but recognised that family dynamics can make it harder to live with relatives than being in a neutral foster placement. Unaccompanied young people expressed a strong preference to be placed with extended family members and wanted social workers and their managers to be more proactive in considering this as an option for them.

6.4 Attending meetings and reviews

In all sites children and young people discussed their lack of control over decision making. In particular, this centred on placement decisions and moves and contact arrangements with their family members.

They all therefore expressed strong satisfaction with recommendations that had an emphasis on 'ensuring that the voice of the child is heard' and in meeting individual needs and preferences. In two sites, however, there was concern at how easy this would be to implement in practice with some feelings expressed that limited resources and heavy caseloads get in the way of best practice.

The young people in one site thought it would be more realistic if social workers and their managers were clear about which decisions children and young people can and cannot influence so that there is more honesty and less likelihood of feeling let down.

6.5 Feeling Settled

There was general support for recommendations that trainee teachers should receive core training on the needs of looked after children and young people as well as other recommendations that address educational stability and maximising children and young people's potential.

In one site the children and young people said that they were glad to have their rights to support with higher education promoted. However, they questioned what kind of accommodation would be made available to them in the holidays. Ideally they would want to be able to return to foster carers in the same way as young people in other families.

6.6 Knowing your story

Discussion about life story work took place at 3 sites and the children and young people had strong views about the importance of high quality life story work that they felt should go hand in hand with the collection of memories. Additional points raised included the benefits of the work being carried out by a dedicated worker who has the time and skills to give it the attention it deserves.

For these reasons, they all felt that access to high quality life story work which takes place as early as possible and is done at different stages would be a good step forward. The young people felt that their foster carers or residential workers should also be given access to more information about them so that they could share this naturally with them as they grew up.

In one site, children and young people raised concerns about the lack of information they can access on their files due to too much of it being labelled as 'third party' information. There were feelings that this information should be open to them.

6.7 Who can you call on?

Two sites spent time looking through the principles and values developed by the PDG. These were responded to favourably. They were particularly drawn to the one that concerned the protection of children and young people from peer violence and bullying that might result from stigma and prejudice

This generated a lot of discussion about how commonplace peer violence and bullying was in schools in relation to the stigma of being looked after. While anti bullying strategies in schools and knowledge of issues affecting looked after children had their place, the children and young people also felt they needed to be equipped with the skills to manage their situation assertively so that violence could be avoided and they were able to be safe.

6.8 Having your say

One consultation was made up of members of a 'children in care council' and they felt that the recommendations around liaising with and reporting to the councils were 'not only good but essential.' They were very proud of their own children in care council and felt that every authority should have one like them.

Some young people also added that it was important that the 'children in care council' should be exactly what it says and be made up of people currently being looked after rather than those who have now left care. It was felt that young people who had left care did not represent them as things change.

At other sites, young people spoke about different ways that young people could contribute their views without being involved in the council. This included being involved in staff interviews and the potential to have an input into foster carer training.

6.9 Growing up and moving out – independence day

Two consultations took place at leaving care services and the young people talked about how they valued the support they received from their own leaving care service. This included the one stop shop approach, where they could receive peer support, take part in leisure activities and regularly see their social worker, LAC nurse, connexions staff etc.

They strongly supported recommendations that advocated high quality services monitored through external inspection and which prioritise support for young people in their transition to independent living.

In particular, they felt there should be real choices about being able to stay on with foster carers beyond the age of 18 years as well as choice to leave and move into semi independent living at an earlier age if they felt ready.

There was strong opinion on the importance and value of peer group support for unaccompanied young people as detailed in recommendation 30. They all spoke about how good it was to feel part of a group and 'to meet with other people in the same boat.' For this reason they felt that peer group support should also be added into recommendation 48: providing leaving care services.

In one site, several young people had had contact with the psychologists from CAMHS and had a respect for the service. They therefore strongly supported the recommendation that could extend CAMHS involvement until appropriate adult services could get involved.

The young people considered that the introduction of a leaving care health consultation was a very good recommendation and felt that this should include details of their wider family's health as well as their own.

7. Summary Statements on Recommendations

7.1 Recommendations that received strong support

Recommendation 19 – exploring personal identity. Children and young people had strong views about the importance of high quality life story work that should go hand in hand with the collection of memories

Recommendations 23, 24 and 25 – At the two sites where these recommendations were discussed the young people were strongly in favour of recommendations that would share learning, improve quality of assessments and promote understanding of the issues affecting looked after children and young people from black and minority ethnic communities.

Recommendation 30 - access to peer support and links with community and religious groups for unaccompanied asylum seeking children and young people. This recommendation was welcomed by all the unaccompanied young people taking part in the consultation and supported by host community young people who could recognise its importance. The recommendation also addresses the training needs of foster carers and residential workers and this was considered important because of the impact they have on the young people's daily life and feelings of safety and comfort.

Recommendations 45 and 47 to 50 which consider access to higher education, leaving care support and the transition to adult services were strongly supported with a preference for a one stop shop approach to enable access to services in one place. Children and young people felt that they should have options to remain in placement beyond 18 years and that good quality accommodation should be provided in the holidays for those away at college.

7.2 Barriers to implementing recommendations

Recommendation 7, 9 and 18 - the child and young person's voice and contribution to care planning and placement decisions. In all sites children and young people discussed their lack of control over decision making. This was due to their councils' policies, legal decisions in relation to their situation and or resource decisions to close a residential unit etc. The young people in one site thought it would be more realistic if social workers and their managers were clear about which decisions children and young people can and cannot influence so that there is more honesty and less likelihood of feeling let down. There were strong feelings expressed at another site that nothing ever changed and that ultimately it came down to the budgets available and how heavy the social workers caseloads were.

Recommendation 19- exploring personal identity. Life story work was valued but some young people also wanted to manage their own access to information without formal intervention or support. At one site, concerns were raised about too much of their information is being held in a restricted area on file due to it being deemed third party. They questioned whether there was really a need for this. At two sites, children and young people felt that their foster carers or residential workers should also be given access to more information about them so that they could share this naturally with them as they grew up.

Recommendation 35 – health reviews. Young people at one site identified the reasons why they did not attend their health reviews. These included misunderstandings about what would happen in a health review and reluctance to be lectured about smoking, diet and their life-style. They felt that more informal contact with the LAC nurse and peer group discussions about health reviews could enable some of the myths to be dispelled and result in greater likelihood of the young people participating in reviews in the future.

7.3 Recommendations that received strong support but where it was felt they could be strengthened

Recommendation 2 – All young people welcomed recommendations that gave children and young people more influence and at one site, the children and young people's experience as members of the children in care council was empowering and seen as 'essential.' At other sites, some young people felt there were other ways they could participate and that these should also be encouraged and valued in the recommendations. This included being involved in staff interviews and the potential to have an input into foster carer training.

Recommendation 12 - promoting kinship care. Unaccompanied young people considered that there was a reluctance to place them with extended family members living in the UK and that this recommendation could promote this as a positive option to be explored on their behalf.

Recommendation 13 - sibling contact. Young people felt that the recommendations could be strengthened by addressing the ongoing contact needs between siblings who are not living together because they remain at home, have been adopted, are born from their parents subsequent relationships etc.

Recommendation 38 – leaving care health consultation. This was seen as a good development and should extend to sharing family medical history as well as the young person's own health information.

7.4 Gaps in the recommendations

Principles and Values: The children and young people expressed positive views about the principles developed by the PDG for all in the care system. The resulting discussion highlighted the prevalence of peer violence and bullying that results from stigma and prejudice. The children and young people felt that the guidance could address this by including a recommendation that looked at strategies and coaching for looked after children and young people so that they are equipped with the skills to manage their situation assertively so that violence could be avoided and they are able to be safe.

Recommendation 30- providing for unaccompanied asylum seeking children who are looked after. Young people felt that this recommendation should include an advocacy role for social workers to ensure that children and young people have access to reputable legal advice and that they receive copies of interview transcripts etc in their first language.

Recommendation 48 -leaving care services. Young people felt that access to peer group support

should be included here.

8. Findings Site A

Six children and young people aged between 11 and 18 years attended the consultation. All were placed with foster carers.

Principles and Values

This group spent time looking through the principles and values developed by the PDG. These were responded to very favourably. They were particularly drawn to the one that concerned:

Protect children and young people from peer violence and bullying that might result from stigma and prejudice

This generated a lot of discussion about how commonplace peer violence and bullying was in schools in relation to the stigma of being looked after. Several young people talked about having to stand up for themselves and 'have fights' to ensure they were left alone in the future, while for others it was whispering and insinuation that had caused them to feel intimidated and bullied.

The young people considered that it would be a hard principle to maintain in practice as they felt education staff could not always be on hand to monitor what was going on and they had felt disbelieved when they had named it to adults.

'Teachers can't be watching 24/7' (young person)

'The teachers are sometimes the bullies.' (young person)

While anti bullying strategies in schools and knowledge of issues affecting looked after children had their place, the children and young people also felt they needed to be equipped with the skills to manage their situation assertively so that violence could be avoided and they were able to be safe.

Recommendation 7, Recommendation 9 and Recommendation 18 - the child and young person's voice and contribution to care planning and placement decisions.

The children and young people considered a cluster of recommendations around their participation in care planning, placement changes and meeting their individual needs and preferences.

Group members spoke favourably about the processes in place to ensure their views were heard. They had the e mail contacts for their independent reviewing officers and knew how to contact them between reviews. While believing strongly in the principles around these recommendations with their emphasis on 'ensuring that the voice of the child is heard,' there was a feeling of inevitability that many decisions will continue to be made irrespective of their views. They felt it would be more realistic to be clear about which decisions they can and cannot influence. Examples here included having to move from a residential home because the local authority has decided to close it, not being able to stay in a foster placement because the foster carers are retiring, having to move on into independent living when you would rather stay where you were.

Recommendation 2: – involvement of LACYP – parenting boards, children in care councils

The children and young people thought that not only was this recommendation good but it was essential. They were very proud of their own children in care council and felt that every authority should have one like them.

Some young people also added that it was important that the children in council should be exactly what it says and be made up of people currently being looked after rather than those who have now left care.

'It's a better idea than having people who have left care. Their past is what they went through and it's not what we are going through. Things change.' (young person)

Recommendation 12: promoting extended family and kinship care

The young people felt that there was value in promoting kinship care but recognised the complexity and challenges that this could bring. One young person who had been placed with extended family said it just couldn't work as it caused huge family rows and more difficulty than if they were placed in foster care.

Recommendation 13: sibling placements

The group included siblings who were placed together and there was a lot of discussion about the importance of this recommendation. There was a strong view that siblings coming into care at the same time should be placed together, however what at first sight seemed straightforward was more complex. The young people shared information about how they had several other brothers or sisters with whom they had little contact. These brothers and sisters were either adopted or children born of both or one of their parents but who had not been accommodated.. The young people felt that recommendations should go beyond looking at placing siblings together and have an emphasis on keeping contact options with other siblings open so 'that they could choose whether to maintain them.'

One young person spoke about how they were placed with a sibling but that the placement had not worked out for them. This caused difficulty in looking at whether both should move. They stayed in the placement and that seemed right for them but this was a real dilemma.

Young people really believed that siblings should have the option to stay together but appreciated some of the challenges.

Recommendation 19: exploring personal identity

Some of the young people felt that they had no need for life story work as they could just ask their family members for information and one young person said that they could ask for life story work when they felt ready for it. Other young people talked about the importance of life story work and felt positively about the recommendation. One young person who had only had one placement but around 20 social workers talked about how easy it is to lose the past and that the best way to carry out life story work was to have a dedicated person who had specialist skills and gave time to carrying it out over a period of time.

While the young people were positive about the recommendation they also felt that it should go hand in hand with keeping a memory box and even young people who were resistant to life story work were able to acknowledge the importance of collecting mementoes.

Recommendations 41, 44 & 45: access to further & higher education and teacher training.

The looked after children and young people were glad to have their rights to support with higher education promoted. However, they questioned what kind of accommodation would be made available to them in the holidays. Ideally they would want to be able to return to foster carers in the same way as young people in other families.

There was enthusiasm about the recommendation that trainee teachers should receive core training

on looking at the needs of looked after children and young people.

In looking at the best way to promote the guidance to looked after children and young people, the group members were clear that they did not access websites with materials aimed at people in their situation so questioned whether others would. They had reservations about the use of social networking sites in case of compromising confidentiality or revealing their identity. They felt that it was best to promote the guidance locally through newsletters, information to foster carers, peer groups etc.

They also expressed a willingness to be involved in producing a DVD or similar on the guidance which could then be used to disseminate the key messages to looked after children and young people.

9. Findings Site C

Six young people aged between 16 – 21 years attended the consultation. They included young people who were living with foster carers and those who had moved into supported housing arrangements or were living independently. Within the group, some young people had lived in residential care and two had experience of being placed a long way from their home authority.

At the start of the consultation, strong views were expressed by one young person and echoed by others that it did not really make a difference about what young people say. There were feelings that nothing ever changed and that ultimately it came down to the budgets available and how heavy the social workers caseloads were.

Other members of the group were more hopeful and perceived that there had been improvements and changes made over the years.

Principles and Values

This group spent time looking through the principles and values developed by the PDG. They felt that the principles were good. However, they also triggered a discussion about how looked after children and young people always stand out and cannot have a normal life.

'We are always reminded that we are in care. What about the people who want to forget they're in care?' (young person)

Recommendation 12: promoting extended family and kinship care and Recommendation 13: sibling placements

Within the group, accounts were given of children who had been separated either on coming into care or at a later stage. Many group members had other siblings who had been adopted and parents who had later had more children that were now in foster care or were living at home.

This discussion prompted negative views about their parents and their ability to be responsible. It brought up the issues of loss as once their siblings were adopted, the young people have no further contact with them.

More generally, it resulted in the young people voicing concerns about the restrictions on them maintaining contact with wider family and friends. Everything was viewed as having to be vetted and agreed and this impacted on having a normal life. Examples included seeing family members or wanting a sleep over at a friend's house.

Recommendation 19: exploring personal identity

The young people said that they should know a lot more and from an earlier age. They felt that their foster carers or residential workers should also know more about them so that they could then pass the information on to them as they grow up.

Many of the young people had received different versions of their family history over the years from relatives and social workers.

'People keep lying to us and telling us different stories.' (young person)

'Being in care is like looking through a window into someone else's family.' (young person)

Concerns were raised about the efforts young people had made to get hold of their history through accessing case files. There were strong feelings that the rules governing access to third party information resulted in a denial of their meaningful access to their own information.

For these reasons, they all felt that access to high quality life story work which takes place as early as possible and is done at different stages would be a good step forward.

Recommendation 35, Recommendation 38 and Recommendation 39.

The young people considered a cluster of recommendations around health reviews, access to mental health services and the proposed introduction of a leaving care consultation.

They thought that the leaving care consultation would be an important development and all considered that they did not have the information about their own health history as well as that of their wider family.

Although they were in favour of the leaving care consultation, they added that the process of sharing information about their family history should start earlier.

The group considered the role of health reviews and what can get in the way of young people attending and how this could be addressed. Two young people explained why they didn't attend them and it became apparent that they associated the health review with the medical assessment they had when they were first accommodated. Both had undergone gynaecological investigations and assumed that this would also happen at a health review.

Having the LAC nurse present in the consultation enabled the mixed message to be addressed and the two young people said they would now consider attending in the future. The group felt that this was evidence of how important it was to ensure young people understand what a health review is and what will happen in it.

Another young person pointed out that the inference that they were overweight which was made in an earlier health review was enough to stop them going again as 'I know what they'd say.' The group considered how off-putting it is if you think you are going to a health review only to be lectured about smoking and exercise etc.

Some group members considered that improving the quality of mental health services for looked after children and young people would be good as they felt that their needs had not been met over the years.

'I have been to seven counsellors and they all tell me they know how I feel.' (young person)

Recommendations 44, 45 & 46: access to further & higher education and education funding.

All the young people responded well to these recommendations and they triggered discussions about their own education experience and whether they had fulfilled their career ambitions.

At school you are known as the kid in care. They don't have ambition for us.' (young person)

These recommendations led to discussion about the stigma of being 'in care' which some said had led to them having fights. Others voiced that it wasn't just being in care that resulted in taunts, it could also be because you don't have a dad etc.

Recommendations 47, 48, 49 & 50 -leaving care support and transition to adult services

The group looked at these recommendations which consider leaving care support and the transition to adult services. The young people spoke about the support that was available to them through their own leaving care service and how important this was. They strongly supported these recommendations that advocate high quality services monitored through external inspection and which prioritise support for young people in their transition to independent living. In particular they felt there should be real choices about being able to stay on with foster carers beyond the age of 18 years as well as choice to leave and move into semi independent living at an earlier age if they felt ready.

10. Findings Site D

Ten young people attended the consultation which took place during their weekly peer support group. The majority of members were aged between 15 and 19 years and there was one older member aged 24 years.

This group was diverse in relation to ethnicity and included several young people who had arrived unaccompanied to the UK. The group included young people who were living with foster carers and those who were in supported lodgings, in shared houses or were living independently.

The consultation had a focus on recommendations that looked at the needs of black and minority ethnic children who are looked after and children and young people who are unaccompanied asylum seekers. It also considered recommendations around leaving care services and contact with family members.

Recommendations 23, 24, 25 and 27: understanding issues, sharing learning, appointing a children's champion and finding placements.

The young people felt they benefited from living in an inner city area with racially diverse communities and health, education and social care staff who also reflected this diversity. Nevertheless, they appreciated that this was not the case for other children and young people living in rural or mainly white areas so they were strongly in favour of recommendations that would share learning and promote understanding of the issues affecting looked after children and young people from black and minority ethnic communities.

Group members were aware that their area has been effective in the recruitment of BME carers and that it is seeking to address a gap in having sufficient white foster carers. One unaccompanied young person spoke about their placement with foster carers from the same country and religious background to their own. This was seen as caring and supportive and invaluable in terms of meeting needs around language.

Placement options for unaccompanied young people who are aged over 16 years when they arrive in UK were seen as different and as less satisfactory for unaccompanied asylum seekers than young people from the host community. Foster care was generally not an option and the young people were likely to be placed in shared housing and expected to manage a budget, to cook and do their washing etc. This was seen as a particular challenge for the boys who often had had no

previous experience of these skills. Group members therefore wanted the recommendations to include guidance that unaccompanied young people should have the same placement options as host community children and young people.

The unaccompanied young people considered that there was something missing in the recommendations in relation to ensuring that they received ongoing legal advice from reputable solicitors. There are issues preventing social care staff recommending solicitors and this can result in the young people accessing solicitors who provide poor quality legal advice or firms that have on occasions disappeared along with their papers. In general, the young people do not actively seek decisions on their cases out of a fear of poor outcomes. However, this also leads to long standing anxiety and a 'limbo' where they are 'forced into education as they can't legally work.' It was felt that at least they should be provided with a list of reputable and qualified legal firms that have a specialism in asylum law.

Recommendation 30 – peer group support

There was strong opinion on the importance and value of peer group support for unaccompanied young people as detailed in recommendation 30. This view was added to by other young people in the group. They all spoke about how good it was to feel part of a group and 'to meet with other people in the same boat.' For this reason they felt that peer group support should also be added into recommendation 48: providing leaving care services.

Recommendations 47, 48, 49 and 50 -leaving care support and transition to adult services

The group looked further at the recommendations which consider leaving care support and the transition to adult services. The young people spoke about what they valued most about the support that was provided by their own leaving care service. This included the one stop shop approach, where they could receive peer support, take part in leisure activities, get involved in arts projects and also regularly see the LAC nurse, connexions, the drugs worker, the psychologists and housing worker. They would recommend this model of support in the recommendations as it was seen as better than having to travel around to access each area of support.

Several young people had had contact with the psychologists from CAMHS and had a respect for the service. They therefore strongly supported the recommendation that could extend CAMHS involvement until appropriate adult services could get involved.

The young people considered that the introduction of a leaving care health consultation was a very good recommendation and felt that this should include details of their wider family's health as well as their own.

'Although it might hurt to know some things about your family health history, it is better to know than being in the dark' (young person)

Recommendation 13 -sibling placements

This generated different views according to personal experiences. One young person had been placed with a sibling who was preferred and labelled as the good one by the foster carers. This had had a detrimental effect on this young person's well being and a strong feeling that they would rather have not lived with their sibling.

Another young person described how they were now in regular contact with their siblings but the closeness of the relationship was forever damaged.

'Relationships build and develop from an early age and because I wasn't brought up with them, they are now more like my mates rather than family.' (young person)

Members of this group felt that the best way to disseminate the recommendations was through peer groups like their own or by getting the information out to their social workers and foster carers. They thought that other looked after children and young people who do not have access to support services like themselves may access web sites such as Who Cares? Trust.

11. Findings Site E

Eight young people aged between 14 and 18 years attended the consultation. This workshop was aimed at unaccompanied asylum seekers with a focus on recommendations 23 to 30.

All of the young people were male which fits the gender profile for unaccompanied young people living in this county council and their route to the United Kingdom via the ports. An interpreter was present to enable full participation of three of the children and young people.

The young people included those living in foster placements, supported lodgings and training flats.

Although the workshop focused on the recommendations with unaccompanied asylum seekers as the target population, the young people's feedback often had relevance to other recommendations which were then discussed. In particular they had views around their education, kinship placements and decision making about their placements.

Recommendation 28: carrying out assessments

All of the young people had been age assessed and they talked about the process as being based on UK cultural norms and expectations rather than an understanding of other cultures and lifestyles. This could make all the difference between a young person being believed or not and could therefore impact on the decisions taken by the council as to whether to support them.

Examples included one 14 year old boy who said that the social worker had commented that he had been seen in town with older boys which led them to doubt that he was as young as he claimed.

'In my country it is normal to have friends and to hang around with people of all ages.' (young person)

Another young person referred to naming structures with forename and surname being required by assessors whereas this format isn't always shared in other countries and/or cultures. He recounted stories of how people had been seen as lying when they were inconsistent in the way they provided their name or that brothers who supplied different names to each other weren't believed.

The young people were therefore all strongly in favour of recommendations that improved the quality of assessments and took into account the language, cultural experience and identity of the child or young person.

This discussion also generated views about the quality of legal advice they received and the difficulty they experienced in chasing up solicitors to pursue their case and follow through agreed actions. One young person said it was very important that the transcript of what was said in interview with the solicitor was translated and given to the young person.

'As time passes you forget the detail and you need to know what you said.' (young person)

The young people felt that the recommendations should include a role for social workers to ensure that children and young people have access to reputable legal advice and advocate on their behalf if the young people aren't receiving advice and translated material as agreed.

Recommendations 23, 24, 25 and 30: understanding issues, sharing learning, appointing a children's champion, support and training to foster carers and residential staff

These recommendations were all welcomed and seen as addressing some of the concerns they had raised about lack of cultural awareness in assessments.

In particular the young people felt that it was important that foster carers and providers of supported lodgings should receive more support and training to enable them to have a better understanding of the issues they face and to promote a more respectful understanding of their faith and culture.

The young people spoke with warmth about their carers but considered there were times when their carers made fun or jokes about their faith e.g. about fasting during Ramadan.

From some of the young people's perspectives, the carers also made criticism of their cultures or faith from a western viewpoint e.g. making comments that women wearing the hijab are oppressed.

The young people liked the idea of having a 'children's champion' and opportunities for social care staff to learn best practice from what is happening in other areas. They also began to consider the role that unaccompanied young people could have themselves in contributing to foster carer training to improve understanding of culture, faith, religion, food and identity.

The discussion led to consideration of principles and values for those in the care system. One young person described how upset he was that a move of placement had significantly disrupted his education. Education was highly valued by all the children and young people and principles of enabling a stable school/education experience were considered important.

The young people were generally positive about how they were welcomed in the UK and they did not talk explicitly of bullying or peer violence. However, some acknowledged that they had coping mechanisms to avoid situations which may prompt stereotypical responses about their true country of origin.

'When people ask, we say we are from Greece' (young person)

Some of the young people spoke about the rural location of their placements and how this did not lead them to feel safe when travelling to and from town. They all had a preference to living in a more urban setting to reduce isolation and to get to the shops.

Recommendation 7, 12 and 27: finding placements, children and young people's voice in care planning and promoting extended family and kinship care

The young people did not express a preference to be placed in foster care or in lodgings with carers from the same ethnic background. One young person said that it had been better not to be placed in a household where they spoke his first language as he had to adapt and learn English which was better for his education.

However, the discussion on placements led to strong views expressed by 4 young people that it would be a lot better if they could be placed with their relatives in the UK. They considered that recommendation 12 which promotes kinship care as a placement choice should be actively pursued for unaccompanied young people, particularly as they are separated from family. From the discussions, themes of loss and just wanting to be able to relax in a household with their own family members emerged.

'I would rather have gone to live with my uncle in London.' (young person)

'Your government is spending a lot of money looking after me and it would be much cheaper if they paid some of the money to my relative to care for me.' (young person)

'If we have a distant relative, then we should be allowed to live with them. Life would be nicer and more convenient. To live with your own villagers makes life a lot easier.' (young person)

One young person described how his social worker was assessing a relative but he felt frustration at the length of time that the assessment was taking and spoke of the particular delays in securing a CRB check to move the process on.

The young people talked about a lack of control over decision making in their lives and this extended to choice of placements and being listened to by their social workers. One young person said that he had been placed away from a town and that his social worker had said that if he didn't like it we'll move you but that this had been a 'false promise' as he was still there.

Recommendation 29: accessing child and adolescent mental health services

The young people considered this recommendation to be very important and they could identify that their experiences had impacted significantly on their physical and mental health.

'I still can't sleep. I can't eat.' (young person)

'I have to do lots of activities to keep my mind busy.' (young person)

'We are the hopeless.' (young person)

They all said that they had not had access to mental health services although one young person said that it had been promised but didn't happen and one young person said they were waiting for an appointment.

They recognised that their trauma would be different to the presenting needs of most children and young people in the UK and that it would be good if psychologists had skills and understanding of the best way to support them.

A discussion took place about the equal importance of just having someone in your life to talk to even if they had no specialist skills. They talked about the rapid turnover of social work staff and felt that if this could be changed so that they had a consistent person who cared and listened to them, then this would go a long way in supporting their mental health.

Recommendation 30: access to peer group support and religious and community groups

This recommendation had strong support and while some efforts had been made to link them to church and community groups, there was discussion about its limitations. In part, this was due to living a distance from cities that would enable more access to people from their country.

One young person spoke about how he could not attend mosque regularly as he couldn't afford the bus fares and this was linked with assumptions that he only needed bus fares to go once a week.

Peer support was valued and demonstrated in the group through friendships and a responsibility for each other. Opportunities to meet up or to be placed with other unaccompanied young people were seen as good. One young man expressed the happiness he felt when he was placed with another person from his country and then found out that it was even better because they were from the same province.

12. Appendices

Appendix 1

Participants involved in the consultation and areas covered in workshop

Site	Number of young people consulted	Age 11-18	Age 19-24	Ethnicity	Workshop Focus
A	3 Females 3 Males	6	0	6 White British	Principles and Values Getting the right help Contact with people who are important to you Attending meetings and reviews Feeling Settled Having your Say Knowing your story Who can you call on
C	2 Females 4 Males	4	2	6 White British	Principles and values Contact with people who are important to you Moving towards independence Knowing your story
D	5 Females 5 Males	7	3	3 Black African 1 Indian 2 Other Ethnic 2 White British 2 Dual Heritage	Getting the right help (focus on BME and UASCYP) Contact with people who are important to you Moving towards independence
E	8 males	8		5 Black African 3 Other Ethnic	Getting the right help (focus on UASCYP)

					Contact with people who are important to you
Total	30 young people 10 Females 20 Males	25	5	14 White British 8 Black African 1 Indian 5 Other Ethnic 2 Dual Heritage	

Appendix 2

LACYP consultation: Structure of group consultations with topic guide

In advance of the group:

The recommendations will be clustered into several themes and each one will be typed out and laminated onto card.

Display boards with the theme headings will be displayed in the room with a visual way to grade responses to the draft recommendations (e.g. happy face, sad face etc for the group with younger children and a continuum line rating satisfaction from low to high for older young people's groups)

Getting the right help

(Recommendations that address access to services- specialist LAC provision, targeted support -e.g. CAMHS and universal services, recommendations that address BME and UASC)

Recommendation 35 -carrying out health reviews

Recommendation 39- mental health services

Recommendations 23-30 re BME & asylum seekers –used as appropriate to make-up of focus group

Contact with the people who are important to you

(Recommendations that address birth family/siblings, friends, out of area considerations)

Recommendation 8 placements – especially penultimate bullet on out of area placements

Recommendation 12 – promoting extended family and kinship care

Recommendation 13 – sibling placements

Recommendation 34 – out of area placements re health services

Attending meetings and reviews

(Recommendations that emphasize a child focus in health plans, PEPs, LAC reviews etc.)

Recommendation 7 – care planning, placements & reviews - especially last bullet re CYP voice in care planning

Recommendation 9 – making decisions about placement changes especially 4th & 5th bullets on involving LACYP and right to advocacy (or cover under 'Having your say' below)

Recommendation 18 – meeting individual needs and preferences

Feeling settled

(Recommendations that address stability in placement and education etc.)

Recommendations 41-43 – education
 Recommendations 44 & 45 – access to further & higher

Knowing your story**(Recommendations that address the promotion of identity, life story etc)**

Recommendation 19 – exploring personal identity

Who can you call on?**(Recommendations that address the team around the child, multi agency working and communication with LACYP)**

Principles and values
 Recommendation 2- resource guide
 Recommendation 5 – co-ordinating services

Having your say**(Recommendations that address LACYP involvement in policy, access to independent visitors advocates etc.)**

Recommendation 2 – involvement of LACYP – parenting boards, children in care councils

Growing up and Moving out - Independence Day**(Recommendations that address transition, leaving care arrangements and options to remain or return to carers/placement)**

Recommendation 38 – leaving care health consultation
 Recommendations 47 & 48 – preparing to leave and leaving care
 Recommendation 49 – transferring to adult mental health services (if relevant to participants)
 Recommendation 50 – services for care leavers aged 18+

Structure of group sessions

Juliet Ramage will liaise with and brief the lead professionals for the established groups of LACYP. The consultation will be facilitated by Juliet Ramage and the lead professional for the group.

Session 1: purpose of the consultation

The facilitators will go through the aims and objectives of the consultation. This will refer back to the original consultation with children and young people and what happened to the information they contributed. There will be an update on how the PDG (this will be explained) has progressed in gathering the evidence and has now produced guidance that is out for public consultation.

Work is also going on to have a version for looked after children and young people themselves.

There will be a summary /reminder of some of the key messages that came out of the earlier consultations.

LACYPs views are now being considered on the draft recommendations and this input will be reported back to PDG and have an influence on the final form of recommendations.

Session 2 : consideration of the recommendations

Children and young people will break into two smaller groups to consider the recommendations theme by theme. (If there are too many recommendations for each group to consider these will be divided between the two groups so that all are covered)

A facilitator will be present in each group to assist process and ensure there is not an over reliance on reading, writing etc. The facilitator will take notes of the discussion.

For each theme (cluster of recommendations) they will have a discussion on the following topics.

Does the draft recommendation make sense to you?

(Can they understand it? Is it clear? Is this one that needs to make sense to them? If so, what would make it clearer?)

What's your view on it?

(Good, bad, ok, indifferent, acceptable, not sure etc. What are the reasons for their views?)

What difference (if any) could it make to looked after children and young people LACYP?

(Do they think it will improve the health and/or what happens to young people in care in the short or long term? Is it one they think would help them or their mates and /or one they could promote?)

Will it be easy to make it happen? If not, why not?

(How realistic is it, can it be achieved, what might get in the way of it happening? What would get in the way of their mates taking up /accessing the services?)

What could improve it? Can they think of ways to get over the barriers? obstacles?

(Could the wording be simpler, could it be expressed differently to get young people on board? What could help it happen/promote it- get other children and young people to feel it relates to them and can get them the right help?)

The group will then position the recommendations from one theme on the display board according to their overall views. They will then move onto the next set of recommendations.

Sessions 3: feedback

At the end of the small group sessions, the facilitators (with support from a LACYP if appropriate) will provide feedback about the views from each group. Any difference in views or further discussion will be recorded.

Session 4: moving forward

Young people will be thanked for their contribution and will be asked their views about the best way to inform LACYP about the new guidance.

(This will build on some of the communication and promotion prompts that have been addressed earlier and will focus on the guidance as a whole. Is it best to do this locally or nationally or both

e.g. through children in care councils or national organisations like Voice? What are their views on use of the web to promote the guidance? How could this work – twitter, facebook etc? What's their favourite website for fun or for getting information about LACYP? What are their views on making a DVD, workshops for LACYP, etc?)

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