

# Secure in Scotland, Looking Ahead

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### **Briefing Note for Sector Leads**

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## Introduction

The Scottish Government commissioned the Centre for Youth and Criminal Justice (CYCJ) to undertake an “independent, analytical, practice focused and strategic” review of secure care <http://www.gov.scot/Topics/Justice/policies/young-offending/secure-care>.

The secure care project began in August 2015. It will produce an Interim Report in June 2016 and will conclude with a final report in March 2017.

## Project Remit and Approach

The remit set by Scottish Government builds on the Securing Our Future Initiative (SOFI), the most recent national review of secure care, which published its report and recommendations in 2009. The remit is wide ranging, with a twenty month timescale for delivery.

The Scottish Government’s objectives for the secure care national project are:

1. Identifying and helping to promote current best practice across the secure care sector.
2. Assisting with the review of current placement and transition mechanisms and the transition experiences of children and young people coming into, moving within and moving on from secure care.
3. Identifying and exploring the quality of alternatives to secure accommodation in children and young people’s services across Scotland.
4. Developing future medium/longer term options for the sustained operation of the secure estate and providing recommendations for the Scottish Government, secure care providers, local authorities and their representative bodies, to consider.
5. Building capacity to make comparisons with (and learn from) other administrations in the UK and beyond.
6. Monitoring the profile and needs and characteristics of children and young people in secure care.
7. Considering the extent and quality of implementation of the nine recommendations from SOFI and reflecting on progress, projecting beyond 2017 to 2019.
8. Engaging fully with all stakeholders concerned with the secure estate to scope and assess strategic options for key partners involved with commissioning, providing and purchasing services from secure providers.
9. Ensuring every element of the work is cognisant of - and aligned with - the Children and Young People (Scotland) Act 2014.

The project initially focused on identifying and establishing relationships and priorities with key stakeholders. These were taken into account alongside the above remit to inform the production of a project plan. The plan sets out a vision statement, six thematic intended outcome areas and related key deliverables. A series of consultative and fact finding meetings was held with key partners and stakeholders. This included focus sessions with groups of young people and the secure care workforce and leadership teams, at each of the five secure care centres in Scotland. Discrete pieces of work have begun with several key agencies. Some of these are described later on in this note.

The core aim of the vision statement is to bring key people together to discuss and debate current (and consider future) strategic, policy and practice and responses to high risk and vulnerability. Stakeholders have reported that they welcome the space that has been created for the sometimes difficult conversations that are necessary to explore fundamental questions around the value (in every sense) of secure care, and its place within the continuum of interventions.

*The project vision statement:*

For those children and young people in Scotland for whom placement in secure care is necessary to keep them and/or their communities safe, they experience secure, nurturing, high quality care, where their needs and rights are recognised, understood and met and there is a positive impact on their immediate and longer term safety and wellbeing.

*The project approach:*

Inquiry (listening to and understanding the lived experience and practice evidence)

= HIGHLIGHTING STRENGTHS

+ IDENTIFYING GAPS AND FLAWS

+ EXPLORING SOLUTIONS

= Outputs: Project as Inquiry and Intervention towards realising some of the outcomes

An initial stakeholder engagement event took place in December 2015. This brought together representatives from seventeen Local Authorities, including managers from children and families' and youth justice services, third sector agencies, commissioning managers, senior staff and directors from each of the secure care services, as well as Scottish Government colleagues, CoSLA, and Education Scotland. In light of the outputs from this event and in response to broader stakeholder feedback, the key deliverables and emphasis of the outcome areas are being updated for the 2016/17 project plan.

## **Headlines So Far: Achievements, Risks and Challenges, and Opportunities**

The project outcomes areas have been considered thematically with stakeholders. The three themes are: Transitions; Mental and Emotional Health and Wellbeing; and Strategy for Sustainability. A range of achievements, risks, challenges and opportunities have been identified and a summary of these follows.

### **Achievements**

- There are examples of highly effective multi-agency integrated approaches to youth justice and to identifying high risk and vulnerabilities, though not all Local Authority areas have the infrastructure, capacity or need to replicate models such as One Glasgow.
- There is a range of third sector providers with substantial experience, knowledge and capacity in delivering complementary services which may prevent the need for young people to be secured, for example Includem services, Up-2-Us and Stepdown. This includes services which can offer gender specific interventions and a range of specialist supports.

- The admission process and experience at each of the centres is delivered by skilled, well trained and knowledgeable staff
- The secure care centres have all invested in developing effective outcomes and evidence based approaches to care planning, including transitions. Transitions within the secure care services themselves are generally well managed, for example young people moving into a longer stay facility on campus.
- Where funding and geography allows, secure care centres are able to offer effective transition support to young people, families/the receiving carers or support team.
- Edinburgh Secure Services is run by Edinburgh City Council and has wraparound through care and aftercare support which is highly rated by those young adults whom it supports. Whilst there is varying capacity among the four not for profit secure care centres in relation to close support/transition support, those who do deliver transition supports offer high quality options.
- The national contract framework (Scotland Excel on behalf of all 32 Local Authorities and Scottish Government) has brought some clarity and focus around expectations of secure care placements, (and of placing authorities) around transition planning.
- The Mental Welfare Commission and Care Inspectorate are confident that secure care centres are meeting the mental and emotional wellbeing needs of young people with diagnosed mental health problems well.
- There is evidence that the secure care sector is developing (and in some cases embedding) trauma informed thinking across service planning, staff training and day to day practice. Services have adopted an integrated team approach with clinical, wellbeing, education and care staff working closely together.
- The messages from the current review of youth custody secure provision in England, and recent case studies from other European countries, suggest that we could be doing more to broadcast the high quality of care and education delivered in Scotland in comparison.

## **Risks and Challenges**

- Local Authority stakeholders have described a lack of national coverage and availability of quality, affordable, intensive, effective community based services which can respond to the care and protection needs of the most vulnerable/high risk young people and prevent the need to secure.
- Arrangements for secure screening vary across the country – as does understanding and expectations of the nature and purpose of secure care as part of the continuum to meet the needs of the most vulnerable young people.
- Pathways into secure care are not always clear and the quality of consideration of options and alternatives at Children’s Hearings appears to be variable. Young people, some Children’s Reporters, and the majority of secure care staff (140) who took part in focus sessions around transitions believe that the CHS timescales require review.
- The high use of emergency measures currently risks young people being re-traumatised by the secure care admission process. A lack of information and time available to prepare for a young person’s admission is damaging for young people. It can prevent effective risk assessment and response and increases the likelihood that secure care centres might take a risk averse approach to admission, for example in

relation to searches. This is less the case with ESS, where secure care services are integrated with the Local Authority's strategic, planning and service framework.

- Young people consistently describe a lack of information and preparation for them and their families prior to becoming secured, with a high proportion of young people stating that they did not feel well prepared and/or informed by social workers, children's panel members and other carers.
- The interface between the CHS, adult justice system and secure care requires to be revisited. Many stakeholders expressed concern at the inequity of treatment for 16 to 18 year olds.
- Some 12% of young people experiencing secure care between 2013 and 2015 were in secure care on three or more occasions. Further analysis of repeat placements and the reasons for them is required.
- Current funding pressures can only increase – whilst some Chief Social Work Officers voiced a view that community based safe care arrangements should eventually replace the traditional model of secure care centres, they acknowledged that the capacity to redirect funding/bridge fund this transformation is unlikely to be available for the foreseeable future.
- Secure care providers seeking to develop their remit and broaden the transition services they deliver find themselves without the financial capacity to do so.
- The current framework and timescales for review of the contract with the four non Local Authority secure care centres does not allow for longer term planning in terms of the current physical estate. A debate is needed to explore the current governance and funding arrangements as to who holds and shares responsibility for managing the physical estate and associated risks.
- The limited number of centres and geographical spread means considerable practical challenges/logistics in relation to family contact, social work contact with placement, planning and Through care. It also limits the possibilities for single gender or other specific secure care centres.
- The role of the third sector is unclear; there is a lack of connectivity with local authorities and awareness of what services are available. There is no national directory of available services and the involvement of the third sector in screening processes (to divert from, pre, during or after secure care) is unclear.
- The interface with Education Authorities, Health (and CAMHS), housing and Throughcare services can be problematic i.e. significant difficulties in ensuring effective continuity of support and relationships and ensuring that young people transitioning from children to adult services are supported with these transitions.
- Despite a considerable body of knowledge and practice research around trauma and distress and young people in care and to some extent in secure care (and the developments towards therapeutic practice within the sector), there are no specific national standards relating to the health needs of young people in secure care.
- The interface between CAMHS and the secure care centres is complex, with some in-house psychologists and nurse practitioners describing difficulties and delays in referral to F CAMHS and/or CAMHS. Practice examples were given which indicated that young people with very significant needs had been 'deprioritised' by CAMHS as a result of becoming secured. Health and wellbeing staff across the secure centres described significant frustrations with accessing medical records, reports and assessments.

- There is a need to explore understanding and use of language and definitions – medicalising trauma and the impact of adversity on young people’s mental and emotional health and wellbeing is not helpful – but young people are being secured because clinicians are assessing that life-threatening self-harming is not a medical issue – but a ‘behavioural’ problem.
- There are tensions in relation to the funding and resourcing of mental health assessment, supports and treatment. Local Authorities currently fund the secure care centres Specialist Interventions Teams, through the weekly fee. What is health’s contribution?
- The dissolution of the previous secure care forum where practitioners and services could network and share best practice and initiate events which would involve other partners is regarded as a loss by the secure care workforce.
- There has been little consistent focus on secure care in the past few years; there’s now a need for some form of strategic partnership to provide that national overview of secure care and ensure everyone with a role to play is engaged and involved.
- We still know very little about what works and longitudinal research is required to explore outcomes around intervention and high risk/vulnerability and secure care.

### **Opportunities:**

#### **Transitions**

In response to some of the questions raised by a scoping study undertaken by Kristina Moodie, CYCJ in 2015, <http://www.cycj.org.uk/resource/secure-care-in-scotland-a-scoping-study/> and to the stakeholder concerns about variance in approach across Scotland, research with Chief Social Work Officers and Local Authorities, is planned to start in April and will report within the life time of the secure care project.

The secure care project will engage with CHIP and YJIB, CoSLA and SLGP, SWS and other partners including CELCIS to explore local authority and other partners’ responsibilities in relation to transition planning, and the interface between preventative and complementary services and secure. A survey of SCRA and CHS Area Support Teams to explore the quality of consideration of secure care and options within children’s hearings will be completed.

Stakeholders have welcomed the review of National Care Standards as an opportunity for the development of National Standards for secure care. Such standards could enable consistency of experience and approaches, for example in relation to transition planning and approaches to separation and restraint/safe holding across the centres.

#### **Mental and Emotional Health and Wellbeing**

Within the secure care sector there is an appetite for exploring both the possibility of a specialist mental health secure care centre, and the extension of the IVY model in relation to creating a national service or resource which could deliver trauma and distress response services.

More broadly stakeholders are keen to see more attention paid to how universal and specialist health services (in-reach) are delivered to young people in secure care. The secure care project has shared stakeholder feedback with relevant Scottish Government colleagues in relation to the current development of the Mental Health Strategy.

### **Strategy for Sustainability**

Stakeholders agree that there has been a lack of national focus on secure care in recent years, for example secure care and young people at the thresholds of secure care, are not referenced in the Getting it Right for Looked After Children Strategy. There is an appetite to address this, and to continue the conversations about the purpose and place of secure care within children's services, to review the remit and membership of the secure care national steering group and connectivity with CHIP and the YJIB.

These conversations will be essential to inform the review of the commissioning and funding arrangements over 2016/7.

The development of a vision and strategy for secure care services and our response to high risk and vulnerability is regarded as necessary by all stakeholder groups and the secure care project will focus on facilitating discussion towards the underpinning principles for this.

Led by Dr Emma Miller, a project group based at University of Strathclyde is currently developing a longitudinal research project to explore outcomes for young people. Stakeholders have expressed support for this and a priority for the secure care project in 2016/17 should be to ensure sector engagement and involvement with this research.

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<http://www.cycj.org.uk/news/national-secure-care-project/>