# **Secure Care in Scotland**

# Report of the Secure Care Strategic Board to Scottish Ministers

This report has been developed in collaboration with all members of the Secure Care Strategic Board. The Board is represented by members from the four Independent Secure Care Centres in Scotland, Edinburgh Secure Services, Education Scotland, Children's Hearings Scotland, Social Work Scotland, Convention of Scottish Local Authorities (COSLA), Scotland Excel, Care Inspectorate, Scottish Children's Reporter Administration (SCRA), Argyll and Bute Health and Social Care Partnership, NHS Scotland: Child Health, NHS Greater Glasgow and Clyde, Scottish Prison Service (SPS), Centre for Youth and Criminal Justice (CYCJ) and Scottish Government. A member from the Independent Care Review also acts as an observer role on the Board.

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# INTRODUCTION

# **Purpose**

This report to Ministers details the work of the Secure Care Strategic Board (the Board). The Board was established in 2017 in response to the findings and recommendations arising from the independent review of secure care in Scotland (known as the Secure Care National Project), commissioned in 2015.

In the 2017-18 Programme for Government, the Scottish Government committed to developing secure care national standards and establishing a transformative model for secure care in Scotland through a new Secure Care Strategic Board. The aim was to improve the experiences and outcomes of our most vulnerable young people, improve how we support and protect those young people and to report to Ministers on the work of the Board.

# This report presents:

- The outputs from the five work streams established to realise the Board's aims;
- The transition of the visioning work from the Board into the Independent Care Review (ICR) as agreed between the Minister for Children and Young People and the Chair of the ICR in Autumn 2018;
- Recommendations for further action including a suggested approach to the completion of outstanding work in relation to National Standards for Secure Care and Commissioning.

#### Context

The aim of the Board was to provide a clear set of strategic proposals and a recommended approach to commissioning which fulfils medium and longer term expectations and projections in relation to the use of secure care.

The Board agreed to create a vision for the future purpose and place of secure care; develop national standards for secure care; and consider the future commissioning of secure care in Scotland.

The Board's remit was based on the findings and recommendations of the secure care national project including three reports published by the Centre for Youth and Criminal Justice (CYCJ) <u>Secure Care in Scotland: Looking Ahead</u> (October 2016), <u>Secure Care in Scotland: Young People's Voices</u> (September 2017) and <u>Chief Social Work Officers and secure care</u> (May 2017). The report from a previous review of secure care in Scotland, entitled the <u>Securing Our Future Initiative</u>, (SOFI) (April 2009) and current evidence and analysis also informed the Board's considerations.

Secure care is among the most intensive and restrictive forms of care available for children and young people in Scotland. The <u>Secure Accommodation (Scotland)</u> <u>Regulations 2013</u> and <u>Public Service Reform (Scotland) Act 2010</u> define secure accommodation as accommodation provided for the purpose of restricting the liberty of children in a residential establishment, where care services are provided. This can be through the Children's Hearings System (CHS) or the justice system on the following conditions:

- (a) that the child has previously absconded and is likely to abscond again and, if the child were to abscond, it is likely that the child's physical, mental or moral welfare would be at risk;
- (b) that the child is likely to engage in self-harming conduct; or
- (c) that the child is likely to cause injury to another person.

There are currently five secure care centres in Scotland, offering 84 places (with 6 additional 'emergency' or 'respite' places across the centres, which are not within the current secure care contract). Four are independently run by charitable organisations and one directly by the City of Edinburgh Council. Edinburgh Secure Service is not part of the national contract framework for secure care, which is managed by Scotland Excel, the Centre of Procurement Expertise, on behalf of the 32 Scottish Local Authorities and Scottish Government, and under which individual contracts are negotiated with each of the four independent charitable organisations. The centres are:

- Good Shepherd Secure Unit, Bishopton (18 places)
- Kibble Safe Centre, Paisley (18 places)
- Rossie Secure Accommodation Services, Montrose (18 places)
- St Mary's Kenmure, Bishopbriggs (24 places)
- Edinburgh Secure Service (6 places, primarily for Edinburgh children and young people through the CHS)

At any one time, around 90% of the young people from Scotland in secure care are there through the CHS - they are Looked After Children who are subject to a Compulsory Supervision Order (CSO) or an Interim Compulsory Supervision Order (ICSO), with an authorisation for secure accommodation issued by a children's hearing on conditions as defined in Section 83(6) of the Children's Hearings (Scotland) Act 2011 (the 2011 Act).

Up until 2009 secure care was mainly seen through a youth justice lens. In 2007, there were six secure care centres in Scotland offering up to 112 places and 307 young people were secured during that year. By 2009, Scotland had seven secure units offering 124 places.

The SOFI report in 2009, made nine substantive recommendations, including a planned reduction in the size of the secure care sector, with the subsequent closure of two centres. SOFI was undertaken as part of the wider National Residential Childcare Initiative (NRCCI) and it considered secure care as part of the care system. The SOFI report welcomed the Getting it Right for Every Child (GIRFEC) principles and approach, and anticipated increased investment to improve earlier and more effective community based responses to vulnerable young people, which would prevent them being detained in secure care.

In 2011 the Whole System Approach (WSA) to offending by young people was rolled out across Scotland. This approach is underpinned by GIRFEC principles, and is focused on prevention and early intervention, addressing the needs of young people as well as their behaviours. WSA provides a commitment to alternatives to custody and secure care with the view of keeping young people out of formal systems as far as possible, together with an understanding that where detention is necessary, this

should be within a care rather than custodial setting, wherever possible. Whilst not wholly down to WSA and the wider GIRFEC framework, these approaches have led to more focus on community based responses and supports for vulnerable young people.

In 2015 the Scottish Government published the Youth Justice strategy 'Preventing Offending: Getting it right for Children and Young People'. The strategy continued to highlight the importance of a preventative, early intervention approach involving multiagency partnerships. The strategy recognised the on-going need for good quality secure care to improve outcomes for children with highly complex needs and suggested that we continue to build on good practice to improve outcomes for children in secure care. It also highlighted the need for effective transitions for those moving to secure and moving on from secure care. Without these successful transitions and support around education and health – in particular mental health – young people may not be supported enough to move on.

Since 2011 the number of Scottish young people being secured has been on a downward trend and most recent figures show that the average number of young people in secure care at any one time (including cross border placements) during 2016-17 was 76, a decrease of 11% from the previous year. Although the overall numbers have gone down, the levels of vulnerability and complexity of the individual needs among this smaller group of young people has intensified, with recent studies showing that they are young people who often experience significant psychological distress and have experienced multiple childhood adversities.

Whilst fewer children and young people from Scotland have been placed in secure care, there has been a significant increase in the numbers of cross border placements from England, since 2015. In 2016 an English High court case ruled that cross border placements from England to Scotland were unlawful without specific new authority. Amendments were made to the <a href="UK Children and Social Work Act 2017">UK Children and Social Work Act 2017</a>, with the consent of the Scottish Parliament, which enabled local authorities in England and Wales to continue to be able to place children in secure accommodation in Scotland.

Of all admissions to secure care during 2016-17, 30% were from the rest of the UK, compared to 18% in 2015-16 and 6% in 2014/15. As of January 2019, the proportion of young people in secure care in Scotland placed here from the rest of the UK is approximately 38% of the 84 places.

The cross border situation will remain a factor for consideration as the Scottish Government further develops a strategic approach to responses to children and young people in and on the edges of secure care in Scotland.

The numbers of placements from outside Scotland is one of a number of complicating factors, which lie alongside a rapidly changing domestic landscape. Our growing understanding of the needs and vulnerabilities of these young people, including mental health and wellbeing needs, whether they are secured through the CHS, or the Justice system, needs to be reflected in policy and practice.

The Secure Care National Project reports all outline continuing ethical tensions between and across professionals and agencies about the place and purpose of

secure care, and people with direct lived experience of secure care including children currently living in secure care.

These complexities were tragically highlighted by the deaths of two young people in Scottish Prison Service custody in 2018. The Scottish Government has committed to reflecting on issues raised around health and wellbeing, including the use and availability of secure care in Scotland, the place of 16 and 17 year olds in the CHS and Justice system, and the nature and level of support available to young people in custody. Suicide prevention and reforming young people's mental health with a focus on early intervention are key priorities. The Children and Young People's Taskforce, led by Dame Denise Coia and the Suicide Prevention Leadership Group, chaired by Rose Fitzpatrick, will support this work.

This, together with the mental health review in HMP&YOI Polmont, which was announced by Ministers on 28 November 2018, provide a focused approach to addressing concerns. The work of the Independent Care Review and Secure care will require to be linked in to these discussions.

# **Secure Care Strategic Board - Outcomes**

As noted, the work of the Board stemmed from papers published as part of the Secure Care National Project. The remit of the National advisor role was to work with sector leads and other partners to ensure the effective delivery of service to children in secure care; review current trends, achievements and risks, and; make recommendations to partners about future configuration of secure care services.

The Board first met in October 2017, where it was agreed that four work streams would be set up to pursue the work. In addition there was early discussion around how best to ensure the effective participation and inclusion of people with experience of secure care.

# The groups were:

- Participation Advisory Group STARR
- Vision and Purpose of Secure in Scotland
- Care and Health Pathways and Standards
- Research and Evidence
- Commissioning

Board members with lived experience of secure care established a Participation Advisory Group, termed **STARR**. This group is unique, in that all of the members have lived experience of being in and/or on the edges of secure care. The aim of STARR is to ensure that people with lived experience *advise*, *influence*, *inform and challenge* professionals and decision makers, and that children and young people are fully included within the national, local and daily decisions that affect them.

The **Vision and Purpose** group was set up to develop the vision, purpose and values framework for the Board to consider. The Board agreed a comprehensive Vision, Purpose, Values and Actions framework with clear guiding principles for responses to children and young people living with extreme vulnerabilities and risks of harm to

themselves and or others. This was sense checked with the STARR group and helped to inform the direction of the other work streams.

The **Pathways and Standards** group was tasked with progressing a framework for the development, design and delivery of national standards for secure care, to inform and underpin the approach to the commissioning, inspection and regulation and quality assurance of services for children and young people. A programme was completed with young people currently in secure care, which was co-ordinated and supported by the STARR Chair and other work stream members who came together to form a 'co-production' team and also with 'Standards Champions' who are based at each secure care centre. The agreed draft standards are at Annex B.

As discussions progressed, it was agreed that the **Research and Evidence Advisory Group** would become an advisory network. This network has been a connecting point between existing groups, the Board work streams, and related research projects. These included a detailed census of all children and young people in secure care in Scotland undertaken by CYCJ. This census explored children's wellbeing needs and backgrounds including care journeys and experiences of adversity. The *Talking Hope* Project, led by the University of Strathclyde in partnership with the Good Shepherd Centre, Ayrshire and Arran NHS and East Ayrshire Council, has also been connected with the network. The network also gave advice and helped to shape a data analysis project completed by Scottish Government over the summer of 2018.

The **commissioning** work stream was tasked with exploring options for the future commissioning of secure care services. It was important to achieve a clear vision and set of principles and objectives before beginning detailed work in relation to the next procurement cycle for contracted secure care services. The Commissioning Group will continue beyond the life of the Board, with responsibility for developing the national procurement approach for the next contract round.

#### RECOMMENDATIONS FOR THE FUTURE

The Board proposes three recommendations for the future around governance, pathways and standards and commissioning:

# **Recommendation 1:** Governance and Practice Development

In order to build on the work previously delivered through the Secure Care National Project and the Board, a governance group should be created in order to continue to ensure that specific attention is given to this agenda, particularly in relation to the pathway and standards framework. Such a group should be underpinned by the Vision and Values agreed by the Board.

The establishment of a future secure care national group would:

- ensure a sustainable governance and practice support model
- complete the drafting of the pathway and national practice standards for secure care
- oversee stakeholder engagement, design, delivery and implementation of the pathway and national practice standards for secure care
- support the next and future procurement cycles for secure care in Scotland as taken forward by the National Commissioning Group
- ensure inclusion, connectivity and knowledge exchange between and across national bodies and groups, including those responsible for supporting vulnerable young people in and on the edges of secure care.

Such a group would also ensure links are made with other national Boards such as the Youth Justice Improvement Board (YJIB) and its Implementation Groups; the Children's Hearings Improvement Partnership (CHIP) and its sub groups and the National Youth Justice Advisory Group (NYJAG).

# Recommendation 2: Delivery of National Standards for Secure Care

The delivery of the pathway and standards framework was a core objective for the Board from the outset and this will require continued support and attention to ensure that the standards are implemented and are considered through the next commissioning process.

There has been considerable contribution from children and young people, those with care experience and professionals including the secure care centres. It is vital that clear governance, accountability and support arrangements continue.

The Board proposes that CYCJ continues to support this work through to completion. CYCJ is currently recruiting a Secure Care Practice Development Officer whose role will include supporting this work.

# Recommendation 3: Commissioning and Procurement

We propose that the current Commissioning work stream re-establish itself as the National Commissioning group, examining different commissioning models and providing clear guidance on the contract specification in time for the next procurement

round in 2020. In order to ensure that the voices of young people are taken in to consideration, this group will include membership from those with care experience. Whilst the independent secure care providers will continue to be members of this group, it is recognised that there are points at which, due to the commercial sensitivity of the discussions, it would not be appropriate for them to be part of the discussions.

Initial phases of work should include:

- Commissioning March to June 2019 to allow the contract specification to be refined and for the commissioning process to be prepared.
- Procurement process July 2019 to March 2020 to consider the procurement process and governance/legal procedures.
- Delivery April 2020 new contracts will be awarded and become active in April 2020.

We envisage that the Commissioning group will ensure that the approach to the commissioning of individual places in secure care, together with the development and longer term transformation of secure care services, will be informed by the newly developed National Pathway and Standards.

The aims of the Commissioning group should be to:

- Ensure alignment of the vision, values, principles and strategic direction for intensive community supports and secure care; and the approach to the commissioning of secure places.
- Provide links between statutory inspection, regulation and evaluation activities, and associated time frames and the programme of financial, contract and performance management activities undertaken by Scottish Government and local authorities (via Scotland Excel) as current commissioners and purchasers of secure care services.
- Support the achievement of consistency of standards in how the physical environments and workforce is resourced, cared for and developed.

Thereafter we suggest the Commissioning group provides strategic direction and guidance in relation to national quality assurance and contract management functions undertaken via Scotland Excel and local authorities.

# Actions already agreed: Transition of future vision to Independent Care Review

In October 2018, the Minister for Children and Young People agreed that in view of increasing synergies between the Journey Stage of the Independent Care Review and the longer term objectives of the Board, aspects of the Board's work should transfer to the Independent Care Review (ICR). This approach will realise the commitments made by the Scottish Government to: involve young people in driving change; integrate secure care within the wider GIRFEC framework; and improve health and care pathways including the development of national standards for secure care.

As part of this transition, the support functions of CYCJ will also move to the ICR to enable the progression of the visioning work and to support the progress of the STARR group, ensuring the inclusion of people with lived experience of secure care.

The ICR intends to ensure consideration of secure care across the work groups of the ICR, with particular focus within the components of care group. The individual and collective impact of STARR and the 'reach' of this core group across the work streams of the Board has been significant. The ICR will continue to place the voice of care experienced people at the heart of its work, including STARR.

The ICR will continue to seek to deliver improvements and to support positive change throughout the Journey. In its final stage, the Destination, the ICR will leave a lasting set of improvements, informed by babies, infants, children and young people with lived experience of the care system, which will determine the future of secure care in Scotland.

## STARR

The Government's ambition is that children and young people who are in and on the edges of secure care should be able to participate in all aspects of day to day and formal decisions which affect them. Article 12 of the United Nations Convention on the Rights of the Child states that: "When adults are making decisions that affect children, children have the right to say what they think should happen and have their opinions taken into account."

The Board's approach was informed by the findings of the Secure Care National Project (August 2015 to December 2017) in relation to participation and inclusion:

- A lack of information, preparation, support to and participation of young people, prior to becoming secured and during their secure care 'journey'.
- The majority of young people expressed some unhappiness about the way in which
  formal and day to day decisions were made about them, rather than with them,
  often stating that they did not feel listened to, heard and or understood. Sometimes
  these concerns related to the secure care settings. Often they also related to social
  workers, children's hearings and other professionals involved in their lives
- There is evidence of considerable variation in approach regarding young people's
  participation in day to day operational policy and practice development, for
  example when services are reviewing 'whole school/centre' policies, including
  those relating to restrictive practice.
- Similarly, there was variance in how each secure care centre, and each placing team, ensures young people's ongoing meaningful participation and equitable access to advocacy and children's rights services.

There was a consensus between Board members and work stream members that the inclusion of care experienced people was vital.

For simplicity, the approach to participation and inclusion was based on the Lundy Model of Participation (Lundy, 2007) which was developed to help duty bearers involve children meaningfully in decision-making. According to this model, four separate factors require consideration: Space, Voice, Audience, and Influence. A proposal for a Participation Advisory Group was developed to ensure that engagement with children and young people in secure care and young people and adults with secure care experience would enable their effective and well supported individual, group and collective participation.

In a paper prepared for the Board from its first meeting the STARR group presented a Vision for change and for the purpose and function of STARR and made an initial recommendation that:

"The Board should in its report to Ministers in December 2018; set out clear recommendations and options to ensure sustainable mechanisms for young people to have their say and to advise, inform, influence and challenge for as long as there are contained care settings. We are clear that this approach is not a time limited 'project', but is about changing approaches for the long term."

The Group saw the term 'STARR' as representing the North Star; a constant, an anchor, a guiding light, and for ambition, and expressed the hope that everyone involved with secure care will aim high and be brave and bold about changes for the future.

Although not an acronym, the letters STARR represent a meaning. 'S' is seen as representing safety, safe space, security, sensitivity and of course secure care experience and amplifying the voice of secure care experience. 'S' also speaks to the importance of safeguarding and how this must improve across the System.

'T' represents transformation, but also the sense of being together and collectively involved in influencing that transformation. 'T' can also indicate treatment as the group members are keen to advise, inform and influence approaches to the help and care children and young people are offered in response to the trauma they have experienced. It also refers to training and learning, as this is another area that the STARR group members are keen to influence in terms of the qualities, attitudes and skills of professionals involved with supporting young people in and on the edges of secure care.

'A' indicates advocacy and advice as the STARR group have been advising the Board and advocating for children and young people. The ambition is that secure care experience informs and shapes approaches to Children's Rights compliance and for this to improve throughout the system for children and young people. It can also indicate awareness and attitudinal change as a key theme is the need to challenge negative assumptions and labelling and improve understanding of children and young people in secure care or where there are worries about significant harm to self and or other people. 'A' may also for some people refer to the answers they are seeking in relation to their experiences and the importance of acknowledgement and validation where care experiences have been difficult. The letter 'A' represents accountability – of the Board and Corporate Parents to children and young people with experience of secure care, and of the STARR Group members to them and to each other.

The double letter RR captures the fundamental importance of respect for children and young people, for their rights and for how we all work together; the importance of valuing and investing in relationships, including family, friendships and helping relationships when children and young people are in need of intensive support; and relational approaches; a hope for a revolution in thinking and practice, improved representation and fulfilment of rights, better recognition of needs and the value and importance of reflection and reflective practice for carers, practitioners, policy and decision makers.

STARR has undertaken focused workshops producing reports and content in relation to; the Vision, Purpose, Values and Actions developed by the Board; a comprehensive traffic light and strategic implications review of the draft pathway and national standards framework; and a set of key messages and asks which was presented to the Chair of the Board and the ICR.

# **VISION AND PURPOSE**

The Board established a Vision and Purpose work stream which met on several occasions between December 2017 and July 2018. This visioning work was underpinned by young people's Calls for Action and the recommendations and findings outlined in Secure Care in Scotland: Looking Ahead.

The Board agreed Vision, Purpose and Values Statements aligned with GIRFEC, and with many of the ICR Intentions. The emphasis is on compassionate, nurturing, rights based care and support to children and young people within their own families and communities wherever possible, minimising the need for restriction of liberty.

There is a particular emphasis on the importance of relational based support and for all professionals to be skilled and knowledgeable in delivering trauma informed care.

The Statement itself is attached at Annex A.

#### PATHWAYS AND STANDARDS

The development of national standards to ensure the rights and improve experiences and outcomes for children who are in or on the edges of secure care in Scotland was highlighted as necessary in *Secure Care in Scotland: Looking Ahead*, and during the previous SOFI review. This is also key to the integration of secure care within the Getting it Right for Every Child framework.

Based on GIRFEC the intention was to develop a Pathways and Standards framework designed to:

- improve the experiences of, and seek to provide better outcomes for, young people; through a coherent set of expectations and standards across the continuum of intensive supports;
- ensure that children and young people are treated with respect and dignity, and that their human and children's rights are upheld;
- support the National Health and Social Care Standards and the legal requirements, ethos and principles set out in all the relevant existing statutory and practice guidance;
- set out what young people and their families should expect from professionals and Corporate Parents when a young person is being intensively supported in the community or in a secure care setting.

The resulting draft National Pathway and Practice Standards are therefore designed to be applied wherever young people are experiencing extreme vulnerabilities and risks in their lives, i.e. are in or on the edges of secure care. The standards are not service led but follow the journey before, during and after secure care, ensuring all Corporate Parents are held collectively to their responsibilities. This need for a pathway approach reflects the concerns and accounts shared by young people and professionals throughout the Secure Care National Project work and during the co-production of the Pathway and Standards.

The multi-agency work stream taking forward the development of the National Standards and any future implementation is chaired by the Care Inspectorate. Membership includes two Board members (the STARR Chair and the Principal Reporter) and members from four of the five Scottish secure care centres, several lead clinicians from different professional and regional CAMHS areas, Social Work Scotland, Scotland Excel, Scottish Prison Service, and Centre of Excellence for Looked after Children in Scotland (CELCIS).

# The Pathway should:

- align with, and support, the vision and purpose of secure care as developed by the Board:
- keep young people's voices, rights and needs central to its design, production, implementation and review;
- recognise the intrinsic link between good outcomes for these young people and a proactive, multi- agency and whole system approach to their care;

• be useable by: young people; their families, carers and advocates; professionals and regulators to quality assure and assess performance.

The draft pathway and national standards have been co-produced and sense checked by people with lived experience of secure care. The work stream and STARR members have developed their considerations and suggestions about the strategic and resource implications for the design and delivery of the standards.

A programme called 'From me, for me, with me' was completed with young people who are in secure care now. The programme engaged young people in a wide range of creative, design and discussion projects. The programme produced a wealth of direct quotes and written statements. There are stunning art works, written pieces, Letters From Me to Me, 2D and 3D designs in which young people have shared how they feel; what helps and what needs to be different - delivered through these standards.

The secure care centres involved a range of methods to capture young people's thoughts and views - some presented these in mind map and storyboard formats. All of this material was reflected in both in the finalised Standards and the accompanying Strategic and Practice Commentary advice on the draft standards.

The draft national pathway and practice standards can be found at annex B. The next stage is to achieve clarity on the governance and resourcing of the process to ensure the inclusive methodology is carried forward.

# RESEARCH AND EVIDENCE

The Board agreed that the Secure Care Research and Evidence Group (SCREG) would no longer be a work strand of the Board, but become an advisory network with a changing membership.

The current groups and projects underway are:

- The Secure care research group chaired by Dr Helen Smith, Consultant Forensic Child and Adolescent Psychiatrist. This is a group of individuals from across Scotland interested in developing, completing and sharing knowledge from, research in relation to young people in and on the edges of secure care and their mental health and wellbeing needs in particular. The membership of the group includes representatives from 4 of the 5 secure providers along with CYCJ, NHS GGC, and the Universities of Strathclyde, Glasgow and Dundee. Dr Smith and other NHS colleagues who are members of this Glasgow based group are also members of the SCREG and were involve with the Vision and Purpose work stream of the Board.
- CYCJ undertook a detailed snap shot census of all children and young people
  who were in secure care during a particular week of summer 2018. Detailed
  analysis of this wide ranging questionnaire based exploration of the profile of
  needs and vulnerabilities among this group is ongoing and initial findings reenforce other UK studies in relation to the complexities of these young people's
  lives.
- The Talking Hope Project is led by University of Strathclyde in partnership with the Good Shepherd Centre, Ayrshire and Arran NHS and East Ayrshire Council, and has been closely connected with the group, and the Board. The Talking Hope Project Lead is a member of the SCREG and has previously undertaken research and practice development work across the Scottish secure care sector, commissioned by Scottish Government. Following an initial pilot Phase 1, the Talking Hope Project held a reflection and evaluation event in October 2018 and is discussions are underway in relation to funding from the Scottish Government and the Good Shepherd Centre to carry this work forward into a Phase 2 Project.

Details of literature and evidence available about young people in and on the edges of secure care was pulled together. This information will be updated and can be used as a research reference point.

# **Scottish Government Funding**

The Scottish Government funded a short piece of work to analyse the Secure Care section of the Children and Social Work Statistics. We now have five years of data evidence which can now readily enhanced and updated each year as part of the data project.

The Scottish Government has agreed to fund a one day conference in Stirling on 18 February 2019 delivered by the Glasgow Secure Care Research Group to highlight and celebrate the ongoing research work in relation to secure care.

Officials are discussing with Dr Emma Miller how the learning to date from Talking Hope Phase 1 can inform a wider audience. Funding to enable a specific Phase 2 with an emphasis on supporting young people in transitions into and out from secure care, needs to be considered.

There are significant gaps in our understanding of longitudinal impact and outcomes from secure care in Scotland. The last major exploration by Who Cares? Scotland and the University of Strathclyde was in 2008. The Scottish Government is discussing how best to explore options for a 5 year plus study which will focus on the health (especially mental health and wellbeing) of young people in and on the edges of secure care.

# **Secure Mental Health Facility for Young People**

In October 2016 Ayrshire and Arran NHS Board approved and endorsed the business case to host a 12 bedroom national secure forensic mental health inpatient service for young people. The service will be the first of its kind in the Scottish healthcare system and will provide assessment, treatment and care for young people whose complexity and severity of risk requires a secure setting. The challenges and complexities of working with these young people require a level of expertise that is, unfortunately, not widely available in the UK. The aim is to treat these young people within Scotland and return them to their own community services following therapeutic intervention. It is anticipated the facility will be ready to accept young people in 2020.

Research around young people in secure care needs to continue in order to inform the future of secure care.

## COMMISSIONING

A key outcome of the board was to explore options for the future commissioning of secure care services – both the next procurement cycle for contracted secure care services and the more longer term vision. A commissioning group was established, chaired by COSLA, to take this work forward.

In order to develop this area of consideration, the group first needed to establish and understand the future needs of secure care based on information around referrals. However, understanding the longer term demand and supply of secure care is complex and proved difficult in the timescales available. It was also important that a clear vision and set of principles and objectives were agreed prior to any detailed work commencing.

It was, agreed that the longer term consideration of secure care work would, therefore, be taken forward through the work of the ICR, as agreed by the Minister for Children and Young People in October, and that the board and the Commissioning group would consider and complete discussions around the next commissioning round to commence in April 2020.

It is proposed that the commissioning group becomes the National Commissioning group responsible for developing the commissioning model and cycle for the next round.

Commissioning is reliant on the pathways and standards and so this work will take in to account the agreed vision and will be built around the new national standards. Gathering consistent, meaningful quality information on the number of referrals is also key and so the group will have close links to the Pathways and Standards and Research and Evidence Advisory Groups. In order to ensure the voices of young people are taken in to consideration, this group will include representation from a care experienced young person.

Initial phases of work include:

- Commissioning phase March to June 2019 to allow the contract specification to be refined and for the commissioning process to be prepared.
- Procurement process July 2019 to March 2020 to consider the procurement process and governance/legal procedures.
- Delivery phase April 2020 new contracts will be awarded and become active in April 2020.

It is envisaged that the new contract arrangements will cover a two year period with the option of a further 12 month extension, if required, to allow improvement and for as much progress to be made in that time frame, whilst aligning with the ICR. This will be a matter for the Commissioning group to consider and agree.

# CONCLUSION

Members of the Board are committed to ensuring that improvements are made to the outcomes and experiences of Scotland's most vulnerable children and young people.

The Board have made key achievements since its establishment in 2017 including:

ensuring there is collaboration with care experience people and that all voices are heard:

- creating a vision for secure care; and
- developing draft pathways and standards for secure care, which will support future commissioning.

The three recommendations outlined in this report aim to ensure future collaboration and continuation of the commitment to this agenda. The transition of future visioning work to the Independent Care Review is imperative to progression.

The focus on secure care has been brought to the forefront in recent months, bringing in to question the capacity of secure care. Key pieces of work have been progressed in order to improve the transparency of information held around the availability of secure placements and the process to be taken by those looking to purchase secure placements. It is widely accepted that the current funding model for secure care in not sustainable and it is appreciated that any long term changes will have financial implications, which need to be considered. Discussions are progressing with key partners around the capacity of secure care placements. Whilst this work has not been delivered directly through the Board, this work is key to the future of secure care.

Ministers are invited to note the work of the Board and its recommendations for the future around governance, secure care standards and commissioning, as detailed on page 9 and 10.

#### Vision statement

Our vision is of compassionate, nurturing, relational, rights based responses and supports within families, schools and communities; for all children and young people whenever there are concerns about significant harm to self and/or other people.

We are working together to Get It Right for Every Child, focused on making sure children and young people are offered early, timely, appropriate and high quality supports to help them fulfil their potential.

Scotland is striving to become a country where all children and young people; whatever the vulnerabilities and risks associated with their distress and actions; are cared for as children and where no child or young person is deprived of their liberty.

# **Purpose statement**

The purpose of Intensive support; including where this is offered in a containing care environment; is to provide compassionate, nurturing, relational, rights based care and specialist, personalised support, aimed at:

- keeping children, young people and others safe
- preventing and reducing risk of further harm to children and young people and or others
- helping young people make sense of past hurts and harm

# Whilst always:

 promoting children and young people's wellbeing and development building hope, resilience and opportunities for their future

# **Values and Principles**

We are committed to making sure that where there are worries about significant harm to self and or others, children and young people:

- Feel cared for; valued; heard; safe; and respected
- Receive the right help and support at the right time and in a way that is right for them, in their families and communities
- Experience continuity of relationships and care
- Are offered intensive supports and specialist help when they need this

In order to realise these commitments, we will be guided by these values and principles:

#### Child centred

Developing and investing in personalised supports which are right for the unique individual child or young person and focus on the whole person, and on the protection of their rights and the promotion of their wellbeing and development.

# **Collective ownership**

Everyone working together across the whole system to promote understanding about these children and young people and to challenge the negative assumptions and layered stigma that we know many young people face. Everyone contributing to achieving the vision together across Scottish Government, and all relevant organisations and partners.

# Fluidity, flexibility and responsiveness - across the continuum

Investing time, energy, staff skills, knowledge and resources, across the whole continuum. Thinking creatively about the best use of the skills and expertise available across the secure care workforce, and how to widen access to this specialist help for the most vulnerable children and young people and those who care for them. Ensuring that a 'safe haven' is available where children and young people need this. Where a 'safe haven' involves any deprivation of liberty or restricted liberty, ensuring that this only happens when absolutely necessary, is justifiable within an ethical and legal framework consistent with the UN Convention on the Rights of the Child, is backed by professional judgement and assessment and is regularly reviewed to ensure such a placement is for the minimum period possible to coincide with the child's needs.

# Focused on preventing harm

Early recognition of needs, and early intervention and support to improve life chances for the most vulnerable children. Ensuring that wherever a child or young person lives, intensive support (and when they need it, specialist help) is provided by caring, compassionate, well trained, well supported, highly skilled, and knowledgeable adults.

#### Informed

By children and young people and the best available evidence from lived experience, from practice and from research, particularly in relation to the impact of childhood trauma and adversity and approaches to risk assessment and violence reduction.

#### Relational

Valuing, recognising, and enabling continuity of, relationships with people important to the child or young person and enabling stable, consistent helping relationships to support the child or young person. Continuity of care and support, so that what the child or young person needs is provided where it will have greatest positive impact for the child or young person and their immediate, and longer term wellbeing and outcomes, and there is continuity of staff and approach throughout their journey/the continuum.

**Annex B** 

# Secure Care in Scotland: Draft National Pathway and Standards Framework

# **DRAFT STANDARDS**

# **JOURNEY STAGE BEFORE...**

#### **STANDARD 1**

I am involved and have influence in the discussions about how to meet my needs and my care and support. These discussions involve the people who are important to me.

# **STANDARD 2**

My needs are met by intensive supports in the community which are right for me, help keep me and others safe, and prevent my liberty from being restricted.

# **STANDARD 3**

The professionals supporting me understand the impact that any trauma and difficulties I have experienced may have had on me and they respond to my needs sensitively.

# **STANDARD 4**

I am offered specialist support which helps me and people looking after me make sense of the difficulties I have experienced. I get the mental health care and treatment I need, as and when I need it.

#### **STANDARD 5**

I am well supported to have influence in any discussions about potentially restricting my liberty.

# **STANDARD 6**

I am involved and influence any decision to recommend secure care for me.

I am fully prepared for, and understand, the possible outcomes of any meeting or Children's Hearing.

#### STANDARD 8

I benefit because the people making decisions about my future at Children's Hearings fully understand the law. They consider my needs, and the risks for me and others, in depth.

# **STANDARD 9**

I know and feel confident that Children's Hearings and the Courts always consider meaningfully all community based options to keep me and others safe.

# **STANDARD 10**

I have access to legal representation (or/and) high quality independent advocacy before and during any decision making process about restricting my liberty.

#### **STANDARD 11**

I understand my rights to appeal any decision to restrict my liberty. I am given time to ask questions, to access independent advocacy or/ and to seek legal advice.

# **STANDARD 12**

I fully understand the reasons for any decision to restrict my liberty. These reasons are written down in my Child's Plan, and any records or reports, with care and in a way which helps me understand.

# **STANDARD 13**

I know what my rights will be during my stay in secure care. These are explained by someone I know and trust before my placement begins.

# **STANDARD 14**

I know the details of where I will stay and I have access to information which explains daily life there. Every effort is made to enable me to visit before going to stay.

I fully understand what to expect of my journey to secure care and I am treated with sensitivity and respect. Someone I know and trust comes with me.

#### **DRAFT STANDARDS**

#### **JOURNEY STAGE DURING ...**

#### **STANDARD 16**

I am welcomed at the main entrance unless it is unsafe for me or others, for that to happen. This is based on my individual circumstances and needs.

# **STANDARD 17**

When I arrive, the decoration and style of any entrance and reception area is welcoming and feels safe, comfortable and friendly.

# **STANDARD 18**

I am supported by someone I know on the day of arrival and I feel welcomed and reassured by everyone involved.

# **STANDARD 19**

I have everything I need when I arrive to keep me safe and healthy and so do the people looking after me.

# **STANDARD 20**

I am only ever searched when this is absolutely necessary to keep me and others safe and based on my individual circumstances at that time.

#### **STANDARD 21**

If I have to be searched, I am treated with respect, dignity and compassion at all times. I understand my rights and I understand the reasons for a search and how it will happen. The level of search is proportionate and as least intrusive as possible.

I have access to the things I need to safely help me relax and rest in my personal space/bedroom and it is comfortably furnished and decorated.

#### STANDARD 23

I always have access to a children's rights worker including as soon as possible after I arrive at the service.

#### **STANDARD 24**

I am fully involved and have influence in discussions, which happen within 72 hours of me arriving, about what I need during my stay and who will help me and how.

#### **STANDARD 25**

I am actively supported to be in touch with my family, friends and other people who are important to me unless this is not in my best interests. I have a say in how and when this happens.

# **STANDARD 26**

If my contact with my family and others I care about is supported, supervised or restricted, this happens sensitively and I fully understand the reasons for this and these are recorded.

# **STANDARD 27**

My family and people I care about are encouraged and supported to be in contact with me and are treated with dignity and respect. There is a welcoming, friendly and comfortable environment for us to meet.

#### STANDARD 28

My rights to safely access digital technology are upheld and actively supported. This encourages contact with people who are important to me.

# **STANDARD 29**

My physical, mental and emotional needs are understood. I am involved in the plans to make sure I have the treatment and support I need, when I need it.

I am well supported to manage my feelings and so if I am ever restrained, this is only when this is absolutely necessary to prevent harm. I am treated with respect, dignity and compassion and I am held in the least restrictive way for the shortest time possible. I am well supported afterwards.

#### STANDARD 31

I get the care, comfort and individual support I need when I am distressed and so I am only ever isolated from other people when this is absolutely necessary to keep me or others safe. This is for the shortest time possible.

#### **STANDARD 32**

My learning needs are assessed and I am supported to make the most of all my abilities and talents. Educational, vocational and community based experiences and qualifications prepare me well for my future.

# **STANDARD 33**

I am supported and encouraged to complete the subject studies and any qualification programmes or courses for which I have been entered.

#### **STANDARD 34**

I benefit from the wide range of experiences, programmes and opportunities I am offered to help me develop my strengths and skills and build hope for the future.

# **STANDARD 35**

I know that staff looking after me care about meeting my needs because the way they relate to me shows me this. My daily group living experience is appropriate for my developmental needs.

# **STANDARD 36**

I am supported to contribute to and comment on all reports that are written about me. The person writing the report consults with me and I have my say about all the recommendations and decisions that affect me.

# **STANDARD 37**

I fully understand the reasons for any decision to further restrict my rights and freedoms. These are proportionate and recorded.

I am confident that any reports written and shared about me focus on my hopes, strengths, achievements and goals, as well as on my needs and risks.

#### **DRAFT STANDARDS**

#### **JOURNEY STAGE AFTER...**

#### **STANDARD 39**

I am supported to have my say about my future and am fully involved and influence this from an early stage.

# **STANDARD 40**

I am fully prepared and have influence on recommendations that will be made at meetings that make decisions about my future. I understand my rights to representation.

#### **STANDARD 41**

My plans for moving on meet all my needs and involve everyone who has responsibility to care for and support me as long as I need this.

# **STANDARD 42**

I am fully prepared for making the transition from the service and this is taken at a pace which means I am completely ready.

# **STANDARD 43**

I know that people I know well and have trust in will continue to be involved in supporting me after I leave the service.

# **STANDARD 44**

I have as much choice as possible and am able to visit the place that I am moving on to. I get to know the people there as they have been involved in planning with me for the move.

# **STANDARD 45**

I have all the care and support I need, for as long as I need it, to help me keep moving forward.