

Out of Sight - Out of Rights?

The Provision of Independent Professional Advocacy in Children's Homes in Wales



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Advocacy is about: speaking up for children and young people, empowering children and young people to make sure their rights are respected and their views, wishes and feelings are heard at all times, representing the views, wishes and feelings of children and young people to decision-makers, and helping them to navigate the system.

Independent Professional Advocacy National Standards and Outcomes Framework for Children and Young People in Wales (Welsh Government, 2019)

TGP Cymru is an independent Welsh children's charity working with some of the most vulnerable and marginalised children, young people and families in Wales. They may be experiencing difficulties in accessing appropriate services in health, education or social care – these include children with disabilities, children with emotional health needs and children seeking asylum.

TGP Cymru has its Head Office in Cardiff and projects across Wales offering independent and confidential support to children, young people and families through advocacy, participation, counselling, family group meetings, restorative approaches and conflict resolution. The organisation also offers advocacy support for those experiencing problems with emotional health and wellbeing and produce communication passports for children and young people with communication needs. TGP Cymru work with children, young people and families, giving them a voice to have a say in their future and ensuring that their rights are upheld.

ACKNOWLEDGEMENTS

The scoping study was guided by a committed and knowledgeable advisory group without which the task would have been impossible. TGP Cymu would like to thank all members of the group including representatives from the Care Inspectorate of Wales, Voices from Care, the Children's Commissioning Consortium Cymru (4C's), Heads of Children's Services, the third sector, and a number of private and independent residential care providers as well as care experienced young people. We would particularly like to thank: Jade Pescod, Zac Robinson, Helen Argyle (Unique Homes, Ltd.), Duncan Pritchard (Senad Group) Paul O'Donnell (Priority Childcare), Debbie Osbourne and Rhian Hughes (Priory Group Ltd.), Karen Benjamin from 4Cs, Anne Batley from RCT and Emma Sullivan from Children in Wales. Special thanks too, to TGP Cymru (Natalie Brimble and Zoe Morgan) and the 4Cs (Andrea O'Shea) for helping us to talk with young people with experience of living in children's homes. We would also like to thank Catriona Williams of Children in Wales for chairing the advisory group and the Welsh Government for their support and assistance in facilitating contact with a number of relevant stakeholders as well as their advice on the Social Services (Wales) Act and the accompanying Codes of Practice and the Terms of Reference of various Welsh Government task groups.

TGP Cymru would also like to thank the Paul Hamlyn Foundation whose support over the last eighteen months has enabled this work.

This report contains a number of recommendations for Welsh Government to consider. These recommendations have been determined by TGP Cymru with advice from the advisory group but not all of the recommendations are endorsed by all members of the advisory group.

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INTRODUCTION

- 1.1 This is the report on a piece of scoping work commissioned by TGP Cymru and funded by Welsh Government. The aim of the project is to map the availability of independent professional advocacy support for children and young people living in children's homes in Wales; build understanding of how children living in residential care in Wales access information, advice and advocacy support and consult with stakeholders to determine the best ways of ensuring that independent advocacy is made available to all children and young people living away from home in residential care in Wales.
- All local authorities in Wales and England have a duty to provide advocacy services to children looked after under section 174 of the Social Services and Well-being (Wales) 2014 Act, and in England under section 26A of the Children Act 1989. The responsibility is on the local authority to provide or commission these services. However, it is not clear how this provision is made available to children and young people living in each of the children's homes in Wales.
- 1.3 The focus of the report is on children living in care homes registered with the Care Inspectorate Wales. Children looked after in Wales are also living away from home in residential schools, residential mental health settings and indeed in other residential settings that are not regulated. The scoping does not examine children's access to advocacy in these settings, however we recommend that it should be explored.
- 1.4 The report sets out the background and policy framework for both the provision of residential care for children in Wales and the provision of independent professional advocacy, describes the methods used in this study to gather information and engage stakeholders, presents the findings from the scoping and concludes with a number of recommendations for Welsh Government to consider. Appendices include a Glossary of Terms and a list of organisations that participated in the study.
- 1.5 The Waterhouse inquiry illustrated the importance of children in residential care having access to somebody independent, outside of the institution, on a regular basis¹. As we approach the 20th anniversary of Waterhouse it is timely to review the arrangements for children in residential care in Wales to access independent advocacy, to consider how available it is and how easy it is for children to access it if they have concerns or if they want support in speaking out.

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¹¹ Lost in Care Report of the Tribunal of Inquiry into the Abuse of Children in Care in the Former County Council Areas of Gwynedd and Clwyd since 1974

BACKGROUND

Waterhouse and the push for statutory advocacy for children looked after

- 2.1 One of the first tasks for the first, newly elected, National Assembly for Wales was to respond to the recommendations of the Waterhouse inquiry into the abuse of children in public care². The report on the inquiry illustrated starkly the abuse of children's rights and how vulnerable children who were living away from home in residential care had not been listened to and how adults had failed to protect them. The National Assembly's response to Waterhouse included the establishment of the UK's first children's commissioner and an expansion of independent advocacy provision in Wales. The development of advocacy provision for children in care has continued over the last 20 years most recently with the introduction of the National Approach to Statutory Advocacy (NASA) following the review of advocacy services spearheaded by the Children's Commissioner for Wales in 2012.³
- Over the last 50 years we have become all too familiar with the vulnerability of children and young people placed in residential care. The need to ensure such children have access to somebody independent, outside of the institution, on a regular basis is now well established. Provision in the 1989 Children Act giving children the right to have the support of independent advocate if they wished to raise concerns was introduced as a means of safeguarding children as well as supporting them to express their wishes and feelings. One thing learned from the many inquiries into child abuse is that the victims often did speak out but they were not listened to or taken seriously by the adults who could have stopped it happening.
- 2.3 This same message continues to come through loud and clear today vulnerable children (including children in the care system) are still not being listened to and taken seriously. The message came out of the inquiry which revealed that at least 1,400 children were subjected to sexual exploitation over a 16 year period in Rotherham. In comes out too in the recent revelations about the abuse of children by members of the Catholic Church and the abuse of children by male celebrities such as Jimmy Savile, Rolf Harris and Gary Glitter. Not all of the victims of these horrific violations that have more recently come to light were children in the care system but many were in all such cases. As Alexis Jay's report (into the abuse in Rotherham) makes clear, for many complex reasons children's care status contributes to their vulnerability and the

²² Lost in Care Report of the Tribunal of Inquiry into the Abuse of Children in Care in the Former County Council Areas of Gwynedd and Clwyd since 1974

³ Missing Voices

risks of them being exploited and abused. Making sense of this recurring exploitation is challenging but we do know that setting up systems and developing cultures where children and young people in residential care can speak out and have their voices heard and taken seriously is key.

Current provision of independent professional advocacy in Wales

- Advocacy operates on a number of levels, Independent Professional Advocacy, Formal Advocacy and Informal/Peer Advocacy and Welsh Government recognises the need for a complimentary network of support. Policy development on children's advocacy has a long and chequered history in Wales but it was the former Children's Commissioner of Wales' review of Independent Professional Advocacy services for looked after children and young people, care leavers and children in need in 2012 that shifted the discourse along toward action. Keith Towler's report, 'Missing Voices' highlighted a number of problems with the arrangements for providing independent professional advocacy and raised concerns that children and young people in the care system did not know about it their rights to independent advocacy⁴.
- Welsh Ministers subsequently invited local government to bring forward a model for securing a 'National Approach' to statutory independent professional advocacy for looked after children, children in need and other specified individuals. A Senior Leadership Group, which included the Children's Commissioner, was convened to oversee the development of the National Approach. A Task and Finish Group was established and chaired by the Association of Directors for Social Services Cymru (ADSS). Membership includes representatives from the Children's Commissioner for Wales, Welsh Government, advocacy service providers and other partners. The group was tasked with developing the key components to a National Approach (which could subsequently be aligned to a Standards and Outcomes Framework) and explored how best to take forward the recommendation of the 'Active Offer of Advocacy' from the Children's Commissioner's report:

Local Authorities have to make an Active Offer of advocacy toward a child or young person at the earliest possible time following entry into the statutory childcare system. This offer should take place through a face-to-face between the child or young person and an independent professional advocate so that service users are fully informed of their rights and entitlements and are provided with information, advice and assistance on the role of independent advocacy. The Active Offer of Advocacy should remain ongoing throughout a child or young

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⁴ Children's Commissioner for Wales (2012) Missing Voices: Right to be Heard

person's time in care, and monitored through their statutory reviews by the Independent Reviewing Officer.

Recommendation 3 - Missing Voices – Right to be Heard⁵

- 2.6 The National Approach to Statutory Advocacy (NASA) has been in place since July 2017. It is designed to:
 - Enhance the equality of access across Wales
 - Ensure that all advocacy providers and advocates will work with and alongside the National Standards and Outcomes Framework.
 - Ensure a standardised approach and service to all Local Authorities.
 - Provide information on the wellbeing outcomes of advocacy intervention
 - Make sure that children and young people know about advocacy.
- 2.7 The Active Offer *of Advocacy* is one element of the new statutory advocacy provision which involves a meeting between a child or young person and an advocate when the child comes into care or when the child is the subject of child protection procedures. At this meeting the child is told of their rights under the UNCRC, about different types of advocacy and information about the local Independent Professional Advocacy Service, the Children's Commissioner, the Meic Helpline, and the right to complain.
- 2.8 The NASA includes a core Service Specification which outlines the service to be provided in regional contracts commissioned along the Health Board Regional footprint. If there is a local authority run children's home in the region a visiting advocacy service will be included in the regional contracts. Currently independent professional advocacy is provided by the two registered advocacy organisations in Wales NYAS and TGP Cymru.
- 2.9 The implementation of the NASA has to date focused on delivering and refining the Active Offer of Advocacy and increasing the take up on Issue based advocacy. A range and level tool for informing cost of contracts has also been introduced to ensure that the services are properly resourced, allowing for increased service development opportunities and take up. The Welsh Government funded the Active Offer of Advocacy for the first two years of this implementation programme.
- 2.10 The Task and Finish Group on Advocacy continues to meet and now reports to the Welsh Government's Ministerial Advisory Group. It aims to steer and monitor the implementation of the NASA and Active Offer of Advocacy. A recent appraisal by the children's advocacy service providers group has identified the need to review and

⁵ Ibid

update the NASA in light of new developments including: the new arrangements for the registration and inspection of children's care homes (RISCA), the Welsh Government's IPA National Standards and Outcomes Framework and the forthcoming revised SSWBA Part 10 Code of Practice (Advocacy).

2.11 The Welsh Government has recently published a National Standards and Outcomes Framework for IPA for Children and Young People in Wales. This identifies the outcomes children and young people can expect in relation to children and young people's advocacy. It sets out a framework against which advocacy service providers and those commissioning them can be sure those standards are being achieved, enabling them to evidence they are making a positive difference to children and young people's lives⁶.

Residential Visiting Advocacy

Residential visiting advocacy services are identified in the NASA Service Specification as 'Residential Visiting'. As the name suggests an advocate will visit a children's home or residential care setting at a regular prescribed time. The visiting advocate works to build a trusting relationship with the children and young people over time and be available to help and answer any questions they may have about their care. The residential visiting advocate will make sure that information on the UNCRC, independent professional advocacy, the Children's Commissioner's for Wales, the Meic Helpline and Childline are displayed and accessible.

Other benefits of residential visiting advocacy include, resolving young people's issues before they escalate, liaising with the placing local authority's contracted advocacy service, the provision of training on advocacy and children's rights for staff, and facilitating consultation and feedback meetings with children and young people. Residential visiting advocacy is an added safeguard for children and young people and considered best practice in terms of residential provision. A number of independent children's homes, schools, secure units and residential healthcare settings commission a residential visiting advocacy service

2.12 Advocacy is embedded within the Social Services and Well-being (2014) Wales Act with a dedicated Code of Practice under Part 10. This is supplemented by highlighting the importance of advocacy in all relevant codes of practice issued under the Act which has been done in alignment with the development of Regulations placing

⁶ Welsh Government (2019) <u>Independent Professional Advocacy, National Standards and Outcome Framework</u> for Children and Young People in Wales

requirements on providers of advocacy services, under the Regulation and Inspection of the Social Care Act 2016 (RISCA) which came into force on the 2nd April 2018. Under Part 10 of the 2014 Act local authorities have a duty to make arrangements for the provision of assistance to looked after children, former looked after children, and children who have needs for care and support. This assistance must include assistance by way of representation. This essentially replicated and replaced the duty within section 26A of the Children Act 1989, which has been repealed and replaced under section 174 of the 2014 Act. The Code of Practice under Part 10 is currently being revised by Welsh Government.

Children looked after and residential care

- 2.13 The number of children looked after in Wales has increased by 38% over the last decade. 6,407 children were looked after in Wales on 31 March 2018, an increase of 464 (8 per cent) on the previous year and a rate of 102 per 10,000 population aged under 18⁷. Within both Wales and England, there is considerable variation between the rate of children looked after, with many of the Welsh local authorities having higher rates with those in England. Many reasons for this trend are cited from risk aversion amongst social workers in the face of high profile cases such as Peter Connelly (Baby P); to growing awareness and expectations of action on issues such as child sexual abuse and exploitation; to stretched services not having the capacity to intervene until crisis point; and to differences in the underlying population⁸.
- 2.14 A recent report by the Wales Centre of Public Policy states that almost three-quarters of children looked after in Wales are placed with foster carers, and in the last 15 years the number placed with kinship carers has almost doubled. However, as the numbers of children looked after have increased, there has been an increase in the use of independent foster agencies and out-of-county placements⁹.
- 2.15 Those living in children's homes, either maintained by the local authority, privately or voluntary registered, represented less than 5% (299 children) as at 31st March 2018. However, concern has been raised about rising placement costs and the ability of some homes to meet the needs of children placed there. Whilst the numbers remain low, the number of children accommodated in privately or voluntary registered children's homes has been increasing since 2016¹⁰.

⁷ Experimental Statistics (November, 2018) <u>Children looked after by local authorities, 2017-2018</u>

⁸ Hodges, H. and Bristow, D. Wales (2019) <u>Analysis of the Factors Contributing to the High Rates of Care in Wales Briefing Paper</u>. Wales Centre for Public Policy

⁹ Ibid

¹⁰ Ibid

- 2.16 Residential care is defined as a range of provision including homes and hostels subject to care home regulations; hostels and supportive residential settings not subject to care home regulations; secure units; NHS or other establishments providing medical or nursing care; prisons and residential schools ¹¹. This scoping study focuses on children's homes subject to care home regulations (RISCA). Children's homes are owned and run by local authorities, private companies and charitable organisations. A recent report illustrates how the numbers of beds in registered children's homes in Wales has increased over the last five years totalling 665 in 2017¹². The independent residential care sector has grown over the same period as the level of local authority residential provision has decreased.
- 2.17 The independent residential care sector has grown over the same period as the level of local authority residential provision has decreased. In March 2019, 178 children's homes were registered of which 23 were provided by a local authority and 155 by private or voluntary sector providers. This represents an increase of 12% of services and 6% of places since March 2018¹³. Little is known about the current profile of children placed in residential care in Wales¹⁴ but the CIW report that on the 31st March 2018, there were a total of 435 children placed in care homes for children in Wales, of which 325 children were placed by Welsh local authorities and 110 by English commissioners. This indicates that around a quarter of placements (25%) were commissioned by local authorities in England (excluding short break care)¹⁵.

Registration and Inspection of children's care homes

- 2.18 Homes providing care for children and young people are registered and inspected by the CIW. The Regulation and Inspection of Social Care (Wales) Act 2016 introduced new arrangements. After a transition year the new 'RISCA' arrangements have been fully operational since April 2019.
- 2.19 Persons who wish to provide a children's care home services must make an application for registration to CIW who act as the service regulator on behalf of the Welsh Ministers. Prospective service providers and responsible individuals must demonstrate that they will be able to meet the requirements imposed by the Act and the Regulations and once registered, that they will continue to meet them. In order to grant an application to register, CIW must be satisfied that any prospective provider of regulated services can and will meet the standards of service provision specified in

¹¹ Ibid

¹² Data Cymru (2018) Profile of Children's Residential Care Wales.

¹³ Care Inspectorate Wales (2019) National Review of Care for Children in Wales

¹⁴ Elliot, M., Staples, E., Scourfield, J. (2016) <u>Residential Care in Wales: the characteristics of children and young people placed in residential settings.</u> CASCADE, Cardiff University (report for the Care Council for Wales)

¹⁵ Care Inspectorate for Wales (2019) <u>National Review of Care Homes for Children in Wales 2018-2019</u>

Regulations under section 27 of the Act. CIW must also be satisfied that persons designated as a responsible individual can and will comply with the duties set out in Regulations under section 28 of the Act. CIW use this guidance to inform its decisions to grant or refuse applications for registration as a service provider.

- 2.20 For children's homes the regulations include requirements for particular policies and procedures to be in place including for safeguarding, the use of control or restraint, medication, complaints and whistleblowing. The service provider must ensure that the service is provided in accordance with those policies and procedures. Once registered, care home services are subject to annual inspections by CIW against a set of core criteria. If CIW have concerns or non-compliance is an issue CIW inspections may be more regular.
- 2.21 CIW is undertaking a national review of children's care homes¹⁶ which was due to be completed in March 2019. The aim of the review is to:
 - Describe the current care homes for children market in Wales's.
 - Evaluate how well care homes for children promote their well -being and help them to achieve good outcomes.
 - Provide an understanding of the challenges facing for the sector.

At the time of writing (October 2019) the report is still not published although an early report to the MAG indicated that CIW found that arrangements in children's homes for facilitating access to independent advocacy are patchy. It is expected that one of the recommendations in the report will be for action to improve arrangements for children's access to advocacy and to independent visitors.

The Children's Commissioning Consortium Cymru

2.22 The Children's Commissioning Consortium Cymru or the 4Cs is a partnership involving all 22 local authorities in Wales. 4Cs has made significant progress in improving the way local authorities commission care placements for children and young people. They have established collaborative social care frameworks for Fostering and Residential LAC placement services, produced a number of tools and processes to facilitate individual placement matching, contract award and contract monitoring, collaborative risk management, and quality assurance of providers. We are advised that the use of the two Frameworks is helping to ensure that more and more children are placed with providers who are quality assured as well as reducing costs for local authorities. The Foster and Residential Frameworks provide a strategic procurement

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¹⁶ Care Inspectorate Wales Website National Review of Children's Care Homes

- solution for independent sector Looked after Children (LAC) placement needs eliminating the need for a full procurement process for each and every placement.
- 2.23 Local authorities are thereby assisted, through the Frameworks, to match placement needs with providers at predetermined or improved prices through the individual placement matching process. 4Cs have been working with local authorities to develop strategic commissioning approaches and with providers to encourage new provision into Wales where gaps currently exist and facilitate strategic partnership with placement providers to develop new models of care which offer new solutions to placement issues, whilst delivering better outcomes and value for money. The aim is to establish a national approach to commissioning placements for children.

Social Care Wales

2.24 Social Care Wales (SCW) also plays a key role. As well as registering workers and managers in children's homes, Social Care Wales (SCW) leads and supports improvement in social care and developing the social care workforce so they have 'the knowledge and skills to protect, empower and support those who need help'. Children who are looked after are one of their three priority areas and they are doing a number of things to develop a sustainable workforce and good professional practice in the field. The organisation works closely with independent providers, local authorities, CIW and have recently launched an online information resource for residential child care workers, which brings together case studies, data and research. They also publish practice guidance for residential child care workers and are planning to run a series of practice exchange events to explore what works well to improve care and support for children and young people and to organise as a national conference on residential child care in February 2020. They work with residential care providers to support them to develop their workers and improve the quality of care that is offered to children living in care homes.

Ministerial Advisory Group (MAG) Improving Outcomes for Children

2.25 There are a number of very pertinent developments taking places in relation to the provision of children's residential care. A Task and Finish group on Residential Care was set up by the Welsh Government to oversee a work programme designed to deal with a range of issues highlighted by recent research and reviews including: residential care capacity - the models of care, the quality and the location¹⁷. The group reports

¹⁷ Including: the Care Crisis Review report; and studies commissioned by the Ministerial Advisory Group - Profile of Children's Residential Care in Wales, Data Cymru; Residential Care in Wales: the characteristics of children and young people placed in residential settings, CASCADE; evaluation of new and emerging models of care

directly to the Improving Outcomes for Children Ministerial Advisory Group (MAG), which is chaired by David Melding AM and advises the Deputy Minister for Health and Social Services.

2.26 Work to date has focused on improving data collection, so that there is better understanding of the profile of the children in residential care; evaluating new and emerging models of residential care, particularly those using therapeutic or trauma informed approaches; and producing practice guidance on 'out of area' and cross border placements. A key strand of work has been to develop proposals for developing residential care for children and young people at the highest end of the continuum of need, especially those at risk of going into secure accommodation. The Welsh Government remains committed to developing a national strategic approach to the commissioning of placements for looked after children and the MAG is continuing with a programme of work focused on residential care in Phase 3 of its Improving Outcomes for Children work programme (2018-21)¹⁸.

⁽Cordis Bright); extension of When I'm Ready to residential care (Voices in Care & Cognition Associates); good practice guidance on out of area placements (Brian Paget)

¹⁸ Improving Outcomes for Children Ministerial Advisory Group (MAG) <u>Summary Work Programme 2018-21</u>

METHODS

- 3.1 The first stage of the project was to conduct a survey of children's homes and the organisations that run them to ascertain what arrangements are currently in place to encourage and support the young people living in the home(s) to access an independent professional advocate (or IPA). The survey asked the providers what arrangements they had in place to facilitate access to independent advocacy, how well they thought those arrangements worked in practice and ideas on how arrangements might be improved to ensure independent professional advocacy is made available to all children placed in residential care in Wales.
- 3.2 Similar lines of enquires were followed through in interviews with stakeholders. What arrangements were in place? How they worked in practice? How could access be improved? Young people were asked whether they knew about their entitlement to access independent advocacy and if so, how they had heard and their opinions on how that worked in practice. They were asked too for ideas and suggestions on how young people living in children's homes should get to hear about independent professional advocacy and how to access it.
- 3.3 We took advice from the project's advisory group on which stakeholders to include. We approached Heads of Children's Services through the regional advocacy leads, the business managers of the regional safeguarding boards and a range of independent providers of both children's care homes and of independent advocacy. Over 80 stakeholders were consulted or interviewed as detailed in Figure 1 below.

Figure 1: Interviews and consultations: category and number

Category	Number
Young people living in children's homes or who had recently lived in a	52
children's home or hostel	
Children's Services (Heads of service and operations managers)	8
Children's residential care providers (local authority, private and	
voluntary) including service managers, home managers, responsible	9
individuals (RIs), and owners.	
Children's advocacy providers – managers, advice and case managers	11
and residential visiting advocates.	
Other including: Children in Wales, Voices from Care, Barnardo's, 4Cs,	8
Care Inspectorate, Gwent Police and Crime Commissioner, Business	
Managers Regional Safeguarding Boards	
TOTAL	88

3.4 Finally, the legislative framework and the most relevant policy developments in Wales were reviewed in order to inform understanding of the statutory responsibilities of placing local authorities, commissioning practices, the new Regulations covering the registration and inspection of children's homes and the relevant learning from CIW's national review of children's homes. The fieldwork was conducted through June to mid-September. The survey results were analysed using Excel and the interviews analysed thematically. In early September the key findings and some draft recommendations were discussed with the project's advisory group.

FINDINGS

Profile of children's homes in Wales and of children and young people living in care homes

- 4.1 The profile of children's residential care in Wales is changing. A recent report by Data Cymru illustrates how the independent children's residential care sector has grown in recent years as the level of local authority residential provision has decreased. As of March 2018, there were around 150 children's homes in Wales. However, the number and location of children's homes run by private providers in Wales is an ever changing situation and the number of children's homes registered with CIW on the 31st March 2019 was 178. The most recent estimate is that the independent sector owned 155 of these services with only 23 children's homes in Wales owned by a local authority. These figures illustrate the growing dominance of the independent sector who own just over 85% of all provision.
- 4.2 There is an increasing trend for individual companies or organisations to own more than one children's home. It was estimated that in December 2017 around two thirds of registered children's homes in the independent sector were owned by nine providers (some of whom work across England and Wales). Residential care providers who owned five or more children's homes represented about 65% of the market share of children's homes operating in Wales¹⁹. The five providers were: Keys (22 children's homes); Priory (9); CareTech Community Services (8); Bryn Melyn Care (9); Action for Children (8); Landsker Child Care (7), Stepping Stones Care Services (7); Priority Childcare (6); Genus Care (5).
- 4.3 It proved difficult for Data Cymru in 2017 to discern from CIW records the different types of care provided for example, general therapeutic care or a transition to independence model of care. Using each setting's statement of purpose (SoP) and the description of the service within the latest inspection report, the researchers were able to discern that 72% of registered children's homes (107 settings) offered general therapeutic care and specialist services, 28% of registered children's homes in Wales (42 out of 149 settings) and 40% of beds in Wales operated as a short break/respite service or operated a model of care for children with learning disabilities, autism and physical disabilities.
- 4.4. The profile of children living in registered children's homes is also hard to discern from the information available. Residential placements for LAC accounted for around 6% of

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¹⁹ Ibid

all children placed (355 children in 2017 and stable for the preceding 5 years). The vast majority – 74% of looked after children at 31 March 2018 were accommodated in foster care placements, a gradual decline in proportion since 2012, when it stood at 79 per cent. Most children placed in residential care were aged 10 to 15 years. Boys are more likely than girls to be placed in residential care with a ratio of 60:40. The most common reason for child starting a placement in residential care was abuse and neglect, accounting for 48% of LAC starting residential placements.²⁰

The availability of independent professional advocacy for children and young people living in children's homes

- 4.5 We emailed a survey questionnaire to all 178 registered children's homes in Wales and received returns from 20 homes (care home managers or more senior managers from within the company head office team). Three of the homes provided short break respite care for children with disabilities, 17 provided full time care. Those homes provided by the local authority (4) and voluntary sector (2) all had contracts for visiting advocacy in place. The contracts were with registered advocacy providers and included an advocate visiting the home regularly (usually monthly), clearly displayed material informing young people of who the visiting advocate is and how they can contact them (Freephone number) and information on when they are next due to visit.
- 4.6 The remaining survey returns (14) were from children's homes in the private sector. Of these 10 said that they had residential visiting advocacy contracts with either TGP Cymru (7) or NYAS (3). Two reported other contractual arrangements for an individual to visit the home on a regular basis the role was not clear. As one respondent described: 'we have an independent visitor/advocate come to the house once a month to visit and speak to the young people but he is available at any time for them to contact if need be '
- In another private children's home where there were no contractual arrangements in place for residential visiting advocacy, the manager described how children are advised of their right to have independent advocacy support by the staff in the home. 'Each child is asked about advocacy upon admission, if they do not have an advocate they are asked if they would like one this is recorded in their personal profile and plan. They are also signposted via information in their children's guide which they received either prior to or upon their admission, this has info about advocacy and the contact....If a young person wanted an advocate we would go via their CSW or we signpost in the guide to TGP Cymru'.

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²⁰ Ibid

In another children's home without a contract for residential visiting advocacy, the manager explained that, 'Children are informed via our welcome guide, key work sessions and in young people's meeting who and how to access Advocacy. NYAS [have been] invited to home to discuss service for children'....... Our current children have not wanted or felt they needed the support of Advocacy at this time but are aware they can access it if that changes'. Another manager said, 'if they asked then we would contact an advocate from them'.

Residential Visiting Advocacy

- 4.9 As of April 2019, there were 23 children's homes run by 13 local authorities registered with the CIW. Seventeen of them providing full time as opposed to short break/respite care. One third of these responded to our survey indicating that residential visiting advocacy arrangements were in place, all but one under the regional contracts. Enquires of advocacy providers indicated that all 17 of the local authority children's homes providing full-time care have (or will shortly have) residential visiting advocacy arrangements²¹. Some, but not all, of the local authority care homes providing short break/respite care also have contracts for residential visiting advocacy.
- 4.10 For most this involves a named advocate visiting the home on a monthly basis, enabling the children and young people to get to know them. Posters are up on noticeboard in the home with free phone numbers for contact to be made at other times. We were advised that generally, residential care staff working in local authority run homes receive some training and awareness raising about advocacy what it is and how the children and young people in their care can access it from the residential visiting advocate.
- 4.11 Our assessment of the present arrangements for the provision of independent professional advocacy to children and young people living in children's homes run by the private sector is inconclusive because of the low number of survey returns (less than 10%) and a lack of data on the usage of contracted advocacy services. Our estimate is that the majority of providers do not have contracts in place with registered providers for residential visiting advocacy. The number of children's homes run by private sector which we know definitely have contractual arrangements with registered advocacy providers for residential visiting advocacy is 10. Most of the larger groups of providers for example: Stepping Stones, Priory, and Priority do not have residential visiting advocacy arrangements in place and for others (Landsker, Keys, and Bryn Melyn) we were unable to confirm whether they had contracts for residential visiting advocacy in all of their children's homes. Keys have contracts with TGP Cymru

²¹ Arrangements are now being set up in three children's homes in Bridgend after a change of contract.

for two of their children's homes in Wales but we could not identify any other such contracts between these larger children's care home providers and the two registered providers in Wales – TGP Cymru and NYAS.

CASE STUDY

Brian aged 12 – had known his advocate for two years and she had supported him through three changes of placement. When she visited him by appointment at a children's home in an isolated rural setting she was told that he had run away. The advocate asked if the staff were going to go search for him or report him missing to the police and they said, no - Brian would be back soon as he couldn't get far. The advocate called again and saw Brian who told her why he was unhappy at the home. Together they made a request to the local authority for another placement. This children's home did not have a residential visiting advocacy service but Brian was lucky that his independent professional advocate commissioned by his placing local authority was able to visit him.

- 4.12 As part of the scoping we were able to speak to a number of responsible individuals (RIs) and children's homes managers in all parts of Wales. Most had a limited understanding of the concept of independent professional advocacy and had no knowledge of the National Approach to Statutory Advocacy (NASA) in Wales or indeed the entitlement that children they were caring for had to the support of an IPA. We were able to look in more depth at one example of good practice in the private sector that seems to be working well from the perspectives of the resident young people, the residential visiting advocate, the residential care staff and the RI.
- 4.13 In summary, all local authority run children's homes providing full-time care have residential visiting advocacy arrangements in place. We estimate that around 5-10% of children's homes provided by the independent sector do also contract a residential visiting independent advocacy service with residential advocates visiting the institution once or twice a month to get to know the children and provide independent support if the children want it. However, the majority of children's homes in the independent sector do not have residential visiting advocacy arrangements in place and too many independent providers are not aware of the right of children and young people in Wales to access independent professional advocacy and get support to get their voice heard, a concern raised or a problem solved.

Other arrangements for accessing independent professional advocacy

- 4.14 As discussed above, the survey returns indicate that some providers have their own arrangements for advising children about their right to advocacy support. Including information about advocacy in their welcome guides, in key worker sessions and in young people's meetings. In the *Right to Care: Children's rights in residential care²²*, the Children's Commissioner's team consulted with children and young people living in what they calculated as around 10% of children's homes in Wales (11 homes) and spoke with 34 young people. While the Commissioner argues that children's homes have an important place in providing the right care for small numbers of young people in Wales, she presents evidence of how some young people feel frustrated at not being involved in decision-making. She highlights concerns that not all children are getting their full rights to receive information, be listened to and have their views taken into account when important decisions about their care are being made. This includes decisions about where they will live and contact arrangements with family.
- 4.15 A further worrying finding of the Commissioner's review was that very few homes had information about Meic or independent professional advocacy services on their noticeboard. However, more positively when it was raised during interview, the Commissioner reports that the young people did seem to know how and when they could access an independent professional advocate.
- 4.16 An area where practice has improved is in relation to children who go missing from care and the provision of 'missing' or 'return' or 'de-brief' interview with an independent person on their return. The role is different to an IPA as the independent person here is concerned with the child's best interests. However, the return interview is a point where young people could usefully be advised of their rights and entitlements to independent professional advocacy and how they can go about making contact with an IPA if they so wish.
- 4.17 Our interviews with Meic and the Children's Commissioner for Wales indicated that a small number of children known to be living in children's homes did make contact with their advice and advocacy services either directly or through a third party. However, it was acknowledged that the advisors would not necessarily know where the child or young person was living or their legal status when they made contact. We were also made aware by some independent providers that access to the internet, social media and the use of smart phones will not be possible for all children and young people because of safety and well-being considerations.

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²² Children's Commissioner for Wales (2016) Right to Care: Children's rights in residential care in Wales

4.18 In conclusion, the picture with regard to how young people find out about their rights and how they can access independent professional advocacy seems likely to vary from home to home. It's absolutely possible that some children and young people living in some children's homes run by the private sector never get to hear about these rights. The duty to advise children is of course on the placing local authority (the child's social worker) and not on the care home provider. The big lesson we learn from experience and from what young people tell us is they want to learn about their rights and how they might access independent professional advocacy, as and when required, from someone they know and trust. The fact that those providing care homes in the private sector do not seem to know about the National Approach to Statutory Advocacy (NASA), the Active Offer of Advocacy and the child's right to issue-based advocacy support is therefore cause for concern.

CASE STUDY

Eric aged 13 years is small for his age, does not have a reputation for being aggressive or difficult to manage. Eric rang the advocacy project late on a Thursday afternoon (before a bank holiday week end) to speak to his residential visiting advocate to ask her for advice. Eric was concerned that a member of staff had physically restrained him on the previous evening. He told the advocate that the member of staff had wrestled him to the floor, sat on his back and pressed his hand down on the side of his head to pin him down. Eric said that he had reported the incident to the Officer in Charge on Thursday morning. But the Officer in Charge didn't want to listen and said that he could go and see the GP if he wanted. Eric was concerned that the member of staff who had restrained him was back on duty that Friday and had not been spoken to by the Officer in Charge. Nothing seemed to have been done and he was a little upset and frightened. The RVA arranged to visit him within the hour.

When the RVA arrived she saw that Eric had bruising to his face, he had two black eyes, scratches to his face and body and bruises on his back and ribs. The other young people in the unit said that this member of staff had also hit them on different occasions.

The RVA made a child protection referral and the emergency social worker arranged an examination by a paediatrician that evening. The medical examination concluded that bruising to Eric's eyes was caused by pressure to the sides of his head when he was pushed against the floor. The member of staff was suspended and an emergency strategy meeting held by the local authority. Eric was immediately moved to a foster home.

How well do the current arrangements work in practice?

4.19 As part of the scoping we sought to try and understand how children and young people living in children's homes find out about their entitlement to independent professional advocacy and how they can access such support and how this might be improved. Consultations with over 50 young people in care as part of this scoping study illustrated that some young people do know about advocacy but some do not²³. Most had not heard about the Active Offer of Advocacy. Those young people who did know about advocacy said they found out about it from a number of different places:

I only found out about it at [names children's home] when one of the other boys told me about it when the advocate came here.

I found out about advocacy because they wanted to move me & I didn't want to go & that's when I was told about having an advocate.

I was told about 2 years ago in another residential placement. I wasn't told about it when I first came to [names children's home]. I only found out about it when the advocate visited [names children's home].

I was told only when I wanted to complain. I didn't know about it before & I had been in care for 4 years before I heard.

- 4.20 Most young people who knew about advocacy had found out from their key worker in the home, their foster carers, or their social worker. Some remembered a poster somewhere. A few young people had heard from a teacher and at least two young people first heard about advocacy at a 'Young Commissioners' activity event run by the 4Cs. When asked about who they would like to hear from, the most common reply was that they want to hear about advocacy from their key worker or 'trusted member of staff' in the home, or foster carer; their teacher or their social worker. The clear message was that young people really want to hear about advocacy what it is and how they can access it, from people they know and trust.
- 4.21 The importance of the key worker role for children living in residential care is echoed in the *Right to Care: Children's rights in residential care*²⁴. Support from key workers was very important to the young people the Children's Commissioner's team

²³ 51 of the 52 children and young people were in care – around 30 lived or had recently lived in private sector children's homes at the time of the consultation. The other young person had recently left care.

²⁴ Children's Commissioner for Wales (2016) Right to Care: Children's rights in residential care in Wales

interviewed. They felt that their key workers 'stuck by them' and didn't let them down, that they encouraged them to make changes to their lives and/or that they understood what the young person was going through, and pushed them to strive for better. The young people saw their key workers as unique in this way compared to any other workers they knew of, as they had the time and opportunity to work through something together. Relationships with social workers and other professionals for young people in the Commissioner's study were rather more mixed, with some positive experiences but also some frustration about not hearing from social workers about important decisions in a timely way.

- 4.22 The young people we spoke with as part of the scoping advised us that the best ways to let children know that they can speak to someone independent include:
 - Posters
 - Key working sessions
 - Foster carers
 - As soon as you arrive at the home
 - In the welcome guide at the home
 - Social worker should have informed before arriving
 - Speak openly about advocacy at YP meetings
 - Newsletters
 - Schools
 - Internet
 - Posters
 - Talk 'talking about it and being informed is the key to knowing your rights'
- 4.23 The feedback we received from young people who had received independent professional advocacy support was all positive. One young person who had got advocacy support when she was placed in an unsuitable unregistered children's home or hostel at the age of 17 said that advocacy literally had been a 'life-saver'. She had been in care for some time but only heard about independent professional advocacy from her Personal Adviser in the Leaving Care Team. With IPA support she was moved to a more suitable placement. More positive feedback is presented below particularly in relation to the residential visiting advocacy model.
- 4.24 We did receive some more critical comments on independent advocacy services from both a children's home manager and another stakeholder whose team work directly with young people living in residential care. In both cases examples were given of an advocate being involved with a young person but of them being unreliable and not following through as promised to the young person. There was some criticism too of the ways in which some professionals explain advocacy to young people with examples given where an Independent Reviewing Officer (IRO) mentions it at a LAC

Review 'so she can tick a box – not being proactive. In our experience some IROs and social workers either don't really understand themselves what advocacy is about and sometimes really don't want a young person to have an independent advocate because they know it will be more work for them. Exactly how a young person gets to hear about advocacy is important. It can be very confusing for a young person'.

- 4.25 This respondent also raised concerns about whether the two current advocacy service providers in Wales could meet the increasing demand arising from the Active Offer of Advocacy and cited waiting lists operated by service providers in some areas. They also raised concerns about the confusion within the system about which 'out of county' children were entitled to independent professional advocacy in Wales – for example, children placed in independently provided residential care in Wales by English local authorities which meant there were unhelpful situations in an individual children's homes where some children were thought to be eligible and some were not. This, the respondent noted, was not good because living a long way from home and from your placing local authority could mean that young people felt themselves to be in a very 'lonely place'. They also suggested that keyworkers could be very good at facilitating access to independent professional advocacy for a young person in their care but that if they don't agree with that course of action 'it doesn't go anywhere'. These comments are a reminder that exactly how children and young people are engaged in conversations about independent professional advocacy is an important area to consider – with more work needed on persuading those working directly with children and young people, of its benefits.
- Offer' linked to the provision of independent professional advocacy for children looked after. Since the Children's Commissioner for Wales recommended in 2012 that local authorities should make an Active Offer of Advocacy to all children and young people entering the statutory childcare system, the term is now used in the Welsh Government's Strategic Framework for the Welsh Language in Health and Social Care. The Welsh Government has published an information pack on delivering the Active Offer which requires social services and social care providers to be more pro-active in offering service users the opportunity to speak in Welsh²⁵. A number of independent providers of children's homes in Wales advised us that they knew and understood the implications for them of the Active Offer relating to the Welsh Language but not in relation to the Active Offer for the provision of independent professional advocacy.

²⁵ More than just words –delivering the active offer training pack for social services and social care

Residential Visiting Advocacy

- 4.27 We were able to consult with 13 young people living in residential care who had used or were still using an IPA. These young people were from six different children's homes, provided by five different providers. Most had recent or current experiences of living in a home with residential visiting advocacy arrangements in place. We asked about how they thought the arrangements for residential visiting advocacy worked in practice. The box below sets out their very positive comments. We also interviewed three residential visiting advocates (RVAs) who between them regularly visit 15 children's homes. In all cases the RVA visits the children's home once a month and had been doing so for a number of years. Young people, staff and the advocate all spoke positively of the arrangement. They acknowledged that it can be difficult to engage with the young people to begin with but over time in homes with relatively stable populations the RVA had successfully built up relationships with the young people and with the staff.
- In situations where residents are placed from England or in relatively distant parts of 4.28 Wales and the young person wants advocacy support with an issue linked to their Care Plan and home area – RVAs will most likely make calls to the young person's social worker and negotiate the provision of a 'home' based advocate or offer to provide the advocacy support direct – depending on what the child or young person prefers. In the latter case the residential visiting advocacy provider will also negotiate a fee for the support. If the issue raised by the young person is more to do with the running of the home and relationships with staff for example, the RVA will take up the issue in whatever way the young person wishes within the capacity of the existing contract. All three RVAs indicated that these arrangements work pretty well with most placing local authorities willing to co-operate in support of the young person's choice. Operational managers in local authorities also reported that both NYAS and TGP Cymru were skilled and experienced in arranging an IPA for a young person placed out of the area – either by locating an IPA in the area where the child is living (NYAS has advocacy services in England as well as Wales) or arranging for an IPA from the home area to visit.
- 4.29 One local authority advised us that it looking to extend its regional IPA contract to include not only residential visiting advocacy for its own children's home but also for a private children's home within the local authority area where most of the residents are local children placed by the host.

Feedback from young people on Residential Visiting Advocacy

'I was told about advocacy 2 years ago in another residential placement. I wasn't told about it when I first came to [name of children's home]. I only found out about it when the visiting advocate came to the home. Advocacy can help you sort an issue, they will speak up for you & make sure the SW's are making decisions for me in line with my rights.'

'I think it should be in the welcome book when you come to [name of children's home]. I think it's good what happens now with [names advocate] visiting.

Advocacy has made sure things are in place and helped me to tell social services where I would like to move too. It's all worked and I will be leaving to live there soon.'

'I would tell anyone to have an advocate as I think all young people should have them as they make things happen & made other professionals take me seriously.'

'Advocates fight your corner. I think all young people should meet an advocate so they know they have that option & they should attend meetings.'

'Advocates are great and really challenged the others who were making bad decisions for me....... really trusted her.'

'The visiting advocate was great & got in touch with my social worker and found out who provides advocacy in my area & now I have an advocate.'

4.30 Suggestions of improvements to the residential visiting advocacy model were collected from children's home manager via the survey. They were all very positive about how the arrangements worked but made the following suggestions for improvements:

'Make sure every residential provision clearly states how independent advocacy is arranged within their statement of purpose and get CIW to make it something they check before permitting registration. Include it in the annual reporting that takes place.' (Independent provider)

'Appointments often ad hoc – more notice of visits would help ensure young people are available and prepared.' (Independent provider).

'Check when inspections take place.' (Independent provider)

'Weekend visits.' (Local authority – Respite short break care)

'More pictorial formats and relevant to young people with disability.' (Local authority – Respite short break care)

'Leaflets at the home, also we arrange for young people to be introduced.' (Private provider with no visiting advocacy in place)

'The current arrangement could be greatly improved if each [residential visiting] advocate could do more frequent face to face meetings with each young person and their key workers.' (Local authority – Respite short break care)

4.31 In summary, from the information available, the residential visiting advocacy model seems to be working well in a small proportion of children's homes in Wales although the model needs to be carefully adapted and enhanced depending on the nature of the care home and the needs as well the wishes of the young people who live there. The RVA is well placed to feedback to managers and the CIW on the most common themes arising from their routine visits - to improve responsiveness and the quality of care without breaching confidentiality. However, the RVAs who participated in this study reported being rarely asked to speak to the inspectors when the homes are inspected and that sometimes it can be hard to pin down home managers for routine meetings.

CASE STUDY

Linda aged 14 was placed in a secure unit which was over 200 miles from her home area. She had been there for four weeks and was missing her parents and family. Most of the other residents were male, and teased her about being English.

Linda's parents had been unable to visit as they could not afford the travel expenses. The social worker had said that the local authority would reimburse any travel costs, but Linda's parents could not afford train fare up front. Linda was unable to contact her social worker as her social worker was on sick leave. Linda had not had a visit from anyone from her placing authority, did not know what was happening and what the plans were and when she would be able to go home. Linda said at this stage she felt very frightened and very sad. She felt no one cared and she had been forgotten.

Linda saw the information about the RVA on the notice board and also information about her rights. The other young people in the unit told Linda that the RVA was nice, independent and easy to talk to. Linda asked the RVA to help her. The RVA spoke to the staff at the unit and asked for details of Linda's placing local authority. The RVA then found out who the contracted independent advocacy provider was for that authority and engaged their help to get travel warrants and expenses for Linda's parents and little sister to be able to visit her. The independent professional advocate from the placing authority was also able to make sure that Linda could see her care plan and understand the reasons for why she was in the unit, and more importantly, how much longer she could expect to be there.

It was agreed that the RVA would help Linda prepare for and support her at any planning review meetings while she was at the unit. (An arrangement to pay for this service was negotiated between the local authority advocacy provider and the residential visiting advocacy provider).

The RVA was also able to work with Linda's key worker at the unit to arrange a restorative meeting with the other young people to talk about the teasing which was getting Linda down. The other residents said they did not realise it upset Linda so much and were very apologetic and said they had meant it in a friendly and inclusive way. Linda's parents and sister continued to visit Linda every two weeks. Linda told the RVA that she felt happier and safer in the unit and that being there helped her sort herself out and actually saved her life.

Responsibilities of the placing local authority to inform the child or young person of their right to independent professional advocacy and how to access a service

- 4.32 Our interviews with stakeholders suggested that while the social worker may have every intention of informing the child or young person about their rights to independent professional advocacy when they move into a particular children's home. The reality is there may well be too much going on for both the social worker and the young person to retain the knowledge and information. Without those in the children's home being trained and advised on advocacy to follow up with the child at a later point it can all get lost. As well as the need to train and raise awareness amongst residential child care staff, it is, we concluded also prudent to identify points when it is most important for children to be informed about their right to support from an IPA and advised as to how they go about getting one.
- 4.33 There is a need to further strengthen existing statutory procedures so that there are repeated opportunities built in to the system to 'check and top up' awareness and ensure young people are advised of their rights and of what support is available. The NASA's Active Offer of Advocacy is probably not the right vehicle here because the vast majority of children and young people placed in children's homes owned by the private sector have already been in care for some time. LAC statutory Reviews have already been identified in the NASA as a key point when IROs should check that all children and young people are aware of their rights to IPA. In respect of children living in children's homes, the End of Placement (LAC) Review is a particularly timely opportunity to ensure that the child or young person is advised of their right to independent professional advocacy, as it should take place within seven days of the child being placed in the home.
- 4.34 In response to the Public Accounts Committee's enquiry into care experienced children and young people and their call to for Welsh Government to strengthen End of Placement (LAC) Reviews, Welsh Government are currently considering the need to strengthen the Part 6 Code of Practice to include specific guidance on the steps to be followed when it is proposed to move a child to a new placement. There is opportunity here if Welsh Government are reviewing the guidance to include instructions to ensure that children are told about their right to independent professional advocacy and how to get hold of an advocate at all End of Placement (LAC) Reviews.
- 4.35 Similarly, guidance could ensure that at all 'return' or 'de-brief' interviews (for young people who go missing from care), the young person is advised of their rights and an explanation is given on how they can get the help and support of an IPA.

Placements of looked after children in unregulated homes

4.36 The scoping also revealed a level of concern from stakeholders in social services, the police and the third sector about the nature and quality of some of the residential care provided by the private sector to the most vulnerable and high-need young people. In all cases we were informed that all of these concerns had been promptly reported to CIW. We have previously noted that the 4Cs is working with providers to improve quality with its new Framework for Residential Care whilst the CIW works to embed a new registration and inspection arrangements for care homes in Wales and Social Care Wales works on developing a competent and skilled workforce. The scoping identified particular concerns about the placement of looked after children in unregistered accommodation because of the pressure on available placements and a loophole in the regulations that allows providers to distinguish between the need for 'care' and the need for 'support'. The advisory group heard first-hand of the experience of a young woman placed in a most unsuitable hostel environment at the aged of 17 years. She was terrified to be living alongside petty criminals and drug dealers. Other similar stories reported by 16 and 17 year olds placed in unregulated accommodation in England and Wales have been aired in the media²⁶.

²⁶ For example: <u>Britain's Hidden Children's Homes</u> (BBC Newsnight, May 2019)

CONCLUSIONS & RECOMMENDATIONS

- 5.1 Children in children's homes run by the private sector may well not know about their rights to independent advocacy support or for children placed by Welsh Local Authorities, the child's right to receive an Active Offer of Advocacy. From our enquiries we estimate that 5-10% of children's homes run by the private sector have residential visiting advocacy arrangements in place. There are a number of examples of independent children's homes contracting either TGP Cymru or NYAS to provide residential visiting advocacy but we estimate that the practice is not wide-spread.
- 5.2 Residential visiting advocacy is favoured by advocacy providers as a model for all children's homes in Wales including those that provide respite/short break care for children and young people with learning disabilities, autism and/or physical disabilities. The model is however, a 'work in progress' which should be evaluated and further developed under the new regulatory arrangements for children's advocacy services in Wales.
- 5.3 The scoping exercise indicates that the concept of independent professional advocacy and the rights of children in care to access issue based support is not widely known or understood by those who own or work in children's homes provided by the private sector. We know that young people often access independent professional advocacy through an adult who they know and trust. It follows that more needs to be done to ensure that children's key workers and children's homes managers know and understand independent professional advocacy and the rights of children and young people in their care to access such support.
- 5.4 The NASA as it currently stands focuses local authority efforts on children entering the care system receiving an 'Active Offer for Advocacy'. The scoping suggests that more needs to be done by the placing local authority in the subsequent weeks, months and years to ensure that young people are fully informed and understand the issue-based advocacy support that is available to them. Without social workers or IROs having those regular conversations with young people and those working in the children's homes being trained and able to follow up with the young person—it can all get lost.
- 5.5 Action is required to encourage and support the private sector to establish arrangements for residential visiting advocacy in all of their children's care homes and to encourage and support (placing) local authorities to strengthen their procedures under Part 10 Code of Practice on Advocacy of the Social Services and Well-being (Wales) Act.

A number of recommendations are put forward for Welsh Government to consider around these two areas.

A. Design and implement a communications strategy to raise awareness and develop understanding of independent professional advocacy and requirements (under Part 10 of the Act) in the private residential child care sector.

A time-limited campaign could be commissioned to inform young people and those around young people in residential care (staff, owners, therapists, teachers, LAC education and health co-ordinators, social workers, IROs etc.) of young people's entitlement to independent support— of the different services and types of support available including the services provided by Meic, TGP Cymru, NYAS, the Children's Commissioner and Voices from Care. The Welsh Government commissioned information, advice and advocacy service for children and young people (Meic) have expertise in providing digital information and education for young people. There is much to be learnt from the experts in the field about how best to target information on particular groups within an overall universal approach.

The campaign could usefully make use of opportunities to attend and make presentations at a number of active forums and networks which involve private sector providers of children's care homes. For example, forums convened by the 4Cs, a forum convened by private sector children's care home providers in north Wales, and a relevant forum run by the Gwent Missing Hub Forum.

Messaging on what is described as the Active Offer (for Advocacy) should be distinguished from the Active Offer relating to the use of the Welsh Language in social services and social care.

B. Revise the RISCA arrangements to make the provision of residential visiting advocacy in each and every children's home (by a contracted registered advocacy provider) a requirement for registration as a provider of children's care homes in Wales.

This will require changes in regulation which will take some time to introduce. As an interim measure the Welsh Government should include in the current inspection framework for registered children's homes, a requirement to assess the arrangements in place to ensure that children living in the home know about their right to independent residential visiting advocacy and how to go

about accessing issue-based advocacy support. Evidence should be routinely taken from the residential visiting advocacy service if one exists as well as from resident children and young people.

C. Consider including the following activities in the forward work programme of the MAG's Task and Finish Group on Children's Residential Care:

- Ongoing training and awareness raising on advocacy and children's rights under the residential child care programme – to be delivered in partnership with the registered advocacy providers.
- ➤ Linking registered advocacy providers into the current developments to build capacity in the residential child care sector.
- ➤ Other actions (as determined) that would serve to encourage and support private sector providers to establish residential visiting advocacy arrangements in their children's homes.
- Keep under review how such arrangements are working in practice including the availability of posters advertising the service, take up rates and young people's satisfaction with the residential visiting advocacy service and the responses young people are getting from decision-makers.

D. Consider including the following activities in the forward work programme of the MAG's Task and Finish Group on children's advocacy/NASA:

- Develop a best practice specification for 'Residential Visiting Advocacy' in children's homes.
- ➤ Encourage the development of reciprocal arrangements between registered advocacy providers for the deployment of IPAs and between the placing and hosting local authorities as to costs.
- Establish arrangements for monitoring the take-up and outcomes of issue based advocacy by placement type.
- > Strengthen the (placing) local authority's procedures and guidance for ensuring children and young people placed in independent children's homes are regularly advised of their entitlement to independent professional advocacy and given details of how to make contact with

an advocate. For example at End of Placement (LAC) Reviews which should take place within 7 days of the child being placed in a different placement and at any 'return to placement' interviews.

The placing local authority has a responsibility to inform children and young people under Part 10 of the Act – informing children and young people living in independent children's homes – often a long way away from their home area should be a priority. The role of the child's social worker and the IRO are key considerations.

- 5.6 Finally, by way of conclusion, the scoping has highlighted two particular concerns that demand further exploration:
 - How cross border issues impact on the discharge of local authority functions relating to children's advocacy (under Part 10 Codes of Practice). Whilst the scoping identified some examples of excellent liaison and in some cases, reciprocal arrangements between local authorities and between advocacy providers, it is not clear how children from Wales placed in children's homes in England access independent advocacy support and vice versa.
 - The continuing practice whereby some local authorities in Wales, usually desperate for a bed in an emergency, place looked after children in unregistered children's homes.

APPENDIX A: GLOSSARY OF TERMS

Term	Abbreviation	Explanation
Active Offer	(AO)	The Active Offer is a new element to statutory advocacy provision. It involves a designated meeting between a child or young person and an advocate for any: • Child or young person entering the care system • Child or young person entering the Child Protection arena
Advocacy		Advocacy is promoting the views, wishes and feelings to ensure they are taken into account and acted upon during the decision making process that affects a person's life.
		It is not working from a best interest perspective but seeks to represent the person's voice and be on their side.
Advocate		An advocate is someone who supports others to speak up so that their wishes and feelings are heard, and ensure that they understand their rights. Advocates may be employed, volunteer with an agency, or be family or community members who want to provide assistance.
Independent Person	(IP)	Independent Person (IP) is: i) The person appointed by a local authority to oversee the process as the Investigating Officer carries out a Stage 2 complaint investigation. ii) The person appointed by the local authority to be a member of a panel appointed to review a Secure Accommodation Order.
Independent Professional Advocate	(IPA)	Independent professional advocacy - involves a one-to-one partnership between an individual and an independent professional advocate who is trained, paid and registered with the Care Inspectorate to undertake their professional role as an advocate. The advocate will be employed and supervised by an organisation independent of the local authority's social services department.

Independent Visitor	(IV)	An Independent Visitor (IV) is a volunteer who invests their time to befriend and support a child or young person in care. The expectation is of a long term relationship. An IV has to be independent of the local authority.
Independent Reviewing Officers	(IRO)	Are social workers, who are also experienced social work managers whose duty is to ensure the care plans for children in care are legally compliant and in the child's best interest. IROs chair child protection case conferences and six monthly review meetings for children looked after.
National Approach to Statutory Advocacy	(NASA)	The National Approach to Statutory Advocacy is a Wales wide approach to independent professional advocacy, adopted by Welsh Government, ADSS and Local Authorities across Wales. It has several overarching principles including the standardisation of service delivery (issue based advocacy) and service accessibility (eligibility criteria) and a number of key elements, including the Active Offer of Advocacy and local and regional performance monitoring and recording templates.
		The NASA also reflects the National Standards and Outcomes Framework for Advocacy, ensuring advocacy services are commissioned and provided in line with the standards.
Non Instructed Advocacy	(NIA)	In non-instructed advocacy the advocate will observe the child or young person and their situation, look for alternative means of communication, gather information from significant others in the child or young person's life, if appropriate, and work to ensure that their rights are upheld.
Residential Visiting Advocacy Service	(RVAS)	A Residential Visiting Advocacy Service involves an independent professional advocate visiting a children's home or residential care setting at a regular prescribed time to provide independent professional advocacy support for residents who request it.
Residential Visiting Advocate	(RVA)	A residential visiting advocate supports children and young people who live away from home in children's homes, residential schools and residential healthcare settings making sure their views, wishes and feelings are heard and respected. They visit the home regularly and establish a relationship with residents, ensuring there is information available to them about their rights and entitlements and that they understand how

		to access independent professional advocacy. The RVA also provides issue based advocacy support.		
Return to Placement Interviews	(RPI)	Interviews undertaken by an independent professional (who could be an advocate) after a child or young person has returned to a children's home or placement after they have been missing.		

APPENDIX B: ORGANISATIONS THAT PARTICPATED IN THE SCOPING STUDY

Aran Hall (Senad Group)
Barnardo's Better Futures Cymru
Care Inspectorate Wales
Children's Commissioner for Wales
Children's Commissioning Consortium Cymru (4Cs)
Children in Wales
Gwent Police and Crime Commissioner
Gwent Missing Children Team
Local authorities – SW region, Gwent region, Cardiff, RCT, Denbighshire, Swansea, Gwynedd
Meic
Ministerial Advisory Group on Looked After Children (Consultant)
NYAS
Priority Childcare Ltd
Priory Group Ltd
Unique Homes Ltd.
TGP Cymru
Voices from Care
Welsh Government

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