Mental Health and Wellbeing of Looked After Children

The Report of the Education Select Committee's Inquiry Briefing for the children and young people's voluntary sector. May 2016



Introduction

On 18 September 2015 the House of Commons Education Select Committee launched an inquiry in to the mental health and wellbeing of looked after children. It collected written and oral evidence on issues such as: Whether the relevant statutory guidance was adequately drafted and implemented; the quality of dedicated mental health services for looked after children; coordination between difference services; the contribution of schools; and how young people and carers can be better involved in service design. The resulting report setting out conclusions and recommendations was published on 28 April 2016.

Taking into account of the restriction of Government publicity in the run up to the EU referendum, a Government response to the report on the mental health of may be expected by late June/early July.

This briefing summarises the recommendations of the inquiry report and the arguments and evidence that had informed these. The relevant paragraph numbers of the report are included after all references to recommendations. Links to relevant further information are also provided at the end of the briefing.

About Select Committees

House of Commons Select Committees scrutinise the work of Government. There is a Commons Select Committee for each government department, as well as some covering overarching issues. These committees are made up of a minimum of 11 MPs. Their inquiries result in the publication of a report with recommendations to Government and its agencies, which Government usually has 60 days to reply to.¹ These replies normally set out where the Government accepts the committee's recommendations and what action it may take as a result of this, where it disagrees with the conclusions and why, and where it believes it is already addressing the issues raised.

Access to mental health services

The committee highlights evidence it received suggesting initial health assessments are high variable and often poor, that strength and difficulties questionnaire are rarely used to maximum effect, that children who have high scores in the SDQ should receive further assessment, and that mental health assessments should be carried out on an ongoing basis. Based on this the committee recommends:

• Guidance be amended to make clear that an SDQ (Strength and Difficulties Questionnaire) should be completed for every child entering care (14)

¹ http://www.parliament.uk/about/how/committees/select/

- A full mental health assessment by a qualified mental health professional for every child entering care (14)
- For looked after children who require it "regular assessment of mental health and wellbeing" as part of their existing reviews. (14)

The report points out that several witnesses discussed the extent to which mental health services should prioritise those in the care system. Alistair Burt, the minister who leads on mental health, however, told the committee that "it is important that the clinical mental health needs are assessed in the same way as they would be for any child." Children and Families Minister, Edward Timpson, on the other hand, said that there are things that could be done to "have much better arrangement in place". The Committee recommends, in line with their recommendation regarding children entering care, that:

• Looked after children should have priority access to mental health assessments by specialist practitioners but that subsequent treatment should be based on clinical need. (27)

The committee reports hearing from several pieces of evidence that CAMHS thresholds were too high or inflexible, leading to looked after children being turned away from services. It also reports hearing numerous times of CAMHS' refusal to see children if they were not thought to be in stable placement. It stresses that such instances should not happen and recommends that:

• Where possible CAMHS should form part of a multi-agency team in which education, health and social care work in partnership. (23)

The committee heard evidence of poor communication and relationships between local authorities and agencies organising healthcare and other services for looked after children in out of area placements which resulted in some children being denied access to the support they needed. It recommends that:

• The Department for Education/Department of Health joint statutory guidance is amended to clarify the balance of responsibilities between local authorities when looked-after children are place out of area.

Several pieces of written evidence pointed out that adult mental health services, which young people may be moved to at age 16 or 18, were in many cases unsuitable for vulnerable young people in, or leaving, care. The Committee note that several organisations, including the Alliance for Children in Care and Care Leavers have called for continuation of mental health support up to the age of 25. It also highlighted that the Children and Young People's Mental Health Taskforce report, *Future in Mind*, recommended flexibility around age boundaries, in which transition is based on individual circumstances rather than absolute age. In his oral evidence to the inquiry, however, Health Minster Alistair Burt suggested that age boundaries (or their absence) should be "for local determination". The Committee concludes that:

• CAMHS should be made available for all looked after young people up to the age of 25, with access to services beyond the age of 18 offered where appropriate but not mandatory where an individual would be better suited to moving onto adult mental health services. (40)

The care system

The committee heard from submitted evidence and its private session with children and young people about the importance of placement stability for emotional wellbeing. It welcomes increased funding for 'Staying put' and concludes that:

• Continuity of care in an environment where children and young people are able to form string enduring relationships should be at the heart of the care system. (32)

The committee highlights some local good practice in supporting and training for foster carers, but stresses that carers' access to training in mental health and wellbeing is patchy. It recommends that:

• The Department for Education and Department of Health should fund and develop learning modules on mental health and emotional wellbeing for foster and residential carers. (53)

Several pieces of evidence highlighted the importance of looked after children having a voice in decision that affect them. The committee held a private session with a group of looked after children and young people and heard that they were often not involved in decisions or have major changes, such as placement moves, explained to them. The committee concludes that:

• All looked after children should be empowered to have a more active role in decisions about their placements to increase the likelihood that they well be stable and successful. (98)

The role of schools

The Committee cites recommendations from the Carter review of initial teacher training and youth select committee calling for improved training for teachers on mental health. It also highlights evidence that schools are under pressure to deliver support for young people in crisis. The committee recommends that:

• Mental health should be included in the core content of initial teacher training and in continuous professional development of teachers. (57)

The committee cites a recommendation from the Future in Mind report about designating a member of school staff as a lead for mental health and the Mental Health Services and Schools Link Pilots which are being carried out as a result of this. It highlights conflicting evidence it received about the effectiveness and appropriateness of school-based counselling for looked after children. Particular concerns were raised about how the need to link back to the more specialist services that looked after children may need. The committee recommends that:

• If successful the current schools link pilot is extend across all clinical commission groups with funding for all schools to train a mental health coordinator. (64)

Planning and designing mental health services

The committee reports that it received several evidence submissions espousing the opportunities presented by the creation of Local Transformation Plans which have been drown up as part of an implementation plan for the *Future in Mind* report. It also highlights evidence, however, that the extent to which these plans currently reflect the needs of looked after children is highly variable. The Health Minister, Alistair Burt, agreed with this analysis. The committee recommends that:

- The statutory guidance on promoting the health and wellbeing of looked after children be revised and strengthened to incorporate the recommendations made in the Children and Young People's Mental Health Taskforce report, *Future in Mind* (69)
- All local transformation plans state the service they provide specifically for looked after children and the funding assigned for them. (78)

The committee also heard from the Department of Health about work that is being undertaken in the wake of recommendations of the Children and Young Peoples Mental Health Taskforce on improving support for vulnerable children. An expert group is being established to "design care pathways and integrated models of care that can be used by all bodies and individuals involved in meeting the mental health needs of looked after children."

The committee reports hearing several examples of local areas where education, health and social care agencies are working well in partnership to support the mental health and emotional wellbeing of looked after children and young people. However it also heard of many failures on this issue.

The committee heard evidence about the importance of health and wellbeing boards in providing strategic leadership for the planning of services to promote the mental health of looked after children. Several pieces of written evidence also called for a designated mental health professional for looked after children and young people to bolster this. The committee recommends that

• Each local area employ a senior, designated mental health professional with expertise in the diagnosis and treatment of mental illness and awareness of the broader risk factors common in looked after children. (91)

The committee highlights the lack of data available on children and young people's mental health in general, the variability in the extent to which local authorities support and monitor their care leavers, and that this results in poor data on needs and the outcomes of this population group. It notes that the Department of Health have commissioned a new survey on children and young people's mental health but that this will not report until 2018. It recommends that:

- Government returns to funding prevalence surveys on children and young people's mental health on a five-yearly basis (46)
- Government invests in outcomes monitoring to better understand the challenges that young people face when in and leaving the care system. (46)

Several pieces of evidence highlighted the importance of looked after children having a voice in the planning of their care and the design of services to support their emotional wellbeing and mental health. The committee concludes that • All looked after children should play a meaningful part in decisions made about their mental health care. (98)

Further Information

Education Select Committee inquiry page

On this page you can access the report of the inquiry into the mental health and wellbeing of looked after children, as well as written and oral evidence submitted to the inquiry

<u>Promoting the Health and Wellbeing of Looked After Children: Statutory guidance for</u> <u>local authorities, clinical commissioning groups and NHS England</u>

This statutory guidance issued jointly by the Department for Education and Department of Health in March 2015 explains how local authorities and health agencies should go about carrying out relevant duties under a number of pieces of legislation including the 1989 and 2004 Children Acts, 2006 NHS Act (as amended in 2012) and the care planning and placement and case review regulations. It is this guidance that the committee recommends amending and updating. NCB, as part of children's partnership The Children's Partnership has produced a <u>summary briefing</u> on this guidance. We have also produced an <u>interactive tool</u> which allows you to easily access key official guidance documents (published by government or government sponsored agencies) relating to looked after children's health from one place.

Future in Mind

The report of the Children and Young Peoples Mental Health Taskforce, published in March 2015, as referred to in the Select Committee inquiry's report. A more detailed report from the vulnerable children and inequalities task and finish group, which fed into Future in Mind is available from the same page. NCB and the Young People Health Partnership have also produced a <u>briefing for the voluntary sector</u> on this report.

The Five Year Forward View for Mental Health

This report from the independent Mental Health Taskforce to the NHS in England was published in February 2016 and includes recommendations for the six NHS arm's length bodies to achieve the ambition of parity of esteem between mental and physical health for children, young people, adults and older people as well as for wider action and tackling inequalities.