

## **Improving outcomes for care leavers: evaluating a care leaver's assessment of need tool.**

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### **Introduction**

Care leavers' poor outcomes across a range of areas have been well documented since the 1980s. Their vulnerability to homelessness, poor educational achievement, mental ill health and offending (Biehal, Claydon, Stein and Wade, 1992; Stein and Wade, 2000; Scottish Executive, 2002a) is well understood but this understanding has not necessarily led to improved practice.

The reason for lack of progress is unclear. There has been a suggestion that local authorities fail to meet their corporate responsibilities. Research shows only 39 percent of care leavers receive a Throughcare Service; 40 percent have no formal leaving care review; 40 percent leave care with no information on education, employment and training and evidence suggests many leave care prematurely as well as ill equipped (Scottish Executive, 2002b).

Poor outcomes may also be due to lasting effects of childhood trauma that can be resistant even to concerted efforts by dedicated social care agencies (Department of Health, 1995; Lakey, Barnes and Parry, 2001). Influential attachment theorists, such as John Bowlby and Kate Cairns, have emphasised the long term impact that separations and rejections can have on children's cognitive,

emotional, physical and social development (Bowlby,1979; Cairns 2002). 93 percent of children in care have experienced more than one placement (Scottish Executive, 2002a).

The document *Supporting Young People Leaving Care in Scotland: Regulations and Guidance* (Scottish Executive, 2004) outlines concern over this waste of human potential. It gives local authorities additional duties and responsibilities including the duty to improve service provision through regulated assessment practices by providing a 'framework' for minimum standards. How 'regulation' will actually lead to improved outcomes is not explained, although it clearly must include a consideration of young people's 'need'.

This paper outlines the evaluation of a tool which was developed by the author to assess the needs of care leavers. The tool, called *Looking Forward*, aims to understand the way a young person interacts with their environment and in their relationships, by considering how and whether developmental needs have been met. To be effective, however, any tool must be more than the sum of its parts. Comprehensive information is useful only if it leads to inclusive practice and better care planning decisions. If used wisely, such a tool may lead to better planning and outcomes for this group. It was the aim of this small scale study to investigate this.

**Looking Forward : a description of the assessment tool**

In 2003, in response to government and organisational priorities the author developed a care leaver's assessment of need tool which is called *Looking Forward*. Corporate partners such as Housing and Careers Scotland contributed to the development of relevant sections. It was designed to be compatible with the principles underpinning *Looking After Children* (Department of Health, 1995). It uses dimensions from the Department of Health's assessment framework (Department of Health, 2001), including health, education, identity, family and social relationships, social presentation, emotional and behavioural development and self-care issues. The tool also considers the economic, professional and personal support networks that research suggests are key indicators of future success for care leavers (Biehal, Claydon, Stein and Wade, 1995). This includes areas such as preparation for independence, understanding local housing and labour markets, the availability of professional support and the importance of qualifications. Finally, it incorporates factors identified by researchers as predisposing a child to resilience such as talents, disposition, good role models and social networks (Masten and Coatsworth, 1998; Ward and Rose, 2002). Taken together, the different sections of the assessment tool highlight the central importance of the quality of the interaction between child, significant adults and the environment, and aims to provide an understanding of the way in which a young person interacts with their environment and in their relationships, by considering how and whether developmental needs necessary for transition have been met.

## **Aim of the Study**

The aim of the study was to determine whether the new assessment tool led to a better understanding of the needs of young care leavers. The study focussed on three main areas:

1. whether information recorded on the new assessment tool was more comprehensive than previous assessments for the same young person when they left care, or at the time of their last review.
2. whether information collated was considered to be accurate and useful for care planning.
3. whether the assessment process was considered to be constructive by service users and social workers.

## **Methodology**

The first eight young people to be assessed using the new tool were included in the study. All had been accommodated prior to their 16<sup>th</sup> birthday by the local authority under the Children (Scotland) Act, 1995. Five of the young people were female and three were male. None of the young people in the sample had lived independently for more than twelve months; four had lived in supported accommodation after leaving care. Half of the sample continued to be subject to a supervision requirement and all of these had moved to independent living. One young person remained in full time education and one had part-time employment. None of the other young people were undertaking courses, although several were considering this. Six were unemployed.

The new assessments were completed by qualified social workers already working with the young people, although based within different specialisms. One social worker from the Throughcare service completed three assessments and was

interviewed separately in relation to each case, although this inevitably gave a disproportionate weighting to her views.

All of the social workers were interviewed, but only two of the young people agreed to be interviewed. Both requested that their social worker be present and one invited a foster carer to attend. Both used the interview as an opportunity to vent their frustration with particular aspects of their care situation, although they were also willing to co-operate with the study. Of the other six young people, one was not approached due to severe mental health problems; one had moved away and four were unwilling to be seen. Their opinions were included in the findings, with their permission, relayed by their social worker.

Interviews with social workers and young people were conducted face to face using a semi-structured approach. Comprehensive notes were taken and their accuracy confirmed with the participants. Social workers also completed a questionnaire, rating the assessment process, the assessment tool and the quality of information it produced.

Case records for the eight young people were read by the author. This was a time consuming exercise, but yielded benefits by increasing the author's knowledge and understanding of the participants and their service interventions. Case data was coded and compared with assessment materials to check their accuracy. Few *Assessment and Action* records were available - a finding consistent with a recent national study on the use of the LAC materials in Scotland (Social Work Services Inspectorate, 2004). However, final review reports and minutes existed in all cases and provided useful assessment and planning material.

## **Findings and discussion**

This section will outline the broad areas of inquiry which were explored in the study, and describes the findings from the case data analysis, the interviews and the questionnaires. Some areas of inquiry will be illustrated by quotes from the participants' interviews.

### *Success of the assessment tool in gathering information*

'Comprehensiveness' was defined by 'the inclusion of information on key areas of need, identified earlier as important in building strong developmental foundations, resilience and future potential'. The new assessment tool was considered effective in identifying health issues for all young people in the sample. The identification of addiction issues was also considered to be more effective in seven out of the eight cases. However, in areas relating to the emotional life of the young person, the tool was only deemed to be more effective in three out of the eight cases. Seven of the new assessments recorded issues around a forced acceleration of preparation for independence, while only two of previous leaving care records did so. No real option existed to this plan, and in these circumstances workers may have felt it unhelpful to highlight the disadvantages of accelerated preparation for independence.

This area of the degree of preparedness for independence highlighted issues around the perceived objectives of Throughcare staff and the influence that assessments of need, as opposed to those of skills, may have on their practice. Despite positive responses, some staff reported during interview that the detail of skill-based assessments had perhaps been lost.

*..when you are covering independence there is a huge focus on care of the environment as well as care of yourself ... We need to look at bills... form-filling etc...it is a different assessment ..and it's crucial we get it right. (Throughcare social worker)*

Others, however, acknowledged the importance of understanding a young person's emotional history.

*Lack of attachment and broken relationships are at the heart of his current difficulties....we need to understand what motivates them if we are to understand them. (Youth Justice social worker)*

There was some disagreement about who was responsible for the task of carrying out an in-depth assessment covering aspects such as emotional readiness for leaving care. Some feared a change in their focus would undermine their specialist identity (and popularity).

*...young people..are enthusiastic about receiving assistance from the Throughcare team .. They often don't wish to discuss past events...We are the fairy godmothers that get them things (Throughcare social worker).*

Some staff in other teams expressed concern in relation to their workload over the impact of Throughcare staff carrying out a more in-depth assessment.

*The emphasis in Throughcare has always been on practical support...if Throughcare are going to be going into the emotional side of things more, then this will be a change.. they have been seen as people who take on the*

*time consuming jobs like getting housing sorted...*(Youth justice social worker)

Some staff suggested separating skill-based assessments from the more comprehensive emotional assessments, although all were opposed to longer assessment processes and none had solutions for how this could be achieved. Three quarters of social workers reported in the questionnaire that the new tool balanced the two aspects effectively, while a quarter felt that these aspects were 'partly balanced.'

Young people reported that they found discussing stressful historical events difficult in the process of assessment. One stated

*I don't see the point of bringing things up...I've had hundreds of social workers, I hate it. I have to say it all again ... They won't read it (the file),* (Young person).

Social workers were also concerned that such personal historical areas need to be addressed sensitively.

Young people did not express the same reluctance to discuss current problems such as addiction. One stated,

*I didn't really mind. I just say what I want you to know anyway (smiles),*  
(Young person).

Addiction is a pervasive problem that can have an effect on personal functioning across several dimensions. Addiction issues were prevalent in six out of the eight young people in the study. The new assessments were viewed by social workers to have covered the issues of addiction effectively. It is difficult to determine whether substance misuse caused, maintained or stemmed from wider difficulties, although it was clear that they co-existed with other areas of need identified in the assessment.

Mental health issues were present amongst the young people in the study. At least half had a history of self-harming and just over a third had made a life-threatening gesture. All but one of the young people in the study exhibited symptoms of distress and anxiety. The effects of mental ill health may have had an impact on the young person's ability to engage effectively in planning and an indirect effect on the findings on the perceived effectiveness of the assessment.

Comparisons between old and new assessment material showed that both recorded existing family support. Importantly, all new assessments also detailed the impact of family support on the young person. Educational attainment and career plans were also recorded on all assessments. Esteem issues were recorded in seven of the new assessments and in only half of previous ones. Some staff felt that specific reference to issues of race, disability and oppression should also be included in this section to prompt awareness.

#### *Experience of the assessment process*

Social workers were very positive in relation to the identification of future need through the assessment. Young people reported that they found the process helpful and felt that their personal information was treated respectfully. The new

assessment tool emphasises the importance of working in partnership with young people. The assessment was designed to ensure that young people give their full consent to the process and became involved in their assessment. In other words, assessment is not just something that is 'done' to them. The sense of partnership was effective in allowing young people to raise confidentiality issues. Interestingly, young people were most opposed to the sharing of information with family members. Responses were positive in other areas relating to inclusiveness, although an increased consideration of ethnic background and religion within the forms was recommended by social workers, to allow young people to express their own view of their cultural identity.

### *Suggested improvements*

Respondents made several suggestions for areas of improvement in the tool.

1. The inclusion of a section, for each dimension of need, that allows professionals to highlight areas of concern that might not be shared by the young people. It was felt that this would make the tool more sensitive to different levels of professional experience
2. More specific questions throughout on the impact that race, disability and diversity has on the presentation of need. This could help to encourage informed, anti-oppressive practices
3. The re-wording of questions so they are directed towards the young person. This would aim to improve partnership working and the shared ownership of information.
4. The inclusion of pictorial, I.T. based methods of recording need and progress within the framework. This could help to address the literacy difficulties some young people present with, making the tool more sensitive to need.

### *Discussion*

Assessments are one stage in a process that leads to sound care planning and evaluation. Beyond these activities lie such issues as decisions on the thresholds for the provision of service and the social and economic factors that determine them. The study looked retrospectively at the effectiveness of the new assessment tool in helping formulate plans for young people's subsequent need. While the new tool itself was experienced in a more positive way than the previous assessment, what also emerged was that good care planning requires more than a good assessment tool.

In discussion with social workers and young people, other interesting features emerged about the assessment process. For example, the length of time spent directly on the assessment, and the weeks spent on the assessment task had an impact. More negative responses were made by workers who had spent less than three weeks or more than 20 weeks on the assessment. It was discovered that issues such as the level of skilled experience, the use of case materials, and the instability of the young person's situation were some of the factors implicated in the variation in timescales. The study showed that skill and experience were important in engaging the cooperation of the young people. Although no firm conclusions can be drawn from these findings, due to the size of the sample, it gives an indication of areas for future study.

The new assessment tool *Looking Forward* appeared to generate a better quality of information. However, agencies have a responsibility to use such

information and knowledge well, not only for care planning and informing service development but also for developing inclusive, sensitive assessment practices. The findings from this small scale study suggest that a flexible, therapeutic approach to engagement is required, particularly when discussing traumatic historical events. The assessment process should progress at a pace determined by the young person's emotional needs, rather than by externally imposed timescales. Good outcomes, like good assessments, cannot be measured one dimensionally.

*Yet the question remains, what are we to take as an outcome? For in the end, so long as there is life, there can only be new beginnings. (Cairns, 2002, p. 170)*

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