Protecting children and young people in residential care: are we doing enough?

A review by the Care Commission of practice in residential care for young people concerning protecting children, planning for their care and using physical restraint.
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Young people who live in residential care services are among the most vulnerable people in Scotland. Many of these young people have significant social, emotional and behavioural difficulties. Most of these young people will have been involved in children’s hearings or experienced significant difficulties in mainstream schools. Some have a range of complex needs such as sensory impairment, physical disabilities or autism. These young people depend on skilled staff to protect and care for them and to support them in their development. Too often we read about serious allegations of past mistreatment in residential care and therefore the Care Commission has paid attention to three important areas of practice, to check on safeguards for young people and to encourage better practice in child protection.

This report provides a national picture of three important areas of practice in residential services for young people:

- protecting children
- planning for their care
- using physical restraint.

The report tells you what we have learned from our regulation of the quality of practice in these three areas. We make recommendations in the report for improvement in care practice and management which we hope will be helpful to people and organisations who provide and support these services.

We have identified examples of good practice in the report, but the scope for improvement shows that we cannot be complacent. We need to remain vigilant to ensure that proper protection of these vulnerable young people is always in place.

Whatever your interest in residential care services for young people, I hope that you find this report useful and informative.

Ronnie Hill
Director of Children’s Services Regulation
Care Commission
Throughout this report we use professional and specialist terms that not all readers may be familiar with.

**Young people**
We have shortened ‘children and young people’ to ‘young people’.

**Care plan**
This is an agreed plan for looking after a young person and meeting his or her needs. Care plans are made by the local authority responsible for placing the young person in the residential service.

**Care home**
Care homes provide residential care for young people who are usually of secondary school age, although some may be younger. Most young people who live in care homes have been assessed as needing to be cared for outwith their family home and are placed in residential care by the local authority, usually after a children’s hearing. Young people living in care homes are usually educated in schools near the care home.

**De-escalation**
This term means helping young people and others present to calm down, to prevent the use of physical restraint in situations where young people or others may be harmed.

**Personal plan**
This is a plan for individual young people living in residential services. It includes details about how care will be provided to the young person and how any other needs will be met. The personal plan is agreed between the care service, the young person and the local authority responsible for placing him or her in the service.
Residential special school
These schools provide care and education for young people with significant social, emotional and behavioural difficulties. Around two thirds are referred to the school following a children’s hearing. The schools also provide care and education for young people with complex needs such as sensory impairment, physical disabilities or autism.

Secure accommodation services
These services provide secure accommodation and education for young people who may be a danger to themselves or to other people, and who have a history of running away from more open care homes. Young people are usually placed in secure accommodation through the children’s hearing system or courts.

Risk assessment
This is the process of identifying hazards to the safety or well-being of young people, estimating how serious and likely they are, and identifying and recording reasonable measures to minimise unnecessary hazards.
Our findings

This is a summary of our findings; Section 3 of the report sets them out in detail.

Our inspections have found that a number of services use good practice in protecting children, planning for their care and using physical restraint. However, we found that over 50% of services need to improve aspects of their practice in one or more of these areas. The challenge is for all services to achieve consistently good practice in all these areas.

Staff need to build positive relationships with young people and understand the unique needs of the young people they are caring for. They also need to have confidence and skill in finding ways that will work for individual young people to help calm situations down and avoid the need for physical restraint. Staff need to work in an environment where both they and the young people are valued and respected.

The people who provide services, together with senior managers of the organisations running the service, have a vital role in setting the tone and culture of residential care services. Local authorities who place young people in residential care need to ensure that accurate assessments and care plans are in place for young people. Local authority staff should work with residential care staff to keep care plans up to date and to review situations where physical restraint has been used.

Services are not legally obliged to record physical restraint in a standard format. This can make it difficult to collate an accurate picture of the extent to which physical restraint is used. The Care Commission will continue to promote the use of the recording format set out in ‘Holding Safely’. An accurate national picture of the use of physical restraint would be more easily achieved if all service providers used this system.

We need to continue to ensure that inspectors are knowledgeable about best practice in calming situations down and trying to avoid physical restraint. We need to continue to monitor and report on the national picture and on how individual services are performing.
Our recommendations

These recommendations reflect both what we found and key messages from a seminar in September 2007. This was the Scottish Institute of Residential Child Care (SIRCC) and Care Commission seminar: ‘Reducing physical restraint: a culture shift for organisations?’

Local authority staff responsible for placing young people in residential care services and care service staff need to make better assessments of young people’s needs before they are placed in residential services, to ensure services are able to deal with challenging behaviour without excessive use of restraint.

Care services need to consider and respond to the detailed recommendations set out in Section 3 to improve practice in child protection, care planning and the use of physical restraint.

The Scottish Government, the Convention of Scottish Local Authorities, appropriate professional organisations, service providers and the Care Commission should work together to promote the use of a standardised system for recording when physical restraint is used and to consider the merits of introducing a national accreditation system for training in de-escalation (calming situations down) and the use of physical restraint.

The Care Commission will continue to encourage care service providers to improve their practice in these three areas of work, and to involve young people, their families and advocates in doing so.
Introduction

This introduction covers:

- Who we are
- What this report is about
- Who this report is for
- Why we have published this report

Who we are

We were set up in 2002 to help improve care services in Scotland. We register and inspect over 15,000 services that care for more than 320,000 people in all parts of Scotland. These services include childminders, foster care and adoption services, nurseries, day care services, care homes and private hospitals.

As Scotland’s national regulator of care services, we register and inspect services, investigate complaints and, where necessary, take legal action to make sure a service is meeting the standard of care it should be. We publish our findings in inspection reports to encourage services to improve the quality of the care they provide.

We also publish reports that give a national picture of the availability and quality of care services.

What this report is about

This report considers three important areas of practice in residential services for children and young people:

- protecting children
- planning for their care
- using physical restraint.

The report is based on what we have learned from our regulation and inspection work with services for young people in 2006-07. It highlights what needs to be done to improve practices in these services.
We considered these three areas because they are very closely linked. For example, young people in residential care services need to be protected from harm, abuse and exploitation. Careful planning is needed to identify and minimise risks to individual young people’s safety and well-being, including risks they may pose to themselves or to other young people or staff. And if staff need to deal with risks of harm, young people should know that they will only be physically restrained as a last resort. Care services need to implement these practices well to make sure young people in residential care are safe and well cared for.

This report is based on our work with the following services:

- care homes for children and young people
- residential special schools
- secure accommodation services.
Who this report is for

The report is aimed at:

- the people and organisations who provide residential services for young people
- local authorities responsible for caring for young people
- other regulators and inspectorates, such as Her Majesty’s Inspectorate of Education (HMIE) and the Social Work Inspection Agency (SWIA)
- the Scottish Government and others with an interest in childcare policy and practice
- young people, their carers and advocacy services, such as Who Cares? Scotland.

Why we have published this report

This report provides information about areas where improvements can be made in residential care services for young people in:

- protecting young people
- planning their care
- de-escalation and physical restraint.

This report also highlights what needs to be done to improve practice in these services, which we identified during our inspection, investigation and enforcement activities during 2006-07.
Section 1

Background to this report
‘It’s feeling at home’

It’s when you’re not alone
It’s when you’re safe in your home
It’s not having to worry about who’s there
It’s not having to share (a room!)

Feeling safe is important
It’s not feeling alone
Feeling safe and secure
It’s feeling at home
When you’ve got someone to turn to
It stops you feeling blue

Lyrics by young people living in care homes, Care Commission’s Young Persons Forum, March 2005

This section covers what the National Care Standards say about:

- protecting young people
- care planning
- using physical restraint
- Holding Safely guidelines

What the National Care Standards say

National Care Standards set out the standard of care that people can expect from any care services they use. The standards are written from the point of view of people who use care services. Published by Scottish Ministers, the standards cover every type of care service.
The following two sets of National Care Standards set out the standards of care that young people can expect:

- Care homes for children and young people
- School care accommodation services

These are available on our website www.carecommission.com

There are no separate National Care Standards for secure accommodation services; the National Care Standards for school care accommodation services are therefore used. The following sections summarise what the standards say about the areas that this report is about.

**Protecting young people**

Young people should expect to feel safe and secure and be confident that staff know what to do to help when there is a concern about their safety. They should be protected from all kinds of abuse and staff should know what to do and who to contact for help if abuse occurs. Young people should also know who to contact if they have concerns and they should expect to be helped by staff to make that contact.

**Care planning**

Young people are cared for in residential settings such as care homes because, at a particular point in their lives, this is believed to be the best way to look after, protect and nurture them. But residential care is not an end in itself. It must be part of a planned programme of care aimed at helping young people to develop and to change their lives for the better.

A personal plan sets out a young person’s needs and goals and details how to meet these needs and achieve the goals. Young people and their families or carers should expect to be involved in developing and reviewing the plans and agreeing how to achieve them. Young people should expect the services they receive to be based on these plans. Indeed, this is required by law\(^1\). They should expect the people and organisations who provide services to work closely with the local authorities responsible for placing young people in care when developing, working to achieve and reviewing these plans.

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\(^1\) The Arrangements to Look After Children (Scotland) Regulations 1996 and The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002
Using physical restraint
Young people should expect their care plans to consider personal matters of risk, including the risk of young people harming themselves or others. They should expect staff to be skilful in helping to calm situations down where young people may harm themselves or others and do so in a way that takes account of the individual’s personal plan and risk assessment. Young people should know that staff members will use physical restraint only:

• if there is likely to be harm or damage
• within clearly written best practice guidelines
• if other methods of calming situations down have not worked.

They need to know that they will only be physically restrained as a last resort to ensure their protection or that of other people, in keeping with the agreements set out in their care plan.

The National Care Standards also make it clear that young people have responsibilities as well as rights. Young people should be helped by staff to respect and help other young people. Staff are expected to explain responsibilities, rules and policies which affect young people in a way they can easily understand.

Holding Safely guidelines

Holding Safely is a set of good practice guidelines published by the Scottish Institute for Residential Childcare in 2005. They aim to help ensure physical restraint is rarely needed and used only as a last resort. They tell services how they should deal with young people before, during and after an event for which some form of physical restraint is needed. They also cover when and when not to restrain a young person. Young people should expect services to use Holding Safely guidelines if this kind of event arises.

After the guidelines were launched, we agreed to look – during inspections in 2006-07 – at the extent to which services had implemented them, and to publish what we found.

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2 Holding Safely, Scottish Institute of Residential Child Care, 2005
http://www.sircc.strath.ac.uk/publications/Holding_Safely.pdf
Section 2

How we carried out this study
This section covers:

- What we looked at
- How many services there are

What we looked at

Inspections
During our inspections in 2006-07 our officers (Care Commission Officers, or CCOs) asked care services about their practices in protecting young people, planning their care and how they used physical restraint. They checked what services said by:

- talking to young people resident in the services
- talking to service managers and staff
- observing practice
- examining a sample of young people’s case files and records
- talking to local authority social work staff responsible for the young people.

When we inspect a service we issue an inspection report. If we identify that a service needs to improve the care it provides, the report will include measures called recommendations and requirements.

If we think that a service should make improvements to achieve the standards set out in the National Care Standard then we make a recommendation.

If a service is not complying with the regulations set out in the Regulation of Care (Scotland) Act 2001, then we will make a requirement. Inspection reports are available on our website www.carecommission.com
Complaints and enforcement activities
In addition to our inspections, we considered all complaints about, and our enforcement activity relating to child protection, care planning and physical restraint, including de-escalation.

We also have a legal power of enforcement, which means we can:

- vary conditions or impose new conditions that services must meet to be registered with us
- serve a legal notice that requires services to make improvements within a set timescale
- cancel a service’s registration.

Seminar on de-escalation and physical restraint
The report’s findings also reflect the key messages from a September 2007 seminar focusing on good practice in de-escalation and physical restraint.

The seminar was held by the Scottish Institute of Residential Child Care (SIRCC) and ourselves and was called ‘Reducing physical restraint: a culture shift for organisations?’. The SIRCC will publish a report on this seminar.

Several key messages about good practice arose from this event. Working groups stated that openness, trust, respect and mutual understanding between staff and young people were needed to help set the tone of the service. Working group members believed that setting this kind of atmosphere would help to reduce the need for the use of physical restraint.
How many services there are

On 31 March 2006 a total of 236 care homes for children and young people, residential special schools and secure accommodation services were registered with us. We did not include services that cancelled their registration between 1 April 2006 and 31 March 2007 as these may not have been inspected. Therefore, the figures in Section 3 are based on 224 services. Figure A shows the number and types of services.

Figure A:

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Number of Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care homes for children and young people</td>
<td>187</td>
</tr>
<tr>
<td>Residential special schools</td>
<td>32</td>
</tr>
<tr>
<td>Secure accommodation services</td>
<td>5</td>
</tr>
</tbody>
</table>

At 1 April 2006 these services were registered to provide places for 2,418 young people. There were 1,250 places in care homes for children and young people, 1,041 places in residential special schools and 127 places available in secure accommodation services.
Section 3

What we found
This section of the report links areas where services need to improve to what they are expected to provide by the National Care Standards, regulations and good practice guidelines. It is in three parts:

- What services are doing well
- What services need to do to improve
- Detailed findings:
  - protecting young people
  - care planning
  - de-escalation and physical restraint
  - complaints
  - enforcements

What services are doing well

We found that 48% of services met the expectations set out in the National Care Standards, regulations and good practice guidance. We found many examples of good practice in all three of these areas.

Many services have effective child protection policies, procedures and practice. In these services:

- staff and young people know about good practice and procedures and use them effectively
- staff have access to good induction training and regular training updates
- there are effective links with local authorities responsible for placing young people in residential services and with children’s advocacy services, which can represent or speak for young people, such as Who Cares? Scotland.
In good services, personal plans are in place for each young person and meet their social, educational and health needs. Evidence we found of good care planning includes:

- care plans that set out explicit goals and actions, and assign responsibilities to named individuals for ensuring the goals are met and actions taken
- care reviews involving young people, their carers and social work staff responsible for placing young people in residential services take place and are recorded well, and care plans and risk assessments are kept up to date.

Many services showed that they use the Holding Safely guidelines, as follows:

- Effective procedures are in place, and reflect personal plans, to calm situations down or use physical restraint.
- A discussion or de-briefing takes place between the young person and staff members following any incident requiring physical restraint.

Some of the services that show overall good practice have effective systems in place to audit and measure how they are performing in the three areas of practice that our study focused on. Good services work with their partners, such as local authorities, health services and advocacy services, to maintain and build on their strengths in these areas and they take action to improve further where this is needed.
What services need to do to improve

This study focused on child protection, care planning and restraint, including de-escalation. We identified that improvements were needed in at least one aspect of these areas in 52% of the services inspected.

To improve child protection, services need to:

- improve child protection policy and practice
- have and use child protection guidelines approved by the local authority where the service is based
- make appropriate child protection referrals to the local authority responsible for placing the young person in the residential care service and any other relevant authority such as the police
- provide training and staff development in child protection
- improve young people’s awareness of how to raise concerns.

To improve care planning, services need to:

- develop personal plans for young people
- make sure these plans include care, health and well-being, and educational needs, and that they are implemented
- confirm personal plans within one month of a young person being admitted to the service and review them every six months, or more often if required
- get young people, carers and social workers more closely involved in developing, acting on and reviewing personal plans
- ensure up-to-date assessments of the risks that a young person might face are carried out as part of personal plans.

To reduce the need for physical restraint, services need to:

- use the Holding Safely guidelines
- apply effective methods for de-escalation and adopt suitable physical restraint procedures
- train staff in de-escalation, physical restraint and Holding Safely
- record incidents of restraint in line with Holding Safely
- analyse and evaluate their own practices.
Detailed findings

In the three areas we considered, we found at least one area for improvement in:

- 51% of care homes for children and young people (96 homes)
- 53% of residential special schools (17 schools)
- 60% of secure accommodation services (three services).

This information is displayed in Figure B.

Figure B:

Number of services with at least one area for improvement

<table>
<thead>
<tr>
<th>Care service type</th>
<th>Number of services with at least one area for improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care homes for children and young people</td>
<td>96</td>
</tr>
<tr>
<td>Special school care accommodation</td>
<td>17</td>
</tr>
<tr>
<td>Secure accommodation</td>
<td>3</td>
</tr>
</tbody>
</table>

This information is displayed in Figure B.
What we found: protecting young people

We found at least one area for improvement in:

- 26% of care homes for children and young people (48 homes)
- 31% of residential special schools (10 schools)
- 40% of secure accommodation services (two services).

This information is displayed in Figure C.

Figure C:
Figure D shows the areas where improvements need to be made to child protection in all three types of care service.

The need for better staff training in child protection is common to all three service types. Improvements were needed in:

- 17% of care homes for children and young people (32 homes)
- 13% of residential special schools (4 schools)
- 40% of secure accommodation services (2 services).

We are concerned that, in some cases where training was provided, this took place more than two years ago.

Since good care is largely based on the knowledge and expertise of staff, it is vital that services ensure that staff are well trained and are aware of best practice for keeping children safe. Child protection concerns occur frequently in these services, and staff need to know how to deal with these concerns otherwise young people may not get the help they need when they need it.

Some services needed to take further steps to ensure that young people know how to raise any concerns that they may have. Not all young people we spoke with during inspections knew how to make concerns known to people who could help them out with the service. This can leave some young people at serious risk of abuse or exploitation.

We are concerned that in a minority of services (nine services), child protection policies were not fully developed and staff were not fully aware of, or did not fully understand, the local area child protection guidelines. There was evidence that, in a very small number of services, staff were not fully aware of how to refer child protection issues to local authorities responsible for placing young people in the service.
Figure D:

Areas for improvement in child protection identified during 2006-07 inspections

Number of areas for improvement

<table>
<thead>
<tr>
<th>Care service type</th>
<th>Number of areas for improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care homes for children and young</td>
<td></td>
</tr>
<tr>
<td>people</td>
<td>60</td>
</tr>
<tr>
<td>Special school care accommodation</td>
<td>50</td>
</tr>
<tr>
<td>Secure accommodation</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td>30</td>
</tr>
<tr>
<td></td>
<td>20</td>
</tr>
<tr>
<td></td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>0</td>
</tr>
</tbody>
</table>

- Service user awareness
- Staff awareness
- Child protection referrals to authorities
- Child protection policy or statement
- Local child protection guidelines
- Child protection training and development
What we found: care planning

We identified at least one improvement needed to be made in care planning in:

- 34% of care homes for children and young people (63 homes)
- 38% of residential special schools (12 schools)
- 20% of secure accommodation services (one service).

This information is displayed in Figure E.

Figure E:

Number of services with at least one area for improvement in care planning

<table>
<thead>
<tr>
<th>Care service type</th>
<th>Number of services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care homes for children and young people</td>
<td>63</td>
</tr>
<tr>
<td>Special school care accommodation</td>
<td>12</td>
</tr>
<tr>
<td>Secure accommodation</td>
<td>1</td>
</tr>
</tbody>
</table>

Care service type
The most common area for improvement in all the services is to have up to date assessments of risks faced by individual young people. These risks can, for example, include running away, being bullied, self harm or harming others or not attending school. Services need to develop and act on these risk assessments. Out of all the areas for improvement, this accounted for:

- 18% of care homes for children and young people (33 homes)
- 13% in residential special schools (4 schools)
- 20% in secure accommodation services (1 service).

Care plans were not fully addressing the care, well-being or educational needs of young people in:

- 15% of care homes for children and young people (28 homes)
- 22% of residential special schools (7 schools)
- 20% of secure accommodation services (one service).

Examples of what we found include:

- services admitting young people without properly assessing or recording their health needs
- services that provided both education and care not co-ordinating well enough with schools or education staff to help the young person progress educationally.
Young people should expect the care they receive from the service to be based on care plans. It is important that these plans are fully developed to ensure that young people’s needs are met and that goals are achieved that will help them develop. It is also important to make and review these plans within the required timescales; we are concerned that this is not always the case.

Services need to make sure they do everything they agree to in each young person’s care plan, so that all the young people can fully benefit from their time in the service.

Figure F shows the areas where improvements need to be made to care planning in all three types of care service.

**Figure F:**

Areas for improvement about care planning identified during 2006-07 inspections

- **Number of areas for improvement**
- **Care service type**
- **Care homes for children and young people**
- **Special school care accommodation**
- **Secure accommodation**

- Young person, carer, social worker involvement in developing and reviewing plan
- Personal plan confirmed within one month and reviewed every six months
- Young person having personal plans
- Personal plan needs to address care, wellbeing and educational needs and these plans must be delivered
- Up-to-date risk assessment for young person
What we found: de-escalation and physical restraint

We identified at least one improvement needed to be made in restraint in:

- 22% of care homes for children and young people (41 homes)
- 16% of residential special schools (five schools)
- 40% of secure accommodation services (two services).

This information is displayed in Figure G.

Figure G:

Number of services with at least one area for improvement in de-escalation and restraint
Figure H illustrates areas where improvements need to be made in de-escalation and restraint in all three types of care service.

**Figure H:**

**Areas for improvement in de-escalation and the use of restraint identified during 2006-07 inspections**

- **Care homes for children and young people**
  - About service having suitable method for de-escalation: 5
  - Having a copy of copies of Holding Safely: 15
  - Recording of restraint incidents: 25
  - Staff training: 35

- **Special school care accommodation**
  - About service having suitable method for de-escalation: 40
  - Having a copy of copies of Holding Safely: 10
  - Recording of restraint incidents: 20
  - Staff training: 30

- **Secure accommodation**
  - About service having suitable method for de-escalation: 30
  - Having a copy of copies of Holding Safely: 5
  - Recording of restraint incidents: 15
  - Staff training: 20

**Number of areas for improvement**

- Care homes for children and young people: 45
- Special school care accommodation: 40
- Secure accommodation: 30
- Total: 115
We are pleased to note that most services have adopted suitable methods of de escalation and restraint, although a small number need to review their approach. Most services had copies of, or were aware of, the Holding Safely guidelines. But some did not, and not all the services that had the guidelines were following them fully.

Holding Safely makes it clear that the people and organisations who provide services are responsible for establishing an atmosphere where young people and staff are valued and respected. Care service providers and managers need to set the tone and culture of the service. They must ensure that the service practises de-escalation, that physical restraint is only used as a last resort to ensure the protection of young people and others, and should aim to continually reduce the use of restraint.

**Why record-keeping is important**

Services record their use of restraint in different ways. As a result, we are not able to give an accurate picture of the number of times physical restraint is used in residential services across Scotland. Some services need to improve how they record instances of restraint in line with the Holding Safely guidelines.

Recording restraint events properly is very important. It:

- ensures that there is a record of care and control within the service
- helps staff to reflect on their practice
- can help young people to face and confront their difficulties.

Recording properly and reflecting on what happened can help staff to plan for the care of young people and it can help managers to monitor and to assure the quality of practices in their service. It can help managers and staff to learn from events. Recording is critical to identifying trends, and to ensure that staff, and young people, are accountable for their actions.
Why better training is needed
Caring for young people in residential services is one of the most challenging jobs in social care. The provision of good support and training in a range of practice areas is vital to help staff do this job well.

We found that staff in some services need better training to help them to develop their expertise in de escalation and using appropriate methods of restraint. The Holding Safely guidelines state the importance of staff training in this area of practice. Physically restraining young people can be dangerous to young people and to staff, especially when staff are not trained. Training must cover areas that ensure restraint is used only as a last resort, such as:

- creating an atmosphere and culture that minimises the use of restraint
- promoting positive relationships between young people themselves and between young people and staff
- promoting techniques that help young people to calm down and control their behaviour.

Training must also take account of young people’s rights and ethical practice that is in keeping with the law. It should be up-to-date and services should keep staff training needs under review. We are concerned that, where training took place, some was out of date.

Training should focus on recognised de-escalation and restraint techniques, including:

- CALM - Crisis, Aggression, Limitation and Management
- TCI – Therapeutic Crisis Intervention
- SCIP - Strategies for Crisis Intervention and Prevention
- Therapeutic Management of Violence.
What we learned from complaints

During 2006-07 we received 25 complaints about care homes for children and young people, residential special schools and secure accommodation. The complaints were made by young people living in the service, their friends or relatives and professional visitors to the service. In four of the complaints (16%) we found that improvements were needed linked to the areas of practice that this report covers. The improvements that services needed to make included:

- developing and reviewing care plans and risk assessments for young people
- adopting appropriate de-escalation and restraint methods
- improving how they record instances of restraint.

We remain concerned about whether or not young people feel able to complain about the service they live in. We will continue to ask young people to express their views about the service during our inspections. We will expect services to ensure that young people have access to advocacy services and are involved in the internal evaluation of the quality of the service.

What we learned from enforcements

We will take enforcement action if we have serious concerns about a service. We can take legal action to make sure that the service improves, and if necessary, we can close them down.

During 2006-07 we took formal legal enforcement action on two residential special schools because we were concerned about the safety and well-being of young people who lived in them. Our enforcement action centred on how the services developed and reviewed risk assessments and care plans for young people. The schools had to ensure that they had comprehensive care plans for young people. They also had to show that staff worked consistently to ensure that what the plans set out for the young people happened in practice. The schools made the improvements needed and we continue to inspect to ensure these improvements are maintained.
Section 4

Conclusions
This national review shows that many residential services for young people perform well with regard to child protection, care planning and the use of physical restraint. However, performance in these areas of practice is patchy and this report sets out a number of areas in which services need to improve.

The information in this report can be used in various ways. For example, people and organisations who provide care services can use it to check how they are performing against the national picture. Service providers should act on any areas for improvement which apply to them. Policymakers can use it to reflect on the impact of new policies and practices, and to develop future policy.
Scottish Ministers have set out what young people should expect, and what services should deliver. Young people should be safe, nurtured, healthy, achieving, active, respected, responsible and included. Good practice in the three areas that this report highlights will help to ensure that they are. Local authorities, as the corporate parent for young people in residential care have a responsibility to ensure this good practice. This will help to realise some of the outcomes agreed for all children in the Concordat reached between the Scottish Government and local authorities and aspirations set out in the following policy documents:

- ‘Protecting Children and Young People: Framework for Standards’ (Scottish Executive 2001)
- ‘Getting it Right for Every Child: Proposals for Action’ (Scottish Executive 2005)
- ‘Looked After Children and Young People: We Can and Must Do Better’ (Scottish Executive 2007)

The challenge for all residential children’s services is to achieve consistently good practice in child protection, care planning and the use of physical restraint.
Protecting children and young people in residential care: are we doing enough?

A review by the Care Commission of practice in residential care for young people concerning protecting children, planning for their care and using physical restraint.