Rethinking care for adolescents

Janice Nicholson - 12th July 2017
No Wrong Door

The challenge

- High-needs adolescents with poor long-term outcomes i.e ETE
- ‘We didn’t know what we didn’t know’ – unmet needs
- The system does not cope well with these young people

The vision

- Ensuring young people access the right services at the right time and in the right place to meet their needs
- Permanence in a family setting
- ‘Fast in, slow out’ = no move until it’s the right move
What was needed

- Change/embed practice, culture & build relationships v partners/agencies
- Ensure partners understand balance v innovation & ‘risk avoidance’
- Collect consistent data/evidence to make the moral, business & evaluation case for the model
- ‘Reset’ tricky relationships v young people & services, e.g. police perceptions of adolescents /families
- ‘Push the boundaries’ such as:
  - new uses of ‘bespoke’ placements/ Ofsted exemption - now accepted practice
  - RAISE process (risk manage not risk averse!)
What is it?

1st wave Innovation Programme ‘rethinking care for adolescents’
confidence from DfE - funding to support hypothesis!

● Integrated service for complex adolescents

● Needs addressed in single team of specialists - working together
  ‘shared language & practice’

● One consistent key worker - follows young person through
  placements

● Range of accommodation options, services and outreach support

● Edge of care work with families (prevent entry to and out of care)

● Residential care used to stabilise situations, with continuous
  assessment and risk management
What’s innovative

Pulling expertise into the team instead of passing cases on
  ● Engaging wider group of professionals
  ● Training in evidence-based practice: e.g. RP, SOS, TCI
  ● Consistency & clear purpose (TOC)

A genuine commitment from leadership to co-producing provision at every level
  ● Co-designing with young people
  ● Working in partnership
  ● Practitioner-led development

Changing system conditions by thinking differently about assets, resources and value for money
  ● Focusing on long-term value for money
  ● Using existing placement options in new ways
More than ‘sum of their parts’ - joint training to reluctant school

‘Impact of abuse & neglect on communication & attachment’

• Insecure attachments - severely affect ability to communicate & interact with others
• May have reduced ability to form healthy relationships throughout life
• Language and behaviour learnt during interactions and life experiences
• Experiences impacting on mental wellbeing
• SLCN more likely in LAC population

IMPACT – YP accepted into school!
Emerging outcomes

It is evident that working together is the key!

“Normally we would never be working together... it is the wrap around support that makes such a difference”

NWD Life Coach (embedded Clinical Psychologist)
Emerging outcomes

<table>
<thead>
<tr>
<th>Nationally</th>
<th>Charges</th>
<th>Missings</th>
<th>NWP</th>
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<tbody>
<tr>
<td>Arrests</td>
<td>50%</td>
<td>62%</td>
<td>205,585</td>
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<tr>
<td>LAC</td>
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<tr>
<td>Missing</td>
<td>66%</td>
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<td>Savings to police</td>
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More emerging outcomes

**Before NWD**
- VERY HIGH levels of emotional difficulties

**With NWD**
- Emotional difficulties were only SLIGHTLY RAISED

**Significant**
- Reduction in hospital admissions

**Significant**
- Reduction in A&E visits

**Decreased use of Class B drugs**
And “legal highs”

**Earlier identification of Speech, Language Communication Needs**

**Increased identification of Autism**

**51%** of NWD YOUNG PEOPLE Were identified as having a SLCN

**66%** of RESIDENTIAL NWD young people were found to have an SLCN

**88%** of FEMALE RESIDENTIAL NWD young people were found to have an SLCN
ANALYSIS – MISSINGS FROM HOMES

When Interventions are HIGH
Missing incidents are LOW

Linear correlation work – impact of roles ‘not by chance’
The experience of young people

We think this is a good residential worker.

They have a big heart, big ears for listening.

They carry a big bag on their backs so that they can carry loads for me when it gets too heavy.

Their arms are stretched out so that they can rush in and save me if I need them to.

Workers should stick with you ...... they need to look beyond the bad things and keep giving you second, third and fourth chances!

“Everything based on human relationships & communication!”
The experience of young people

“Knowing that the staff will be there after I have turned 18 makes a big difference and I know they will be because I have seen it happen with others.”

“I am seen as an individual rather than a problem.”

“My keyworker stuck by me and helped so much, they couldn’t have done anymore for me!”

“It’s ok mum, it’s different to normal fostering because it’s [John] and I know him already - so I am happy.”
“This was never a pilot! Fundamentally redesigning delivery yet attracting investment .... momentum is delivering results”

_Pete Dwyer, Corporate Director Children & Young Peoples Service_

“Best data in 15 years”

_Lisa Holmes - Director, Centre for Child &Family Research, Loughborough University_

“Or North Yorkshire, and the fundamental rethink in its approach to residential care and care leavers. They’ve demonstrated to Ofsted that the imaginative approaches they’re taking can make children safer”

_Edward Timpson, Minister of State for Children and Families_

“I found NWD staff to be passionate about residential care, with a critical role to play in providing the time and opportunity to nurture relationships ...as a platform for longer term work directed at eventually placing a child in a family setting”

_Sir Martin Narey, Residential Review England_

“CHILDREN’S SOCIAL CARE REFORM - A VISION FOR CHANGE

“There have always been bold local leaders willing to do things differently – for example in North Yorkshire, where a radical new approach to supporting adolescents in care has been developed.”

_Nicky Morgan, Secretary of State for Education_

“for these young people the diversity of level & complexity of need needs a planned intervention not a crisis response. NWD provides stability, skills and support when needed, to more successfully manage difficult transitions; adolescence to adulthood”

_Matthew Horne, Innovation Programme Lead Coach_
Youth Communication Team

Anne Elliott
Professional Lead
Harrogate and District NHS Foundation Trust

12th July 2017
What is the Youth Communication Team?

Three year NYCC funded project from Nov 2013-2016, now extended to 2020

NYCC commissioned the provision of speech and language therapy from Harrogate and District Foundation Trust NHS

Working with Young People with multiple vulnerabilities 11-25 years old

No Wrong Door Service, Youth Justice Service and specialist educational provision
Aims of the Youth Communication Team

To identify young people within the No Wrong Door service who may have Speech Language & Communication Needs

If a need is identified, the Communication Support Worker will provide:

• Advice
• Direct therapy
• On-going referral to other services
• Communication strategies
• Communication supportive environment
• Training
How Many Young People Were Found to Have Speech, Language and Communication Needs?
(Year 2 of No Wrong Door)
What have we found?

- Poor comprehension
- Vocabulary delay

Social Communication Difficulties
Case Study M

Diagnosis of Attention Deficit Hyperactivity Disorder and Foetal Alcohol Syndrome. He was referred to the NWD service due to reported issues including:

- taking part in risky and impulsive behaviour
- regularly going missing
- not conforming at school and spending most of his time in the hub
- early signs of engaging in criminal activity
- potential drug use
- fighting and trying to harm younger siblings.
Speech, Language and Communication Needs

On SLT assessment, M presented with significant difficulties aside his weakness in maintaining attention including:

- reduced ability to plan and organise times and activities based on verbal and written information provided
- reduced ability to demonstrate empathy
- inability to predict potential outcomes based on information given
- limited generation of ideas and words when given specific topic.
- slow reading of connected prose
I struggle to understand everything

I can’t concentrate

I feel aggressive when I am asked to do work that I don’t understand

Words move and jump around when I am reading

I get anxious when I see lots of writing

I don’t remember what lessons I have

I feel better in the morning because I’m more chilled

If my teachers try to explain it to me they make me feel like a right dummy

I hate asking for help – it makes me lose my temper.
No Wrong Door Input

- Communication Support Worker supported mother to request an Education, Health and Care Plan.
  Keyworker provided respite for family.

- Education provided by CSW for M, family and NWD team regarding diagnosis and implications.

- Work with M regarding insight and self management.
- Covered some particular topics including how to try and be empathetic towards his younger sibling who has a learning disability (this is an ongoing difficulty for M).

- Life coach work with M regarding attachment difficulties.

- Positive activity with M with keyworker at times convenient to family.

- Bespoke placement provided for summer holiday.
Outcomes

• After M being on a bespoke placement during the summer holidays, he also engaged well with his family during their own holiday.

• M transferred to a smaller school with a managed move - education supported by NWD re needs and support required

• Assessment of reading started

• M engaging in meaningful activities-support for family and positive effect on M’s outlook

• M has remained in family home and parents want him there
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<th>Safety</th>
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<td>• No longer running away from home</td>
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<td>• Not using cannabis.</td>
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<td>• Attending school and is therefore not out in the community during school time.</td>
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<th>Stability</th>
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<td>• Now in much smaller school which offers more vocation based learning in addition to academic.</td>
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<td>• M is planning to complete his education.</td>
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<td>• No use of drugs.</td>
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<td>• Reduced risk taking behaviour</td>
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<td>• More positive towards siblings</td>
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<th>Reduced Criminal Activity</th>
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<td>• M has only had a warning. He is not with the YJS and the police have not been involved in the past three months.</td>
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<td>• Trusted relationship with keyworker and ongoing engagement in all proposed activities.</td>
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<td>• Attending school full time.</td>
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<td>• Improved education outlook – feels his difficulties are now being noticed but he isn’t ‘different’ because several students in the new school receive additional support.</td>
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<th>Reduced Costs to Society</th>
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<tr>
<td>• Reduction in criminal activity.</td>
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<td>• Safe reduction in LAC status.</td>
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<td>• Reduced crisis presentations.</td>
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<td>• Potential employment aspirations.</td>
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Measurable Impacts and Outcomes

Outstanding OFSTED report acknowledged the importance of embedded specialist roles within the children’s homes.

Young people’s access to Speech & Language Therapy is exemplary as the therapist is based within the home and openly available. This brings substantial advantages to young people, staff and other professionals. Addressing young people’s communication needs brings with it life-long benefits. By significantly improving young people’s ability to understand the world around them and by making themselves understood reduces the risk of being marginalised in adulthood.
Any Questions?