The research summaries this month look at preventing youth offending including:

- Young people’s views of restorative justice-based approaches.
- A case study demonstrating the importance of identifying any speech, language and communication needs young offenders may have, in order to enable change.
- A long term study identifying factors associated with youth offending.
- An article exploring recent trends in Youth Justice in England and Wales and possible future directions.

Policy and report highlights this month

- The DfE is seeking views on a draft Knowledge and Skills Statement for child and family social workers involved in the ‘permanence process’.
- NICE is consulting on its draft Quality Standard covering the transition for all young people (up to age 25) transitioning from children’s to adult’s health and social care services.
- The DfE has published an independent review of post-adoption support interventions.
- NSPCC and RiP have launched a new online framework to help local areas improve practice when responding to harmful sexual behaviour by children and young people.

Related resources by Research in Practice

- Understanding adolescence Frontline briefing
- Risk-taking adolescents and child protection Frontline Briefing
- That Difficult Age: Developing a more effective response to risks in adolescence Evidence scope
- Promoting resilience in children, young people and families Frontline Briefing
- Voice of the child Evidence Review
- Communicating with children and young people with developmental delay, communication difficulties and disabilities Frontline Briefing
- Communicating with children and young people with speech, language and communication needs, Research Messages Workshop
  - 22 September, Birmingham
  - 13 October, London
  - 22 November, Bristol
  - 24 January, Manchester 2017
- Key evidence for direct work with children and adolescents In-house workshop
- Introduction to restorative practice In-house workshop
- Commissioning early help Strategic Briefing
- UPCOMING How do you know if your early help services are working? Leaders' Briefing
- Children’s Social Care Innovation Programme: Delivering an integrated service for complex and troubled young people Blog by North Yorkshire County Council
Related resources by others

- Are Restorative Justice Conferences Effective in Reducing Repeat Offending? Findings from a Campbell Systematic Review
- Preventing youth offending briefings: Realising Ambition's third and fourth Programme Insights
- Looked after children and offending: reducing risk and promoting resilience, by TACT and the Centre for Research for the Child and Family
- An Australian study on the impact of the Pathways to Prevention Project on child behaviour and wellbeing by Homel et al (2015)

Resources this month

- Insights into the lives of a small sample 8-year-olds identified in infancy as at risk of harm, by the DfE
- Listen to the most recent Iriss.fm episode on social pedagogy and how it's been used in practice at Camphill, Scotland
- Tri-Borough Focus on Practice: The Department for Education's evaluation report
- Decision-making in children's social care: quantitative analysis by the Department for Education
- Supporting young people in care: evaluation of the impact of the DfE an Action for Children's 'Better by Design' project
- How to overcome barriers to effective multi-agency working and information sharing: recommendations by the Centre of Excellence for Information Sharing
- A House of Commons paper summarising evidence and policies on early intervention targeted at children from 0-5 including Sure Start
- National Working Group report reveals an inconsistent approach to safeguarding disabled children across LSCBs in England
- iamsocialwork: an initiative providing support and networking for student, newly qualified and qualified social workers throughout the UK
Articles and Summaries

“Re-inventing Diversion” (2014)

This article reviews recent developments in the area of ‘out of court’ disposals in youth justice in England and Wales, highlighting the recent trend towards decreased use of formal procedures to deal with the reported offences of children and young people.

‘Diversion’ has been part of youth justice in England and Wales since the early part of the 20th century (Home Office, 1927) and shifts away from prosecution and court procedure are now mirrored by the use of diversionary measures of varying formality. Since 2008, there have been reductions in the use of formal procedures at all youth justice stages, from the point of entry through to the use of custody, resulting in a considerable liberalisation in the treatment of young offenders. To understand an emerging pattern of outcomes, the article summarises figures showing a decrease in crime running parallel to this liberalisation and considers some innovations in ‘diversionary’ practice, before suggesting possible explanations for what is happening, and which may point towards future developments.

This summary looks at the current diversionary practice methods highlighted within the article.

**Youth Restorative Disposal (YRD)**

The YRD was designed to be administered by the police, available only once to young people found to be responsible for ‘low-level, anti-social and nuisance offending’ (Rix et al, 2011: 2) and only where the young person concerned had not previously received a reprimand, final warning or caution. It was expected that the YRD would incorporate a ‘restorative’ element; subsequent research indicated that this usually consisted of an apology, although compensation and reparation arrangements were also utilised. Apologies might be ‘instant’ in cases of shoplifting, but could involve a ‘conference’ with young person, victim and possibly parents/guardians (Rix et al, 2011).

The evaluation of the YRD found that there was a degree of agreement amongst practitioners that it was a ‘good mechanism for dealing with young people and reducing first time entrants to’ the justice system (Rix et al, 2011: 27).

**Triage**

Triage schemes ‘based in police stations’ combined diversion from ‘formal sanctions’ with restorative interventions (ICPR, 2012: 4) while ensuring that welfare needs were addressed. Thus Triage was intended to be an initial assessment of young people reported for an offence, followed by a specific response:

- level 1, leading to ‘diversion from the youth justice system’
- level 2, involving ‘a referral to supportive interventions’
- level 3, resulting in ‘fast-tracked progression through the system’

(ICPR, 2012: 5).
The appropriate level of intervention would be determined according to specified criteria including offending history and ‘gravity’ of current offence. In practice, Triage operated variably in different areas but was nevertheless ‘highly valued for its early intervention and diversionary approach by many… stakeholders’ (ICPR, 2012: 30).

**Youth Justice Liaison and Diversion (YJLD)**

The YJLD pilot scheme was introduced in 2008 to promote a more welfare-oriented approach to diversion, inspired by evidence that young people entering the YJS were approximately twice as likely to experience one of a range of ‘vulnerabilities’, including mental health needs and learning difficulties. YJLD would seek to identify opportunities to divert young people:

- ‘away from the YJS (…towards mental health, emotional support and welfare systems (taking into account proportionality, public interest and risk management issues)’
- to provide ‘enhanced’ services to meet their needs
- to encourage diversion ‘away from custodial settings’ within the YJS

(Haines et al, 2012: 24).

In practice, the scheme was implemented differently across the six pilot sites and police resistance was encountered, due to possible impact on their detection figures (a system which has now been abolished). Referral routes were varied, and the timing of the referrals themselves had implications for the potential to avoid formal processing of young people. In some cases, police had already made decisions before the YJLD scheme became involved. Some systematic pathways for diverting away from the YJS were established in the pilot sites, while other sites implemented a more ad hoc approach to diversion (Haines et al, 2012: 60).

**Challenges and prospects**

The author finishes by praising the establishment of diversion as a legitimate core objective and celebrates a number of effective local initiatives. However, three areas of concern are discussed which seem to represent significant unresolved issues in light of the changing face of diversion in youth justice. Namely:

- there being different underlying justifications for and ways of undertaking out-of-court disposals, with consequences for understandings of what constitutes a ‘successful’ outcome
- the onset of economic difficulties and the need for agencies to achieve cost savings coinciding with the onset of the recorded decline in prosecutions in the late-2000s
- the possibility of a more deliberate process at play in the withdrawal of the state from areas of life with which it is no longer concerned, associated with ‘localism’.

**References**


It is estimated that between 60-90 per cent of young offenders have speech, language and communication (SLC) needs (Bryan et al, 2007) and 20-30 per cent have a learning disability (Loucks, 2007), meaning the functions of the youth justice system (YJS) are unintelligible for many within it and that support interventions within Youth Offending Teams (YOTs) to prevent re-offending may be setting up those they support to fail. Research considers whether aspects of Autistic Spectrum Disorder (ASD) are pre-disposing factors for offending behaviour. (Howlin, 2004; Allen et al, 2008; Freckleton and List, 2009)

Although health is a statutory part of the multi-agency YOTs as part of the Crime and Disorder Act 1998, lack of stipulation of the exact role health should play means localities configure their teams differently, many relying on Child and Adolescent Mental Health Services’ (CAMHS) limited input to fulfil this requirement.

This paper seeks to consider how learning disability nursing skills compliment the range of expertise in the multi-professional YOT, using a case study highlighting these skills to improve the experience of a young woman with previously unidentified needs through the YJS, from pre-sentence to completion of her Order.

Role of the learning disability nurse

A learning disability specialist enables person-centred care specific to the person’s strengths and needs, helping to balance between individual welfare and victim justice. Newman (2012) states their role also ensures “timely referrals for more specialist assessments and better data collection to inform future service planning and delivery.”

Early recognition of needs is a vital factor in the success of co-working with such specialists. If an individual need is hidden and an intervention plan agreed which does not allow for the difficulties the young person may face in meeting requirements, valuable time may be lost resulting in the young person breaching their order and the practitioner feeling they have little or no impact.

When concerns are raised and a referral is made to the specialist worker, the child or young person’s individual needs are assessed – including mental capacity and mental health needs, SLC needs, the possibility of a brain injury, or physical concerns such as epilepsy or diabetes. As with all YOT staff, the specialist worker endeavours to build a trusting and enabling relationship, while ensuring the young
person has the capacity to enter a plea and whether support and reasonable adjustments/specialist resources would be required in Court. In addition, the specialist worker communicates their needs through contribution to the pre-sentence report (PSR), liaison with the judiciary and court officer or supporting directly in Court and planning care with the case holder to ensure the intervention is accessible and meaningful.

Case Study

Alice’s story demonstrates the impact of an intervention where the specialist worker encourages the allocated YOT practitioner to work with Alice’s presenting behaviour, resulting in an overdue diagnosis of ASD and an effective plan to suit Alice's individual needs and ability:

- Working in close collaboration with Alice and her family and agreeing each aspect of the plan with them, reviewing it when further needs became apparent.
- Assessment using the Ability Screening Index (Hayes, 2000), the Adaptive Behaviour Scale (Lambert et al, 2003) and the Adaptive Behaviour Assessment System (Harrison and Oakland, 2015) identifying hidden yet significant needs which would impact on Alice's ability to comply with her Order.
- Using relevant resources (Kelly, 2016) to highlight how Alice’s facial expression, tone of voice and body language communicate a range of emotions. Through role play with different members of the YOT Alice practiced recognising, understanding and using body language, she engaged in work around her conversational skills, how to start and end discussions and learnt about appropriate topics for discussion.
- Using visual prompts and symbols to enable Alice to stop inappropriate behaviour – and to implement a successful community project working in a local care home for older people with dementia, helping them to use symbols to communicate their needs to staff.
- Building on strengths and celebrating success.

Alice agreed to information about the successful work she had completed and her diagnosis being shared with the victim of her offence, which helped the victim understand it and feel reassured it would not reoccur. Alice was provided with information about support groups to ensure ongoing support upon completion of her order.

References


www.rip.org.uk
“Risk, promotive, and protective factors in youth offending: Results from the Cambridge study in delinquent development” (2015)


This article reports on The Cambridge Study in Delinquent Development, a longitudinal survey of 411 London males. The study investigates the extent to which different factors (variables) measured at age 8–10 predicted convictions between ages 10 and 18.

Participants constituted a complete population of boys age 8-9 in schools in a working-class area of London 1961-1962. These males were first assessed in 1961-1962 and followed up to age 48 in interviews and age 56 in criminal records. Information was also collected in annual interviews with parents and from teacher ratings. A wide range of variables listed and defined in the original article were measured. ‘Highest’ and ‘lowest’ categories for each variable were informed by evidence.

Farrington and colleagues introduce a number of definitions to help bring clarity to the topic of protective factors:

- **Risk factors** – a variable that predicts a high probability of offending in the lowest scoring 25 per cent for a given variable eg school achievement.
- **Promotive factors** – a variable that predicts a low probability of offending in the highest scoring 25 per cent for a given variable eg school achievement.
- **Interactive protective factors** - a variable that predicts a low probability of offending among children at risk but not among other children.
- **Risk-based protective factors** – a variable that predicts a low probability of offending among children at risk.

It is important to remember that none of these factors are necessarily causes and that further research would be needed to establish causal relationships.

**Risk factors**

Important risk factors for offending behaviour were:
• High ‘troublesomeness’ (measured using peer and teacher ratings of ‘getting into trouble’)
• High daring (measured using peer and parent ratings of taking risks in traffic, exploring etc)
• A convicted parent

Additional factors associated with an increased risk of offending were low nonverbal intelligence, impulsiveness (psychomotive clumsiness), lower family income, lower socioeconomic status of the job of the highest earning parent in the household, mothers’ anxiety (measured using social worker ratings and records of psychiatric treatment), parenting, and separation from a parent (for at least three months, other than through bereavement).

Promotive factors

A low score for anger and having a smaller circle of friends were separately found to be promotive factors here eg sixteen per cent of boys with low anger scores were convicted compared with 32 per cent of boys with high anger scores. The boy’s anxiety (based on parent ratings) and mother’s working hours also had mainly promotive effects.

Interactive protective effects

The most important interactive protective effects were:

- high nonverbal intelligence, high verbal intelligence, high school attainment, and high parental interest in education (measured using social worker ratings) protected against low parenting capacity.
- high parental supervision (parents knew where their son was when he was out) protected against dishonesty in boys (measured using peer ratings).
- high family income protected against a convicted parent.

For example, of 184 boys whose parents had relatively low capacity to parent, only 13 per cent of 45 with high nonverbal intelligence were convicted compared with 40 per cent of 139 less intelligent boys.

Risk-based protective factors

The most important risk-based protective factors were:

- high verbal intelligence and high school attainment protected against low parenting capacity.
- low daring protected against low parenting capacity and high anxiety in the mother.
- low ‘troublesomeness’ protected against high hyperactivity, low nonverbal intelligence, large family size, low school attainment and separation from a parent
- small family size protected against low nonverbal intelligence.
- high parental interest in education protected against low parenting capacity, separation from a parent, high daring, and poor housing.
- high parental supervision protected against high hyperactivity, high dishonesty, and high anxiety in the mother.

Conclusions

This study revealed numerous promotive, risk-based protective and interactive protective factors indicating that:
• Particular interventions should be targeted at individuals displaying particular risk factors eg since high parental interest in education tends to nullify the risk factor of low parenting capacity, efforts should be made to identify parents with low parenting capacity and improve their interest in their children's education.
• The results of interventions could help to determine which relationships are causal, which is a crucial next step.
• Theories of offending should attempt to explain findings on promotive and protective factors rather than just focusing on risk factors.

Whilst the research’s longitudinal design is a strength it does mean that all the age 8–10 variables were measured many years ago, when social conditions in South London were different. It is important to investigate the extent to which these results might be replicated in more recent longitudinal surveys.

“Restorative justice-based practices in settings with children and young people: Examining the views of young people” (2015)  

Restorative approaches (RA) are characterised by a number of key assumptions:

• victims of crime should actively participate in developing consequences for offenders  
• victims and offenders are not always enemies  
• formal retribution is not the most effective tool to address reoffending (Sherman and Strang, 2007).

One-to-one restorative mediation sessions and restorative conferences reflect these principles and are used throughout the UK. RAs are also used in some schools. Various theories attempt to explain the effectiveness of restorative justice (RJ), including Reintegrative Shaming Theory (RST) (Braithwaite, 1989), and Procedural Justice Theory (Lind and Tyler, 1988). They share the following assumptions:

• tolerating crime increases the likelihood of further offending  
• stigmatising or shaming the person makes crime more likely  
• shaming of a harmful act but remaining respectful of the person reduces the likelihood of further offending

All of these are limited since they do not explore cognitive processes, shaming theories cannot be applied to preventative work (often undertaken in schools) and they do not identify the psychological causal mechanisms via which RJ is intended to work (Morrison, 2005).

Gillard attempts to establish a set of recognisable principles characterising children and young people’s (CYP) experiences of RJ programmes. An interpretive methodology was employed, with six CYP participating in semi-structured interviews. Four participants were school-based and two were YOT-based, only one was male (YOT-based). Following analysis of interview transcripts two overarching themes emerged: open, honest enquiry and empowerment.

Open, honest enquiry

CYP spoke of RA feeling like open, honest enquiry into the harmful act and its context. Sub-themes of
acknowledging your contribution, speaking truthfully and reducing blaming tendencies were evident. The CYP reported feeling safe enough to acknowledge their part, and often attributed this to the shift from retribution to taking responsibility. This was a key factor in being able to speak truthfully, with participants acknowledging they had not previously done so for fear of punishment, “It’s definitely easier to say everything because … it’s not for blame …”.

Blame reduction was linked to feeling others had an increased understanding of your situation and a more sympathetic view of each other, thus reducing the need for persistent persecution. This enabled a shared understanding of the events to evolve and contributed to resolution and feeling relieved. When asked what she felt at the end, one participant replied that, rather than blamed she felt “a lot more happy … I knew what other people had felt, … they knew how I felt”. This links to Daly’s work (1999) suggesting RA is challenging and not instantly in opposition to punitive approaches.

**Empowerment**

The empowerment felt by CYP assisted them in authentic engagement; they felt participation was their choice, and they had a real involvement in solution design. Five participants described making informed choices to participate. A significant factor here was the ability of the RJ practitioner to prepare them for the process, assisting them to feel emotionally safe. Participants spoke of ways forward being decided by them, rather than the adults involved; the mediator played an important part in guiding and clarifying, “he … led us in the right direction … and between us three we … said what we were going to do.” This ownership meant participants were more motivated to adhere to agreements, which has implications for rates of recidivism following RJ approaches.

Gillard’s interpretation of these findings offers a deeper understanding of the psychological processes contributing to the success of RJ approaches. He draws on Barton’s Empowerment Model of Restorative Justice (EMRJ) (2000) to distinguish primary and secondary stakeholders:

- Primary stakeholders (victims, offenders, families) have to be involved since they have the knowledge needed for reparation
- Secondary stakeholders, such as Headteachers, may not have been present or affected by the incident.

Barton’s deep/surface approaches to problem solving are also important. The former is concerned with addressing emotional harm and wellbeing, rather than monetary compensation, and very much chimes with the experiences of CYP here. Participants described RA approaches as flexible and responsive, reflecting practice informed by responsive regulation (Morrison, 2005). Institutions operating in this framework address concerns as and when they arise, and take consideration of other important contextual issues, enabling the problem to be seen within a broader social context rather than as a fundamental flaw in the person/offender. This assists young people to reduce cognitive dissonance without blaming or denial.

**References**


Parliamentary Business

Parliamentary Recess
The House of Commons and House of Lords are now in recess until 5 September. For a full list of Bills currently before Parliament click here.

National Health Service Bill
Margaret Greenwood MP (Lab, Wirral West) has introduced a Private Member’s Bill under the Ten Minute Rule that would reinstate the duty on the Secretary of State to provide ‘a secure and comprehensive NHS’.

Speaking in the House of Commons on 13 July, Ms Greenwood told MPs the duty, which was removed by the Health and Social Care Act 2012, is vital to ensuring government accountability for maintaining a comprehensive NHS. Under current arrangements, clinical commissioning groups ‘are not required to tend to all illnesses and conditions’ and ‘do not have to serve a particular geographic area’.

Ms Greenwood said her Bill was intended to ‘fully restore’ the NHS as an accountable public service by reversing marketisation in the NHS, abolishing the purchaser-provider split and ending contracting.

further info
Consultations

Independent review into Sharia law: Call for evidence

Following the government’s announcement in May that Professor Mona Siddiqui is to lead an independent review into the application of Sharia law in England and Wales, the review team has issued a call for evidence.

The review team wants to hear from anyone who has ‘knowledge, expertise or experience on the use of Sharia law’, especially anyone who has worked as part of a sharia council in the last five years or who has used a Sharia council ‘in any capacity’.

Last month, MPs on the Home Affairs Committee announced they were to hold an inquiry into Sharia councils operating in the UK (see RPU 184). Deadline for submissions 19 August

Draft Quality Standard: Transition from children’s to adult services

NICE is consulting on its draft Quality Standard covering the transition for all young people (up to age 25) making the transition from children’s health and social care services to adult services.

The standard covers young people in local authority care, young people with disabilities, life-limiting conditions or complex or long-term needs, and young people with mental health problems.

The draft standard contains six quality statements:

1. Transition planning should start by year 9, or immediately if a young person enters the service close to the point of transfer.
2. There should be an annual meeting to review transition planning.
3. Parents and carers should be able to discuss their expectations of the transition process at the annual meeting.
4. Young people should have a named worker to co-ordinate their transition care and support before and after transfer.
5. Young people should meet a practitioner from the adult service before they transfer.
6. Where a young person has moved from children’s to adult services but does not attend their first meeting or appointment, they should be contacted by the adult service and given other opportunities to engage.

The final Quality Standard will be published in December. Consultation ends 22 August

Inquiry into children and the internet

A House of Lords committee has launched an inquiry into the impact of the internet on children.

The Communications Committee intends to examine ‘the concerns, as well as the possible benefits,
presented by the changing relationship between children and the internet’. It also intends to investigate how policy and practice might increase the value of the internet for children.

The inquiry will focus on three areas:

1. How increased use of and access to the internet is affecting the development and wellbeing of children, both positively and negatively.
2. The responsibility of industry to develop and maintain controls, and the responsibility of users to practise self-governance.
3. Legislation and regulation.

The committee invites submissions of written evidence that addresses any of the questions set out in the inquiry's terms of reference. These include:

- What risks and benefits does increased use of the internet present for children in regard to: (i) social development and wellbeing (ii) neurological, cognitive and emotional development, and (iii) data security?
- Is current legislation adequate in the area of child protection online? Is the law routinely enforced across different media? What, if any, are the gaps?
- What voluntary measures to protect children have already been put in place by providers of content? Are they sufficient?
- What role should schools play in educating and supporting children in relation to the internet?
- Who currently informs parents of risks arising from internet use and how might parents be better informed? Is there a role for commercial organisations in teaching e-safety to parents?
- What impact does existing legislation and regulation have on the way children and young people experience and use the internet? Is there a need for a more consistent approach?
- Could the government do more? Is a more ‘joined-up approach’ needed involving the collaboration of government with research, civil society and commerce?

**Deadline for submissions 26 August**

[ further info ]

**MPs launch inquiry into hate crime**

The Home Affairs Committee has launched an inquiry into hate crime and its violent consequences.

In the wake of the killing of Jo Cox MP and the rise in racially motivated attacks following the EU referendum in June, Committee Chair Keith Vaz said MPs want to address the risks posed by those with ‘extremist or fixated views’.

Mr Vaz said: ‘Specifically, we will be assessing how well the current system of prevention and prosecution is functioning, the influence of the internet and the role of community and mental health services.’

The committee is inviting submissions of written evidence on (but not restricted to) any of the following issues:

- The effectiveness of current legislation and law enforcement policies for preventing and...
prosecuting hate crime and associated violence.

• Any barriers that deter or prevent people from reporting hate crime, and what measures can be taken to improve reporting.
• The role of social media companies and other online platforms in helping to identify online sources of hate crime and to prevent online hate incidents from escalating.
• The role of the voluntary sector, community representatives and other frontline organisations in challenging attitudes that underpin hate crime.
• Statistical trends in hate crime and how the recording, measurement and analysis of hate crime can be improved.
• The type, extent and effectiveness of support available to victims and their families, and how this could be improved.

Deadline for submissions 1 September

Editorial note: The government has launched its action plan for tackling hate crime, which includes a commitment to carry out a new assessment of the level of anti-Muslim, anti-Semitic, homophobic and other bullying in schools. The Department for Education will also support implementation of a project (piloted in Bradford) to equip teachers to hold conversations with pupils on ‘difficult topical issues’, including ‘debates about extremism and fundamental shared values and will also be a chance to discuss issues concerned with equality, prejudice, hate crime and foreign policy’. And the government will offer more support to young people exposed to hate material online. This will include targeted social media advertising of True Vision, ‘a dedicated hate crime portal which allows victims to report hate crime directly to their local police force’.

further info

Child Maintenance Service Inquiry

The House of Commons Works and Pensions Committee has launched an inquiry into the Child Maintenance Service, which replaced the Child Support Agency from 2012.

MPs are inviting submissions of written evidence that address any of the issues set out in the inquiry’s terms of reference. These include how well the CMS is performing for children and parents, how it might be improved and whether levels of child maintenance are set correctly.

The committee also intends to examine the international evidence on ways of ensuring parents regularly contribute to their children’s maintenance payments, and to consider whether there are any opportunities for government departments to work together more closely to ensure regular payment.

Committee chair Frank Field MP said: ‘The current maintenance system appears to be failing parents in receiving regular payments, demonstrated through the level of outstanding arrears, which stands at £4 billion.’ Deadline for submissions 5 September

further info

Inquiry: Employment opportunities for young people

The Work and Pensions Committee is to consider the needs of young people who are not in education,
employment or training (NEET) as part of a new inquiry into employment opportunities for young people.

The committee wants to consider whether current provision for young people is ‘sufficient to enable their full access to and participation in the labour market’. This will focus on support in the transition from education to employment, the support offered to young people via Jobcentre Plus, and issues around progression and quality of work for young people.

The committee is inviting written submissions that address any one of a range of specified questions. These include:

• To what extent does getting young people into work and supporting them in work require an approach that is distinct from that for other groups?
• What is the likely impact of the end of the Youth Contract on labour market prospects for young people who are NEET, and is action required to mitigate this impact?
• Is current mainstream Jobcentre Plus provision adequate to meet the needs of all young people, including those who are NEET and unemployed graduates?
• How effective is Jobcentre Plus Support for Schools likely to be in enhancing young people’s career prospects? How can the Department for Work and Pensions make sure schools engage with the initiative, and how should its impact be monitored?
• What broader measures, especially those aimed at employers, should be government prioritise to improve the employment rates for young people?

Deadline for submissions: 5 September

further info

Inquiry: Sustainability of the charity sector

The House of Lords Select Committee on Charities is calling for evidence to inform a new inquiry into the pressures facing charities and sustainability across the sector.

The inquiry will be wide-ranging and focus on a number of questions, including:

• **Purpose:** What is the role of charities in civic society? How has this changed and what makes charities distinct from other organisations doing similar work?
• What role can charities play in community cohesion and civic action?
• **Pressures:** What are the main pressures currently facing charities? Are there specific pressures that affect particular types of charity – for example, those that deliver services, are reliant on fundraising income, small and large charities, or charities promoting a particular cause?
• **Leadership and governance:** What skills are required to lead and manage a charity? What support is available to develop these skills within the sector?
• What role should trustees play in the performance and effectiveness of a charity? How can trustees be best equipped, enabled and supported to fulfil their responsibilities?
• **Accountability:** How can charities ensure they are properly accountable to their beneficiaries, donors and the general public? And how should charities assess their long-term viability and/or
sustainability?

- **Resource management**: What are the challenges to financial sustainability, as well as efficient resource and risk management? How can these be overcome and best practice shared across the sector?
- What lessons can be learnt from mergers and dissolutions of charities?
- How can charities deliver services effectively and be assured that their work achieves successful outcomes? What are the benefits and challenges of funding for charities being derived from commercial contracts?
- **Social investment**: What is the potential of social investment and social impact bonds? What are barriers to fulfilling their potential?
- **Role of government**: What should be the role of national government, local government and the Charity Commission?

The Select Committee on Charities, which is one of four new select committees established by the House of Lords earlier this year (see RPU 181), will submit its report by the end of March 2017. The committee is chaired by Baroness Pitkeathley, former Chief Executive of Carers UK and former Chair of Cafcass. She is also an Ambassador for National Voices, a coalition of health and social care charities.

**Deadline for submissions 5 September**

Drug misuse prevention: Draft NICE guidance

NICE is inviting views of stakeholders on draft guidance on the prevention of drug misuse among people ‘who are most likely to start using drugs or who are already experimenting or using drugs occasionally’.

The guideline is aimed at local authority and NHS commissioners, drug prevention and treatment service providers and practitioners, as well as health and social care professionals, including social workers and youth workers.

The draft guidance recommends that drug misuse prevention activities should be delivered through existing services for groups most at risk, including services for looked after children, and youth and family justice services. It says local authorities are particularly ‘well placed’ to address the needs of looked after children but need also to collaborate with schools and health services.

Among ‘at risk groups’, vulnerability to drug misuse might be assessed during routine appointments, such as health needs assessments for looked after children, or opportunistically, such as when young offenders come into contact with the criminal justice system.

The draft guidance also recommends consideration of skills training for children and young people assessed as vulnerable to drug use, and their carers. Personal and skills training for looked after children should place ‘particular emphasis on how to deal with feelings of exclusion’, while training for foster carers should emphasise the use of behaviour reinforcement strategies alongside development of other skills, such as communication, conflict resolution and problem solving.

The guidance, which is scheduled for publication next February, will replace existing NICE public health
Achieving Permanence: Draft Knowledge and Skills Statement

The Department for Education is seeking views on a draft Knowledge and Skills Statement for child and family social workers involved in the ‘permanence process’ (ie, from making permanence decisions to providing placement support) and a draft statement to inform the content of a complementary CPD programme.

Following its earlier publication of Knowledge and Skills Statements for Approved Child and Family Practitioners (see RPU 162 and RPU 166), Practice Supervisors and Practice Leaders (see RPU 177), the Department now wants to ‘promote depth of practice in key areas of child and family social work, starting with permanence’.

The draft statement sets out the knowledge and skills a social worker needs to have in order to ‘successfully undertake the assessment, analysis and permanence decision making we require of them, and progress permanence plans with urgency and skill’.

The consultation also includes a statement to inform the content of CPD programmes for ‘a broad range’ of social workers involved in identifying and securing permanence arrangements, including case holding child and family social workers and those who support placement arrangements’.

The consultation asks respondents whether any knowledge and skills are missing from the draft statement, including any additional knowledge and skills needed to negotiate the legal process, to help a child find permanence quickly, to support families in transition and to support placements (including managing disruption and breakdown). **Consultation ends 9 September**

Further Info

MPs launch inquiry into suicide prevention

The House of Commons Health Committee is inviting submissions of written evidence to inform its inquiry into the action necessary to improve the prevention of suicide.

Among other issues, MPs intend to focus on:

- What factors may be influencing the increase in suicide rates, especially among at risk groups.
- The measures necessary to tackle increasing suicide rates – in particular, the committee will examine the role of local authorities and their partner organisations (including schools, youth services, and drug and alcohol services), mental health services and other parts of secondary care (including A&E), primary care services, and referrals from non-statutory services.
- Examples of best practice, including those from other countries.
- Media reporting of suicide (including the effectiveness of media guidelines), and the role of social media and suicidal content online.
- Any action necessary to improve data collection.
Reporting and acting on child abuse and neglect

This consultation seeks views on the introduction of one of two possible new statutory requirements related to reporting and acting on child abuse and neglect.

The two options are:

- **A mandatory reporting duty**: This would require certain practitioners or organisations to report child abuse or neglect to local authority children's social care ‘if they knew or had reasonable cause to suspect it was taking place’.

- **A duty to act**: This would require certain practitioners or organisations ‘to take appropriate action’ (which could include reporting) in relation to child abuse or neglect ‘if they knew or had reasonable cause to suspect it was taking place’.

While the scope of either duty could be ‘more broadly or narrowly defined’, the government’s ‘starting position’ is that either duty should apply to practitioners or organisations undertaking activities that ‘bring them into close and frequent contact with children’. This would include schools, childcare, social care, health care and the police, for example. In addition, those at senior level (e.g., Directors of Children's Services, Chief Constables, Chief Executives) could also be ‘within scope’.

The consultation does not propose a specific model for the introduction of a mandatory reporting duty, but a number of potential models are outlined in Annex B. These include a ‘regulated activities’ duty to report, a ‘regulated professionals’ duty and a ‘closed institution’ model, for example.

The introduction of a duty to act would place a legal requirement on ‘certain groups, professionals or organisations to take appropriate action where they know or suspect that a child is suffering, or is at risk of suffering, abuse or neglect’.

What would be considered ‘appropriate action’ would depend on the particular circumstances. Practitioners working with children would, as now, be responsible for considering what action is necessary to protect children from harm and acting accordingly, but the duty to act would make them ‘more accountable for such decisions’.

Appropriate action may include reporting (but would not be limited to this), sharing information with other agencies (which ‘can help social workers to reassess risk and, if necessary, take further protective action’) and ‘providing timely and appropriate help to a child or stepping in to protect a child in a domestic violence incident’.

Responsibility for taking appropriate action ‘would not be limited to a single point in time, nor would it end when certain steps had been completed’. This would emphasise ‘the importance of the ongoing relationship’ between practitioner and child. ‘It would reflect the importance of the role practitioners play in each child’s life and their ongoing responsibility for ensuring that any action taken has been purposeful, and fully focused on the child’s needs, rather than on bureaucratic processes.’

Under the duty to act, sanctions for breaches would focus on cases in which there were ‘reckless
reasons' for failure to act or those where practitioners or organisations 'were indifferent to the harm, or potential harm, that might be caused'. This means an individual 'would have to consciously take a decision not to take action, or take action which was clearly insufficient or inappropriate, in the knowledge that they were not doing the right thing or reckless as to whether they were'. The consultation seeks views on appropriate types of sanction.

An assessment of the two options by the Regulatory Policy Committee suggests that the introduction of a mandatory reporting duty is likely to lead to more risk-averse behaviour in professionals and 'may create a culture of over-reporting to avoid liability'. The government's estimated increase in referrals of 15 per cent would result in an ongoing increase of £119 million to children's social services each year. A 'failure to act' offence would be likely to result in a smaller increase in referrals; an illustrative 3 per cent increase in referrals would result in an average cost of £23.9 million to children's social services each year.

Consultation ends 13 October

further info
Reports and Reviews

MPs publish report on government proposals for child and family social work reform

The Education Select Committee is calling on the government to make ‘some important changes’ to its reform programme for child and family social work, including abandoning plans for a new social work regulator and not expanding its independent trust model for children’s services ‘until there is proof that it works’.

While the report welcomes the government’s focus on encouraging innovation, MPs say ‘some caution is necessary’. They urge ministers to assess the effectiveness of existing independent trusts before expanding the model any further. Statutory children’s services should remain in local authority control ‘until there is clear evidence that the independent trust model improves outcomes for children and young people’, the report says.

Following closure of The College of Social Work, the committee also expresses its concern at the absence of a professional body to provide high-profile leadership for the profession. While a top-down approach to replacing the College may not be appropriate, the government should be doing ‘much more to help the profession recover from the loss of the College’. It should work with the BASW and wider sector to develop plans for a new body, which should assume responsibility for development of a post-qualifying framework, an accreditation system and workforce planning.

MPs say they are also ‘unclear’ as to why a change of regulator is needed and call on the government to ‘rethink its plans’. They also stress that a regulator should ‘concentrate on public protection by upholding standards’ and not ‘stray into defining professional standards for qualifying and post-qualifying education’, which is properly the role of an independent professional body.

Other recommendations set out in the report include:

- **Initial training**: Initial qualification training should provide child and family social workers with ‘a broad understanding’ of issues affecting both children and adults. Specialisation should occur primarily in post-qualifying training. Generic elements in Frontline and Step Up to Social Work curricula should be increased.
- The government should commission ‘an extended research study’ of Frontline alongside university routes to establish comparative long-term outcomes.
- Any future contract with Frontline should include a university partner. In the meantime, Frontline and the university sector ‘should cooperate more closely’. The committee wants Frontline and the Joint University Council Social Work Education Committee to write to them setting out their proposals for working together.
- **Post-qualifying training**: The government should work with the sector to develop a ‘robust’ national post-qualifying framework that gives ‘coherent shape’ to career-long CPD for child and family social workers. The current CPD offer is ‘inadequate, variable and diffuse’.
- The government’s consultation on accreditation should set out proposals on what will happen if social workers fail the process and how it will ensure social workers ‘can continue to move
between statutory and non-statutory positions and different types of social work’.

- The government should work with the sector to develop a quality assurance system to ensure ASYE is delivered ‘at a consistently high level across the country and that caseloads are protected’.

- **Recruitment and retention**: The government should ‘reinforce’ the use of Standards for Employers of Social Workers in England and make ‘health checks’ of working conditions mandatory. Ministers ‘should also consider making the entire framework binding for local authorities’.

- The government should work closely with local authorities, the regulator and social work sector to establish a national workforce planning system for tackling high vacancy rates and retention problems. This should include national and regional models for forecasting supply and demand and ‘give employers the ability to influence the supply of graduates’.

- **Practice leadership**: The role of Principal Social Worker should be retained as long as local authorities and frontline social workers find it useful, but ‘current confusion’ over the position ‘is not conducive to the role’s success’. The government should commission research on the role with a view to developing best practice guidance, which should also clarify how the Principal Social Worker and Practice Leader roles inter-relate within current structures.

---

**Children’s trauma is often misunderstood, says YoungMinds**

Many children and young people who suffer adverse experiences do not get the help and support they need because services do not always recognise their vulnerability or trauma, according to a new report from YoungMinds.

The report says services are often too focused on what they see as ‘challenging or risky behaviour’. This can ‘stigmatise or criminalise normal responses to childhood adversity and trauma’. YoungMinds says access to services should be ‘diversified’ so that ‘wider presentations of adversity and trauma, rather than clinical diagnosis, are the entry point’.

The report emphasises that psychological trauma in childhood is not always the result of a single identifiable event but can develop from the ‘cumulative impact of adverse environments, events and relationships’. As well as displaying social, emotional and cognitive problems, some young people adopt risky or challenging behaviours that are ‘frequently misinterpreted or criminalised’.

Government and local agencies ‘do not share a common understanding of adversity, complexity, vulnerability and trauma in childhood’, which has led to ‘significant variance between local areas and service responses’ to identifying and meeting children’s needs.

The report calls on the government to ‘commit to a national focus’ on tackling childhood adversity in order to ‘create momentum’ at local level and encourage sharing of share good practice. Among other recommendations, it says:

- The Department of Health and Department for Education should set up a national expert group to explore ‘the commonalities across all childhood adversities’ and build ‘a consensus on models of care and practice’. This should build on ‘existing commitments around looked after children’.
and care leavers'.

- NHS England should commission a more detailed review of the refreshed Local Transformation Plans and wider Sustainability and Transformation Plans in order to ‘assess the sufficiency of transformation’ to meet ‘the common needs of children who face adversity in their lives’.
- Clinical Commissioning Groups should make sure refreshed Local Transformation Plans ‘meet the reform and operating principles for future services and interventions’ that arise from Future in Mind (see RPU 169).

 further info

Review of post-adoption support interventions

The Department for Education has published an independent review of post-adoption support interventions.

The review, by the Tavistock Institute of Human Relations, considers the evidence relating to 15 kinds of therapeutic support. The 15 interventions are those most often funded through the Adoption Support Fund or considered to be ‘high profile’ in the field. The review is seen by the Department as a first step in a longer-term drive to improve the evidence base in post-adoption support.

Overall the review found ‘very few robust published studies’ providing evidence of effectiveness for adopted children and/or adoptive parents. While there is an extensive or fairly extensive evidence base to support some of the interventions reviewed, this is ‘only for particular conditions or issues rather than adopted children per se’.

The 15 interventions are grouped into five broad categories:

1. Play therapies including Theraplay, Filial Therapy and SafeBase.
2. Therapeutic parenting training including Dyadic Development Psychotherapy (DDP), Nurturing Attachments and AdOpt.
3. Conduct problem therapies including Multisystemic Therapy, Non-Violent Resistance (NVR) and Break4Change.
4. Cognitive behavioural therapies including Eye Movement Desensitisation and Reprocessing Therapy (EMDR) and Dialectical Behaviour Therapy (DBT)
5. ‘Overarching categories’ is used to group together therapies that represent ‘whole classes of approaches rather than tightly defined interventions’. This includes talking therapies (eg, CBT, Systemic Family Therapy, Integrative Therapy), creative (including art, music, drama and dance) therapies and equine therapy.

The review also makes a number of recommendations for strengthening the evidence base:

- There should be a follow-up review employing a ‘needs-based’ (rather than ‘intervention-based’) model to explore which approaches are effective in addressing particular needs or issues.
- The follow-up review should encompass a wider range of interventions, including holistic models such as Family Futures, PAC-UK or AdCAMHS in Sussex.
- Qualitative and process evidence should also be explored to understand adoptive family experiences and why interventions may or may not work.
• More robust quantitative research should be undertaken on the impact of particular interventions or combinations of interventions.
Government launches care leavers’ strategy

The government has published its strategy for supporting young people into independence as they leave care.

The cross-government strategy spells out how ministers intend to use the Social Care Innovation Programme to ‘rethink’ how services are delivered and develop ‘new ways to provide care leavers with the personal support networks they need to thrive’, how they plan to strengthen the culture of corporate parenting, and how they will ‘support and challenge local areas so that all deliver to the standards of the best’.

The strategy sets out how care leavers will be supported to achieve five key outcomes:

1. **All young people leaving care will be better prepared and supported to live independently.** Actions include: setting out in law what it means to be a good corporate parent; the new care leaver covenant; a new legal duty for local authorities to consult on services for care leavers; enabling all care leavers to access support from a personal adviser up to age 25.

2. **Improved access to education, employment and training.** Actions include: promoting take-up of supported internships; meeting the training costs of care leavers undertaking apprenticeships (up to age 25); improving access to employment opportunities in government departments and their agencies.

3. **Ensuring care leavers experience stability and feel safe and secure.** Actions include: introducing Staying Close for young people leaving residential care (see RPU 184) and continued funding for Staying Put; increased funding for local authorities to support former unaccompanied asylum seeking children.

4. **Improved access to health support.** Actions include: new care pathways, quality standards and models of care for looked after children and care leavers with mental health problems.

5. **Financial stability for care leavers.** Actions include: ensuring care leavers can access advice and support to help them manage their money; exempting care leavers from changes to eligibility for housing support for 18 to 21-year-olds.

**further info**

Best practice guide on tackling FGM

The Tackling FGM Initiative (TFGMI) has published best practice guidance that aims to strengthen community-based prevention of FGM among affected communities.

The guidance is aimed at community based-organisations working on FGM. It is also intended to help local authorities develop good-quality partnerships and joint working with affected communities and community-based organisations. It should also help commissioners and local safeguarding leads understand ‘how to work with communities and recognise them as assets to end FGM’.

The practice guidance is divided into three sections covering prevention, access to mental health care and support, and working with statutory professionals and local authorities (including FGM case work).
The guidance is published alongside an evaluation report of the second phase of the Tackling FGM Initiative's six-year programme of work in local authorities across the UK. (An eight-page summary is also available.)

Harmful Sexual Behaviour Framework

NSPCC and Research in Practice have launched a new online framework to help local areas develop a consistent approach and improved practice when responding to harmful sexual behaviour (HSB) by children and young people.

The framework, which has been developed with Professor Simon Hackett and input from youth justice agencies and council leaders, will help local areas develop a shared understanding of the needs of and risks posed by children and young people displaying HSB. It includes a set of auditing tools and standards to help local authorities assess current provision and identify where improvements need to be made.

The framework covers the five domains of an integrated and effective HSB service:

- a continuum of responses to children displaying HSB
- prevention, identification and early assessment
- effective assessment and referral pathways
- interventions
- workforce development.

Each domain includes an up-to-date summary of the evidence to support practice and decision-making, an audit tool and practical examples.

Editorial note: Barnardo's has published the report of a cross-party parliamentary inquiry into support for children who display HSB. The inquiry, which was set up by Nusrat Ghani MP, is calling on the government to develop a national strategy for preventing and responding to HSB in children. The report also urges the government to commission further research to help improve identification of children at risk, improve prevention, identify gaps in provision and to improve outcomes and the effectiveness of interventions.