NHS
Cambridgeshire & Peterborough

NHS
North Bristol
NHS Trust

Transitional Safeguarding: Bridging the Gap for Care Experienced Young People

Rebecca Cooke and Claire Foster 2021

Working Together - How our Journey Began….

Transitional Safeguarding Definition

‘An approach to safeguarding adolescents and young adults fluidly across developmental stages which builds on the best available evidence, learns from both children’s and adults safeguarding practice, and which prepares young people for their adult lives’

(Holmes and Smale, 2018).

Think Safeguarding

Every young person becomes vulnerable when moving through the developmental stages of life.

However, there are certain groups who due to their health needs or social circumstances have an increased vulnerability i.e.

- Care experienced young people
- Young people with a Learning Disability/Autism

Mind

The

Gap

System Challenges

For transitional safeguarding to be effective we require all statutory and non-statutory core agencies to work together as change agents in a flexible and innovative way.

Challenges

- Health resources under pressure
- Division in professional expertise between child and adult frameworks
- Fixed legal safeguarding frameworks and procedures
- Focus on transition as an event rather than a journey
- Emerging adults aged 18 years, experiencing abuse do not fit social care threshold under the Care Act.

Working Together & Making Every Contact Count

Integrated Care System (ICS)

In England an ICS is a statutory partnership of organisations who plan, commission and provide health and care services in their geographical area. Organisations include:

- National Health Services
- Local Authorities
- Voluntary and Charity groups
- Independent Care Providers

The purpose of the ICS is to bring partner organisations together to improve outcomes in population health and healthcare, tackle inequalities in outcomes, experience and access (NHS England)

In England there are 42 ICS. Each has their own priorities and differs from one another to meet their local population needs.

Working Together & Making Every Contact Count (2)

Providers experiences of approaches to Transitional Safeguarding:
Complexity of presentation – interface with contextual and EFH
Pressure of hospital flow and discharge targets
Busy departments, multiple members of staff
Binary understanding of children's and adults needs

What helps:

- Youth work partnerships – Barnardos Routes
- Trauma informed approaches
- Skilled organisation based safeguarding support
- Quiet areas

System improvements: Health data on 16 to 25 year olds and collating of thematic safeguarding information by local teams

Identification & Assessment

Protective Factors

- A Strengths Based approach
- Professional Curiosity

Risks

- Disengagement with Healthcare Services
- Extra-familial Harm
- Polarised view – Child / Adult
- Covid-19 Pandemic
- Cost of living crisis

Innovation Examples

- Bespoke safeguarding transition roles
- Student Nurse Placement (NHS Cambridgeshire & Peterborough)
- Enhanced Pathways (NHS Bristol)
- Care leavers training video for GP's (Primary Care Safeguarding Forum, Care experienced young people, foster carers, health and social care Ealing and Surrey 2021)
- Gateshead – Free travel

Student Nurse Placement Feedback

"As a 3rd year child nursing student, I feel lucky to be given the opportunity to complete a placement in Safeguarding. I have been given plenty of vital information to help me, and improve my future practice to be confident around safeguarding. I am enjoying the learning of how to partake in courageous conversations and learn the importance of professional curiosity. I would potentially like to work with young people when I qualify and being given the opportunity to learn about Transitional Safeguarding has been greatly inspiring, and I hope to promote this within my future practice. I would highly recommend to my student colleagues the opportunity to attend a safeguarding placement, it has really shown me the importance of safeguarding being everybody's responsibility and how to think family".

Ellie Fivash 2022

Legal Framework Critique

Legislation

Children Act (1989) - Sets out the responsibility Local Authorities have to all children, including Children in Care and Care Leavers, as well as the duties and powers they have.

Critique

- Threshold focus on significant risk of/actual harm by perpetrator rather than contextual complex and system risk – contributes to cliff edge at 18
- Designed with focus on familial harm and younger child's needs
- Does not flex to accommodate MSP principles in adolescence to support preparing for adulthood and decision making

Legal Framework Critique (2)

Legislation

Care Act (2014) - places duty on Local Authority (LA) to conduct transition assessments for children, children's carers, and young carers.

Critique

- Designed with older adults in mind (Cocker, et al. 2021).
- Not designed to meet the needs of 18- to 25-year-olds who may still have 'developmental' needs due to trauma in childhood or adolescence (Holmes, 2021).
- Threshold focus on need for care and support
- Challenges faced – Young People with autism, young carers whose parents' needs are below Local Authority eligibility, those detained in youth justice systems, and Young People receiving mental health services.

Legal Framework Critique (3)

Legislation

Mental Capacity Act (2005) - It should be assumed that a person (aged 16 or over) has full capacity to make decisions for themselves unless it can be shown that they lack capacity.

Critique

- At 16 the Young Person is still legally a child, interface of MCA and Children Act
- Many professionals do not understand the MCA and do not use it in practice (Cocker, et al. 2021)
- Practitioners struggle to balance the right to an unwise choice with risk and harm
- Code of practice does recognise development may affect decision making ability for 16 and 17 yr olds but not explicitly for over 18's

Statistics

40% not in Education, Employment or Training (19-21 years)

4X more likely to be involved in Justice System

15X more likely to attempt Suicide

England (2021)

- 11,600 care leavers aged 18 years.
- 27% were unaccompanied asylum seekers.
- 11% return to parents.
- 65% Children in Care receive inadequate Local Authority Support (Ofsted 2021)
- 'Preparing to be Independent' Living Accommodation

29 Deaths 2017-2021 16-17 years

"Really Social Workers do not listen.. should not have to move when you are 18 if you are settled, so wrong"
(boy 17 in foster care) The Big Ask Report 2021

Safeguarding Adult Review – Ms A

Not in Education or Employment; Experience of the Justice System; More likely to attempt Suicide…

These challenges are reflected in Ms A's life course, who had been a child in care.

The focus for the review was transition from children to adult services.

Tragically committing suicide at the age of 20 in 2015, Ms A had experienced severe childhood maltreatment, numerous placement breakdowns, had unmet special educational needs and was known to police yet she did not meet the threshold for adult social care and mental health services. Safeguarding Adult Reviews highlight a common theme that the Mental Capacity Act is not understood or used appropriately.

It is important to remember that not all Care Experienced Young People have a negative or tragic journey.

Lived Experience

‘We are the family to our children in care and care leavers.

We provide for each other, motivate each other and love one another.

The authorities never loved us, but we are not fussed nor are we bothered.

We receive love from the friends that become our family.

If someone is getting themselves into or is

in immediate, danger, a child in care or care leaver will heave them right out.’

Ty (Care leaver)

What Care Leavers Do - Ty 2021

Health & Wellbeing

The Big Ask (2021) Children and Young People told us…

Most children are well. A minority suffer from chronic, life-altering conditions and need constant care and support.

All children were affected directly or indirectly by the pandemic. Despite this the majority of this generation shared they are happy.

Huge numbers of children said that wellbeing would be a priority in their future lives.

Post pandemic children are newly conscious of the components of feeling good. Children want to be able to look after their physical health and see mental and physical health as interlinked.

'I think that we all spend so much time on social media, worrying about how many followers we have, that we don't get enough time to just stop and do nothing, or go outside or spend more time with our families' – Girl, 12.

If we cannot even begin to talk about a problem, because it is taboo, it is harder to solve. Especially where possible solutions rest on the act of talking itself, and where the pandemic has affected communication. 'I think that for some young people, the lack of confidence that they have affects their overall wellbeing, particularly during the pandemic where it is difficult to interact with people' – Boy, 13.

Conclusion

In conclusion, we have found that:

Rigid thresholds in existing frameworks do not support safe transition for 16- to 25-year-olds.
Risks increase for those who are care experienced and face multiple cliff edges.
Barriers can only be overcome through cultural and structural system change.
An overhaul in legislation, professional's development, investment in flexible services and better collaboration including the young person and their communities is required.

There are examples of children and adult services working more closely together. Specialist practitioners are being employed to bridge the gap to enable a safer transition. Voluntary agencies contribute dynamism to meet needs that challenge existing thresholds.
Integrated Care System offer opportunity for local areas to redesign their support structures for this group and make lasting changes that will benefit individuals, families, and wider society into the future.

Recommendations

- Collaboration and Co-production
- Person-centred
- Champion / Advocate
- ACEs aware and Trauma Informed Practice
- Evidence informed
- Bottom up approach
- Safeguarding across developmental stages
- Place-based approach
- Consistent and stable
- Peer Mapping
- Equality, Diversion, Inclusion

NHS Cambridgeshire & Peterborough

Transitional Safeguarding
Bridging the gap for care experienced young people

Rebecca J. Cooke & Claire Foster 2021

NHS North Bristol NHS Trust

Definition

'An approach to safeguarding adolescents and young adults fluidly across developmental stages which builds on the best available evidence, learns from both children's and adults safeguarding practice, and which prepares young people for their adult lives' (Holmes and Smale, 2018).

Identification & Assessment

Working Together & Making Every Contact Count

- Health: Integrated Care System
- Social Services
- Charities – Become; Centre 33; NSPCC; Barnardo's

Strength Based Approach & Making Safeguarding Personal

This approach centres around identifying and building upon the young person's positive attributes and aspirations to enable growth, independence, and ability to make informed choices. Moreover, it extends to the young person's family and wider community influences which act as a protective factor during this transitional phase in their life. Initiating professional curiosity creates more meaningful conversations with young people and assists professionals in identifying and building upon strengths already present in the young person's world.

Risks

- Extra-familial Harm
- 15 Million GP Appointments missed annually – most likely age groups are young people < 21 years (Parsons et al 2021)
- Polarised View: Child / Adult
- Covid-19 Pandemic
- Cost of living crisis

Innovation

- Bespoke roles (NHS Cambridgeshire & Peterborough)
- Student Nurse Pathways (NHS Cambridgeshire & Peterborough)
- Enhanced Care Plans (NHS North Bristol)
- Care Leavers Video (Surrey & Ealing)

Legal Framework Critique

Safeguarding Legislation Critique

Paediatric Healthcare Staff need to look ahead and forward plan whereby Adult Healthcare Staff need to look behind to see who is transitioning to adult services and prepare.

Mind

The

Gap

Think Safeguarding

40% not in Education, Employment or Training (19-21 years)

4X more likely to be involved in the Justice System

15X more likely to attempt Suicide

England Statistics (NHS Digital 2021)

11,600 Care leavers aged 18 years

27% were unaccompanied asylum seekers

11% return to parents

29 deaths between 2017-2021 of 16-17 year olds due to inappropriate accommodation

Lived Experience

'We are the family to our children in care & care leavers.
We provide for each other, motivate each other & love one another.
The authorities never loved us, but we are not fussed nor are we bothered.
We receive love from the friends that become our family.
If someone is getting themselves into or is in immediate danger, a child in care or care leaver will heave them right out'.
Ty (Care leaver)

What Care Leavers Do - Ty 2021

'Really Social Workers do not listen… should not have to move when you are 18 if you are settled, so wrong' (boy 17 foster care)

The Big Ask Report 2021

Safeguarding Adult Review

It is paramount that professionals make time to read, reflect upon and understand lessons and recommendations from reviews. To co-create and timely embed changes in practice to mitigate risks of reoccurrence.

SAR Ms A 2017

Recommendations

- Collaborate / Co-produce
- Person- centred
- Champion / advocate
- ACE's & trauma informed - https://www.acesonlinelearning.com/
- Evidence informed
- Bottom up approach
- Safeguarding across developmental stages
- Place-based approach
- Consistent and stable
- Peer mapping
- Equality, diversity, inclusion

Questions?