

**Social care quality standards stakeholder briefing workshop
Health and wellbeing of looked-after children and young people**

**Monday 31st October 2011 14:00-16:30
NICE, Level 1A, City Tower, Piccadilly Plaza, Manchester M1 4BD**

Stakeholder briefing workshop notes

Introduction

A workshop was held with a range of stakeholders from the social care and health community on the 31st October 2011. The purpose of the workshop was to set out the proposed scope of the social care quality standard on the health and wellbeing of looked-after children and young people. A draft “topic overview” prepared by the quality standards team was used as the basis of the workshop discussions.

The workshop was designed to fulfil the following key objectives, to:

1. Provide stakeholders with information on the interim process being used to develop quality standards for social care
2. Provide stakeholders with information on how the existing processes have been adapted for social care and the purpose of the pilots in testing existing processes
3. Provide stakeholders with information on the draft scope of the quality standards and the parameters within which the standards can be developed
4. Seek advice from stakeholders on the priority areas for consideration in the scope of the quality standard to be drafted by the Topic Expert Group.
5. Seek advice from stakeholders on the language, sources of information and policy used in the Topic Overviews
6. Seek advice from stakeholders on the potential constituency of the Topic Expert Group.

Following presentations from the NICE team, discussion groups were held focussing on key questions highlighted in the topic overview. A summary of key themes raised in the discussion groups is presented in this report.

Appendices

Appendix A: Principles and values from Public Health guidance PH28 (Looked after children and young people)

Appendix B: Potentially relevant NICE and SCIE guidance that could be used to support the social care quality standard

Appendix C: Other documents that could be used to support the social care quality standard

Appendix D: List of participating stakeholder organisations

Appendix E: Timeline of next steps

1.1 Proposed focus and population of the quality standard

The referral from the Department of Health is to develop a social care quality standard on the 'Health and wellbeing of looked-after children'.

The topic overview presented at the workshop proposed to use the parameters of NICE and SCIE guidance: Looked after children and young people (PH28 and SCIE guide 40) as the basis for the scope of the quality standard:

- **Focus:** Improving the quality of life (physical health, and social, educational and emotional wellbeing) of looked after children and young people.

The term 'looked-after children and young people' is used 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.

- **Population:** children and young people from birth to age 25, wherever they are looked after.
- **Setting:** wherever looked after children & young people live (including residential or foster care, remand foster care, care provided by family or friends or secure accommodation).
- **Exclusions:** a) Children and young people looked after on a planned, temporary basis for short breaks or respite care purposes where the Children Act (section 20) does not apply. b) Children and young people who have been looked after in the past. c) Children and young people at risk of entering care, and their families.

Questions on the proposed scope

1.2 Question 1

Should the proposed focus and population be changed? In what way?

1.2.1 Focus

Various points were raised regarding the focus on the scope, as below:

- Need to be clear on a definition of quality of life as this could prove difficult to manage based on all of the aspects of health and wellbeing mentioned.
- Need to be clear if the focus differs from the NICE/SCIE guidance on Looked-after children and young people as important issues such as pregnancy, alcohol and substance misuse were not focussed on in the guidance.

- Transition(s) to and from care should be the key focus
- Focus should be on legal duties that must be carried out
- Focus should be on physical and mental health

One group felt strongly that a full evidence review should be carried out prior to the drafting of a scope of the quality standard

1.2.2 Population

All groups felt that given the heterogeneity of the population of looked-after children and young people (especially around age group), as well as the variation in services and national priorities, it was important that all the different population groups' needs and outcomes are captured. Areas of importance for all populations could include transition points between child and adult services, differences in service provision and that people move in and out of social care and between social and other care services (such as health)

Participants also felt that it was important to consider:

- The possible change in population covered by the term "looked-after"
- Disabled children and young people in relation to safeguarding
- Care of those who have ongoing needs
- Young people who have been in custody
- Leaving care minimum standards - as 18 to 25 is a critical age for care leavers. This group is covered under the Legal Care Act but are not technically looked-after children or young people

1.2.3 Setting

Whilst the setting noted is broad, the following points were raised for consideration:

- Interactions between agencies, for example:
 - Health
 - Justice
 - Child and Adult services
 - Continuity of care

o Education

- Ensure that the care system is not segregated from wider health and social care services
- The importance of transition points (e.g. primary to secondary education, MH service transition, unaccompanied asylum seekers, children placed outside the area, transitions within care pathways, transitions into/out of care, transitions from children to adult services, transitions between and integration of social care and NHS)
- Variety in service provision as decisions about being in care are different depending on location – thresholds for action are very different
- Expanding the setting to include the home as some “looked-after” children remain at home
- The difficulties in monitoring outcomes for care leavers as any post-care contact points tend to be at times of crisis

1.2.4 Exclusions

Participants felt that the following should be considered for inclusion in the scope:

- The ongoing needs of care leavers
- Care leavers who re-enter the care system
- Support for carers
- Children and young people who are adopted especially considering the process for adoption is very long and can be difficult for the looked-after child

1.3 Question 2

Should this social care quality standard differ from published NICE [healthcare quality standards](#)? How?

Workshop participants were presented with an overview of the presentation and components of existing NICE healthcare quality standards and were asked to consider if this was appropriate for this particular quality standard.

The following key points and questions were raised by participants in relation to this question:

Size and format of the quality standard

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- Is it feasible to cover the breadth of the topic in 15 concise statements?
Considering that the quality standard should recognize the range of populations, one quality standard may not be able to cover all populations along the continuum of care
- Are additional evidence reviews needed to cover all the important areas?
- Could brief points/short formats be used to emphasise key points, with segments relevant to different audiences?
- Different formats for different audiences should be used.

Links to existing standards

- It is important for the quality standard to link with existing standards. Consider framing this within the QS introduction.
- Consider the added value of the quality standard within the existing regulatory framework

Associated tools and methods of highlighting key points

- Consider using examples or vignettes to communicate the intent of the quality statements. This could ensure that statements are meaningful and easily translated into concrete action
- Ensure that intervention-based statements focus on the intended outcomes
- Consider simplifying audit tools to support uptake
- Consider providing information in the form of a menu of options to support empowerment and choice

Other points

- Ensure that the quality standard takes a holistic approach considering multifaceted issues
- Ensure that the intended audience for each statement is clearly identified
- Ensure that the relation-based nature of being taken into care is highlighted
- Consider using a mixture of individual and strategic level statements

1.4 General points from questions 1 & 2

It was felt that consideration should be given to:

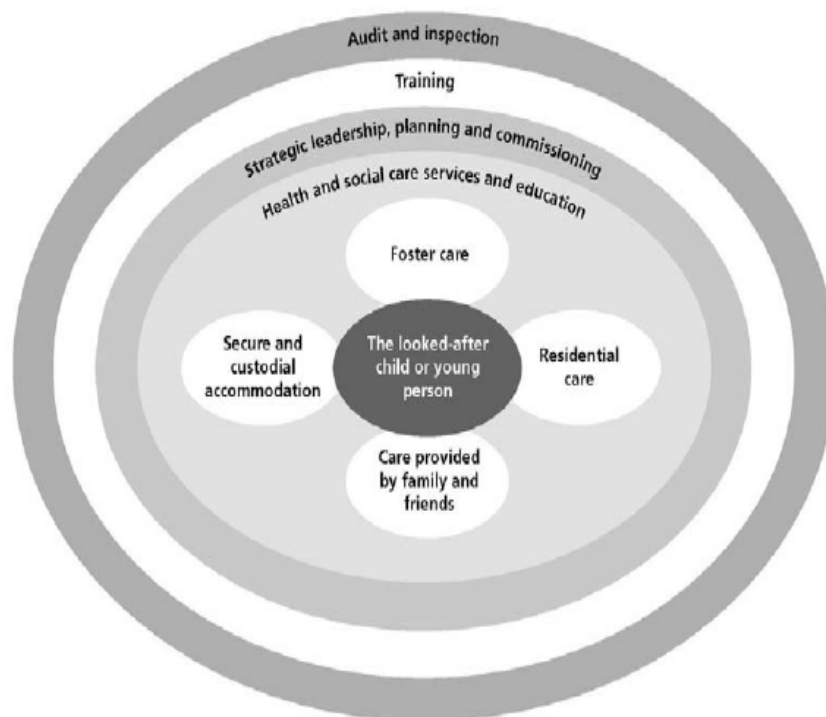
- Capturing the uptake and implementation of the original guidance when drafting the statements
- How care can consist of a short period vs. lifetime vs. segments of time
- Accommodation providers for independent living
- Pathway planning
- Implications of the age range for agencies working with different age groups, e.g. 18 to 80
- Wider issues for LACYP during transition, e.g. disability issues
- SEN work – pathfinders may go up to age 25
- Individualised, personalised services
- Communication with the child/young person coming into care is crucial so that they understand and “own” the information. This helps achieve person-centred care. This is also achieved through support if interventions do not go as expected.
- Cost effectiveness and costing tools, it may be difficult to assess and produce these as costs of services vary across the country.

2.1 Conceptual framework for the quality standard

The diagram below is taken from NICE and SCIE joint public health guidance 'Looked after children and young people' (PH28 and SCIE guide 40). The diagram illustrates the influences on the quality of life of looked-after children and young people, providing a broad, visual example of the areas of care involved at both national and local level. It does not capture the complex interactions between them which are addressed in depth in the joint NICE and SCIE guidance.

The principles supporting the recommendations in NICE and SCIE joint public health guidance 'Looked after children and young people' (PH28 and SCIE guide 40) are provided in appendix A.

Influences on the quality of life of looked-after children and young people



Questions on outcomes, audience and links with other standards

2.2 Question 3

How can we lift the quality standard out of specific settings and focus on outcomes that should be improved?

User voice and participation

- Ensure that user and carer voice is included to understand what is important to looked-after children and young people. This also includes focusing on self-determination and self-efficacy to enable active participation in care.
- Focus on the person's experience across services/the pathway as well as their aspirations and quality of life. This can also be achieved by looking at experience with family, health, education and friends.

Differentiation by age and timeframes to achieve outcomes

- Consider age as an influence on outcomes. An example of this may be that the older a child is when taken into care, the sooner transition will occur, and therefore outcomes and measures relating to transition will be more important for this particular child
- Timeframe of outcomes needs consideration, as outcomes may take a long time to materialise. As a consequence of this, process measures (e.g. around monitoring) may be useful.

Use audit tools to identify outcomes

- Consider using audit tools to identify outcomes, such as CAT-Mark¹ which is an example of a tool used to assess services in Northampton.

General points

- The following points need to be considered when identifying outcomes:
 - Inconsistency in care
 - Coordination of care
 - Services working together
 - Consistent relationships/stability
- In general, outcomes will be the same across settings, as, for example, placement stability and carer consistency and quality are good indicators of the overall quality of care, with training a key marker of this.

¹ The CAT-Mark is a stamp of approval for young people's services awarded by young people who have been trained as CAT-Mark assessors. They assess services, organisations and projects against set criteria.

- If settings form the centre of the QS framework, need to consider independent living and where care leavers live
- Consider framing the QS to speak both to health and social care, as a social care QS may not have the pull to effect change.

2.3 Question 4

Who are the likely key people that will use the quality standard to support improvement?

- Foster parents and foster carers
- Children's Rights Directors, Children's Commissioners
- Social workers
- Looked-after children and leaving care service teams
- All providers
- Councillors from local authorities who monitor the services provided
- Looked-after children and young people
- Health and wellbeing boards
- All commissioners
- Clinical Commissioning Groups
- Jointly commissioned services
- Justice sector
- Mental health strategy teams
- Professions, e.g. Royal Colleges
- Prime providers are directly audited by their governing body, e.g. skills-funded agency. There is a plethora of providers underneath this level who fall under subcontractor terms which would not be captured by existing audit processes, therefore quality is missed or not measured.

- Under NHS reforms, new commissioners may not have an understanding of the needs of LACYP and may require support to commission effectively – NICE guidance and quality standards need to be written in an effective way

2.4 Question 5

How can this quality standard help support ongoing work around national minimum standards, OFSTED and sector led improvements?

Relationship with regulatory framework

- Ensure that clarity is sought over the relationship between the quality standards and the existing regulatory framework, including Ofsted, the Independent Reviewing Office, local and national audit
- Provide examples of potential uses for the quality standards:
 - Monitoring and regulation
 - Benchmark for accreditation
- Consider the relationship between the Munro review and inspection of looked-after children and young people's services
- The power of the evidence base, cost effectiveness and attainable quality care should be enough to drive up quality, with appropriate links to inspection and commissioning whilst empowering individuals to know what they should expect from services
- Note that current adherence to statutory regulators is limited and/or varied
- Consider the changing commissioning structures and ensure relevance to Health and Wellbeing Boards as well local authorities

Dissemination

- Disseminate widely so that organisations that NICE would not normally target receive the quality standards, such as community groups and colleges

Training and commissioning

Participants felt that quality standards:

- Should inform commissioning guides

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- Could form part of practitioner training programmes so that NICE guidance becomes an accepted part of practice and commissioning
- Could be used as part of the tendering process for local authority contracts as a marker of high quality care

Participants also suggested that NICE should consider:

- Involving professional bodies, such as the College of Social Work to ensure use of quality standards in training
- Linking with young people to develop and deliver training

Cost

- Consider producing cost impact reports to define what is needed for local areas. Cost effectiveness is becoming a useful driver for change and if services are deemed cost effective, they are more likely to be provided locally, especially considering financial pressures on services

Service users

- Consider that the quality standards may be used by looked-after children and young people, or their advocates, to challenge commissioners and providers to provide better services

3.1 Evidence Sources

A list of evidence sources presented at the workshop is included in Appendix B. The following questions relate to this list.

3.2 Questions 6 to 8:

- **Are these evidence sources appropriate?**
- **Can you suggest other NHS Evidence accredited sources?**
- **By only using NHS Evidence accredited sources are there other resources we are not including?**
- NICE/SCIE guidance was prepared with a limited evidence base which means there will still be constraints around what the QS can say
- Consider using non-NHS Evidence accredited guidance to plug the gaps in the existing guidance for the quality standards but need to balance research cultures and the need for the best available evidence and therefore any deviation from this process needs to be done in a robust and defensible way.

- Note that not all areas of care are covered specifically by these sources, such as delivery of placements, transition of care. Many reports are also very negative and do not present positive results
- Consider carrying out an evidence review to identify gaps in the existing guidance. This could take the form of a qualitative review.

4.1 Other documents

A list of other documents presented at the workshop is included in Appendix C. This includes documents on the policy context as well as national reports and reviews. The following questions relate to this list. Workshop attendees were also asked to submit any further relevant document references to NICE following the workshop

4.2 Questions 9 to 11:

- **Are these policy documents appropriate?**
- **Can you suggest other important sources?**
- **Are there any other reports, audits, surveys or reviews specific to the looked after children and young people that would be of use?**
- Participants felt that the following specific sources of information that should be included as references in the topic overview:
 - Department for Education (2011) *The Munro Review of Child Protection: Final Report – A child centred system*
 - Department for Education (2011) *Safeguarding Children Across Services*
 - National Children’s Bureau: Healthy care programme
 - Work by Professor Mike Stein
 - Centre for Social Justice policy work
 - Department for Children, Schools and Families (2010) *IRO Handbook: Statutory guidance for independent reviewing officers and local authorities on their functions in relation to case management and review for looked after children*
 - National Care Advisory Service work
 - York Serious Case Reviews Unit
 - Joseph Rowntree Foundation papers
 - David Berridge work
 - LARK children’s centres work
 - Office of the Children’s Commissioner work
 - Office for the Children’s Rights Director for England
- Participants also highlighted other potential types of information that could be useful:

- Local perspectives
- Young peoples' views
- Leaving care
- Role of CAFCASS
- CAMHS and transition services
- Criminal justice service and managing children on remand
- Borderline personality disorder
- Antisocial personality disorder

Participants highlighted the importance of the following key documents which had already been included in the topic overview:

- Department for Children, Schools and Families (2010) [Sufficiency: Statutory guidance on securing sufficient accommodation for looked after children](#)
- Centre for Excellence and Outcomes in Children and Young People's Services (2009-10) [Vulnerable \(looked after\) children](#)

5.1 Topic Expert Group constituency

Participants at the workshop were asked which categories of people should be invited to apply for membership of the Topic Expert Group (TEG) to formulate the quality standard.

Suggestions for TEG members included:

- Representative from the justice system/prison service
- Academic
- Carers/foster carers/residential workers
- Employment and training representative
- Special educational needs disability worker
- Relevant voluntary organisation representatives including those delivering a discrete service, and those contracted by a local authority
- Council for Disabled Children representative
- Consideration that as the minimum age requirement for lay members was 16, it was important to ensure that fieldwork was conducted to gain the views of

children and young people in care, but if possible, there should be a looked-after child on the group and at least a recent care leaver

- BME
- Refugees
- Children with disabilities
- Person with legal knowledge and experience
- People in “direct practice”

6.1 Additional notes

The following additional points were raised by the workshop groups for consideration:

- Pilot study of social pedagogy is due to report soon
- Children’s Workforce Development Council will be stood down in March 2012

Appendix A Principles and values (PH28)

The recommendations made in public health guidance PH28 are supported by the set of principles outlined below.

- 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.

These principles were developed by the Programme Development Group based on the principles in the 'Statutory guidance on promoting the health and well-being of looked after children', the six entitlements of the National Children's Bureau 'National Healthy Care Standard' and discussion of a quality of care index.

Appendix B Potentially relevant NICE and SCIE guidance that could be used to support the social care quality standard

The following list demonstrates the NHS Evidence accredited guidance relevant to looked after children and young people that could be used as the evidence sources to develop the statements for the social care quality standard:

[Promoting the quality of life of looked-after children and young people](#) NICE/SCIE. NICE public health guidance PH28 (2010)/SCIE guide 40 (2010) (NHS Evidence Accredited)

[Strategies to prevent unintentional injuries among children and young people aged under 15](#) NICE public health guidance PH29 (2010; NHS Evidence Accredited)

[Alcohol-use disorders – preventing the development of hazardous and harmful drinking](#) NICE public health guidance PH24 (2010; NHS Evidence Accredited)

[Promoting young people's social and emotional wellbeing in secondary education](#) NICE public health guidance PH20 (2009; NHS Evidence Accredited)

[When to suspect child maltreatment](#) NICE clinical guideline CG89 (2009; NHS Evidence Accredited)

[Promoting children's social and emotional wellbeing in primary education](#) NICE public health guidance PH12 (2008; NHS Evidence Accredited)

[Attention deficit hyperactivity disorder: Diagnosis and management of ADHD in children, young people and adults](#) NICE clinical guideline CG72 (2008; NHS Evidence Accredited)

[The most appropriate means of generic and specific interventions to support attitude and behaviour change at population and community levels](#) NICE public health guidance PH6 (2007; NHS Evidence Accredited)

[Interventions to reduce substance misuse among vulnerable young people](#) NICE public health guidance PH4 (2007; NHS Evidence Accredited)

[One to one interventions to reduce the transmission of sexually transmitted infections \(STIs\) including HIV, and to reduce the rate of under 18 conceptions, especially among vulnerable and at risk groups](#) NICE public health guidance PH3 (2007; NHS Evidence Accredited)

[Depression in children and young people: identification and management in primary, community and secondary care.](#) NICE clinical guideline CG28 (2005; NHS Evidence Accredited)

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Appendix C Other documents

Policy context for the social care quality standard

The following list demonstrates the policy context relevant to people with dementia that might need to be considered during the development of the social care quality standard:

Department for Education (2011) The Munro Review of Child Protection: final report, a child centred system

Department for Education (2011) [Family and Friends Care: Statutory Guidance for Local Authorities DFE 2011](#)

Department for Education (2011) [Revised legal framework for looked after children from April 2011](#)

Department for Education (2011) [Fostering Services - National Minimum Standards](#)

House of Commons Education Committee (2011) [Looked-after children: further government response to the third report from the Children, Schools and Families Committee, session 2008-09: fifth report of session 2010-2011](#)

Department of Health (2010) [NHS Outcomes Framework](#).

Department for Children, Schools and Families (2010) [Promoting the educational attainment of children in care \(looked after children\)](#)

Department for Education (2010) [The streamlined legal framework for looked after children: Implementation of care planning and placements regulations and guidance](#)

Department for Education (2010) [Maltreated Children In The Looked After System: A Comparison Of Outcomes For Those Who Go Home And Those Who Do Not](#)

Department for Children, Schools and Families (2010) [Guidance on Looked After Children with Special Educational Needs placed out-of-authority](#)

Department for Children, Schools and Families (2010) [Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children](#)

Department for Children, Schools and Families (2010) [IRO Handbook: Statutory guidance for independent reviewing officers and local authorities on their functions in relation to case management and review for looked after children](#)

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Department for Children, Schools and Families (2010) [Promoting the Educational Achievement of Looked After Children: Statutory Guidance for Local Authorities](#)

Department for Children, Schools and Families (2010) [Sufficiency: Statutory guidance on securing sufficient accommodation for looked after children](#)

Department for Children, Schools and Families (2010) [Provision of Accommodation for 16 and 17 year old young people who may be homeless and/or require accommodation](#)

Department for Children, Schools and Families (2009) [The role and responsibilities of the designated teacher for looked after children: Statutory guidance for school governing bodies](#)

Department for Children, Schools and Families and Department of Health (2009) [Statutory Guidance on Promoting the Health and Well-being of Looked After Children](#)

Department of Health (2009) [Transforming community services: enabling new patterns of provision](#)

Department of Health (2009) [Promoting the health and wellbeing of looked after children - revised statutory guidance](#)

Department of Health (2008) [Children and young people in mind: the final report of the National CAMHS Review](#)

Department for Children, Schools and Families (2008) [Care matters: time to deliver for children in care](#)

Department for Education and Skills (2007) [Care matters: time for change](#)

Department of Health (2007) [Promoting mental health for children held in secure settings: A framework for commissioning services](#)

[Care Standards Act 2000](#)

[Children Act 1989 \(c.41\)](#)

National reports and reviews

The following list demonstrates other national reports and reviews relevant to people with dementia that might need to be considered during the development of the social care quality standard:

Department for Education (2011) [Outcomes for Children Looked After by Local Authorities in England, as at 31 March 2010](#)

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Department for Education (2011) [Prospectus: delivering intensive interventions for looked after children and those on the edge of care or custody and their families](#)

Ofsted (2011) [Outstanding children's homes](#)

Ofsted (2011) [Children on the edge of care](#)

Ofsted (2011) [Children's care monitor 2010: Children on the state of social care in England](#)

Local Government Improvement and Development (2011) [10 questions to ask if you're scrutinising services for looked after children](#)

Ofsted (2010) [Safeguarding and looked after children: national third sector organisation survey 2010](#)

Ofsted (2010) [Safeguarding and looked after children: national results for children's social work practitioners survey 2010](#)

Ofsted (2010) [Before care: a report of children's views on entering care](#)

Ofsted (2010) [Inspections of safeguarding and looked after children services: framework for inspection and guidance for local authorities and partners](#)

Ofsted (2010) [Conducting safeguarding and looked after children inspections](#)

Ofsted (2010) [Inspections of safeguarding and looked after children services: evaluation schedule and grade descriptors](#)

Ofsted (2010) [An evaluation of the provision of mental health services for looked after young people over the age of 16 accommodated in residential settings](#)

Ofsted (2010) [Safeguarding and looked after children: national third sector organisation survey 2010](#)

Ofsted (2010) [Safeguarding and looked after children: national results for children's social work practitioners survey 2010](#)

Ofsted (2010) [Inspections of safeguarding and looked after children services: framework for inspection and guidance for local authorities and partners](#)

Centre for Excellence and Outcomes in Children and Young People's Services (2009-10) [Vulnerable \(looked after\) children](#)

Audit Commission (2010) [Education of looked after children toolkit](#)

National Audit Office (2010) [Survey of youth offending teams](#) (page 12)
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Commissioning Support Programme (2010) [Outcomes and Efficiency: Commissioning for Looked After Children](#)

Royal College of Paediatrics and Child Health (2010) [Safeguarding Children and Young people: roles and competences for health care staff](#)

Children's Workforce Development Council (2010) [Professional Practice Standards for Residential Child Care](#)

Children's Workforce Development Council (2010) [The relationships and supports that matter to children looked after \(CLA\) in long term voluntary accommodation \(Children Act 1989, s. 20\)](#)

Centre for Excellence and Outcomes in Children and Young People's Services (2010) [Closing the gap in educational achievement and improving emotional resilience for children and young people with additional needs](#)

Department for Children, Schools and Families (2009) [Improving the Educational Attainment of Children in Care \(Looked after Children\)](#)

Department for Children, Schools and Families (2009) [Characteristics, Outcomes and Meanings of Three Types of Permanent Placement - Adoption by Strangers, Adoption by Carers and Long-term Foster Care](#)

Department for Children, Schools and Families (2009) [Disproportionality in Child Welfare - The Prevalence of Black and Minority Ethnic Children within the 'Looked After' and 'Children in Need' Populations and on Child Protection Registers in England](#)

SCIE (2009) [SCIE Guide 26: It's my story: helping care-experienced young people give effective media interviews](#)

National Foundation for Educational Research (2009). [Provision of Mental Health Services for Care Leavers: Transition to Adult Services \(LGA Research Report\)](#)

Department for Children, Schools and Families (2008) [Reunification of Looked-After Children with their Parents: Patterns, Interventions and Outcomes](#)

Ofsted (2008) [Looked after children: good practice in schools](#)

SCIE (2008) [SCIE Report 19: Learning together to safeguard children: developing a multi-agency systems approach for case reviews](#)

SCIE (2008) [Working with challenging and disruptive situations in residential child care: sharing effective practice Knowledge review 22](#)

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SCIE (2008) [CIE Research briefing 24: Experiences of children and young people caring for a parent with a mental health problem](#)

National Treatment Agency for Substance Misuse (2007) [The role of CAMHS and addiction psychiatry in adolescent substance misuse services](#)

Department for Children, Schools and Families (2007) [Determining the Optimum Supply of Children's Residential Care](#)

Ofsted (2007) [The right people for me: helping children do well in long-term foster care](#)

National Children's Bureau (2007) [Grief matters for children - support for children and young people in public care experiencing bereavement](#)

National Children's Bureau (2007) [Healthy care programme handbook](#)

Transforming Conflict and National Centre of Excellence in Residential Child Care (2007) [Restorative approaches in residential child care](#)

TCRU (2006) [Advocacy for looked after children and children in need: achievements and challenges](#)

National Children's Bureau (2006) [Working with the parents of looked after children](#)

National Audit Office (2005) [Improving school attendance in England](#)

Joseph Rowntree Foundation (2005) [The experiences of young care leavers from different ethnic groups](#)

Joseph Rowntree Foundation (2005) [Resilience and young people leaving care](#)

Joseph Rowntree Foundation (2005) [Mentoring for young people leaving care](#)

SCIE (2004) [SCIE Guide 6: Promoting resilience in fostered children and young people](#)

SCIE (2004) [SCIE Guide 7: Fostering](#)

SCIE (2004) [SCIE research briefing 9: Preventing teenage pregnancy in looked after children](#)

SCIE (2004) [Permanence Planning: Notes for Practitioners](#)

SCIE (2004) [SCIE Knowledge review 05: Fostering success: An exploration of the research literature in foster care](#)

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SCIE (2003) [SCIE Knowledge review 02: The adoption of looked after children](#)

SCIE (2003) [SCIE Position paper 1: Effectiveness of childminding registration and its implications for private fostering](#)

SCIE (2003) [SCIE Report 2: Working with families with alcohol, drug and mental health problems](#)

SCIE (2003) [Innovative, tried and tested: a review of good practice in fostering](#)

Appendix D Stakeholders represented at the workshop

Association for Young People's Health

Association of Directors of Children's Services

Barnardo's

British Association for Adoption and Fostering

British Association of Social Workers

British Psychological Society

Care Leavers' Association

Children's Workforce Development Council

College of Occupational Therapists

Department of Health

Discern2 Consultancy

Fostering Network

Institute of Psychiatry, King's College London

Loughborough University

Mandy de Waal Consultancy

National Care Advisory Service

National Children's Bureau

National Institute of Health Research – Public Health

Northumberland, Tyne and Wear NHS Foundation Trust

Ofsted

Pure Innovations Ltd

Royal College of General Practitioners

Royal College of Nursing

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Royal College of Paediatrics and Child Health

Royal College of Speech and Language Therapists

SACCS Ltd

Sheffield City Council

Social Care Institute for Excellence

United Kingdom Homecare Association

University of York

Who Cares? Trust

Appendix E Next steps

November 2011	Adverts for Topic Expert Group members go live on NICE website
January 2012	Topic Expert Groups convened and scopes of two topics drafted
March/April 2012	Engagement with stakeholders on pilot topic scopes
May 2012	TEGs draft quality statements. Publication of pilot topic scopes
16 th August to 16 th October 2012	Consultation on draft quality standards with stakeholders and fieldwork carried out
November 2012	TEGs consider consultation comments and redraft quality standards
December 2012	Final fieldwork report published
2 nd April 2013	Publication of final quality standards

NB. All dates are provisional and are subject to confirmation.