# Radical reform for care experienced children Findings of stakeholder events

March 2023

During spring 2023 we held 4 stakeholder events to hear from care experienced children and young people, professionals, and academics about different stages of the care system. This report sets out the key findings of those discussions.

The 4 stakeholder events were:

- On 26 January with birth parents
- On 26 January with professionals and academics working with birth parents
- On 2 February with professionals and academics working with care experienced children and young people
- On 15 February with care experienced children and young people, facilitated by Voices From Care Cymru

The views set out in this report are those of the young people, professionals and academics that we spoke to. They do not necessarily represent the views of the Children, Young People and Education Committee.

A full list of attendees is set out at annex 1.



### 1. Birth parents (26 January)

#### **Before care**

#### Birth parents' mental health and wellbeing

Some participants told us that they struggle with poor mental health. Some had a history of self-harm.

Two care experienced participants told us about their experiences of being prescribed medication to support them with their mental health. They explained that they had been prescribed anti-depressants and sleep tablets, but both young women had reacted badly to them. They had both decided not to take the tablets anymore, but have not told their GPs because they fear that social workers will see their medical records and judge them for refusing treatment.

#### **Social services**

Some participants told us that social services ignore systematic issues that contribute to children being removed from their birth parents, such as mental health problems and housing concerns.

We also heard from some participants who felt that there is an emphasis on removing children from their families, rather than helping them to stay together.

#### Positive experiences of working with social workers

One birth parent who had been able to keep her child told us that social workers gave her a chance to prove herself. She was worried that her experiences with social services from when she was a vulnerable child would count against her, but that wasn't the case. She urged other birth parents to avoid being defensive, embrace offers of support, tell people the truth, and let social services help you.

Another participant told us that she had one "lovely" social worker.

#### **Transparency**

We heard that initial referrals to social services about birth parents are often made without the birth parents knowing.

Some participants told us they often did not understand why social services made some decisions, and that they had to agree with whatever the social worker suggested, whether or not they agreed with it, to ensure they could keep their child.

#### **Caseloads**

We heard that most social workers don't have the time and space to build positive relationships with birth parents. This can make it difficult for birth parents and social workers to challenge one other constructively. It also means that social workers don't always have the time to keep their birth parents up-to-date on what's happening.

Some support workers accompanying the birth parents told us that people become a social worker because they want to help, but then "get battered down by the system", and the lack of resources and time and energy to make relationships.

One participant felt that social workers tended to "pick up bad habits from one another" and begin to cut corners. She felt this was due to social workers having far too many cases.

#### **Turnover and retention of social workers**

Some birth mothers told us that social workers tend to move on really quicky, which means she had worked with lots of different social workers.

One participant suggested that young social workers might struggle in particular because they aren't prepared for how demanding the job is. One participant told us that lots of social workers get abused by birth parents.

We heard some participants that social workers who have been assigned a new case won't even come to meet the family. They just read through case notes instead. Some participants agreed that this can reinforce judgements and errors in previous assessments.

#### Having previous experiences with social services

Many birth parents who had themselves been in the care system felt that they were pre-judged to be unfit parents because of their own experiences of care. They felt this was unfair, and that just because something happened to them did not mean they would subject the same trauma to their own child. One young women told us that she felt treated as a statistic by the system. Another told us that experience of the care system is being used as a "weapon" against care experienced parents.

We heard several times that a minority of young people also believed social workers get a bonus for removing children. A professional told us that "it's

necessary to debunk the myth that authorities are just there to take children away".

Some parents told us that they felt like they were being treated like children, and that there wasn't enough appreciation of how much they had changed since their childhoods. One participant who had been the victim of domestic violence felt that she had been labelled by social services.

#### **Support for birth parents**

#### **Edge of care support**

We heard that midwives and GPs, who may be the first contact for pregnant and vulnerable women, tend to be amongst the first to signpost birth parents to support. This can be through providing a lot of information in a pack, but it doesn't always involve explaining the different kinds of support available to the parent.

One care experienced birth parent, who was removed from her mother's care as an infant, told us that her mother received very little support. Had her mother had better support she may have been able to keep her.

Another participant told us about the excellent support she had received from Barnardo's Baby & Me project. Her social worker referred her at 20 weeks. She told us that, without that support, her child may have been removed from her care. She went from being on her own and having nobody to support her to having lots of people around her. She explained that the support included:

- Confidence building
- Accompanying to doctor appointments
- Practical support and advice (e.g. nappy changing, safe sleeping)
- Mental/physical health support
- Support for recovering from domestic violence

However, some participants were not familiar with edge of care support. We heard that there are different levels of support services in some parts of Wales than in others.

Overall, we heard that people often have to slot into existing services, rather than the services adapting to take into account their individual circumstances.

We also heard positive feedback about Flying Start workers. Participants told us they were less judgemental and easy to work with.

#### **Advocacy support**

We heard that advocacy services are needed before court proceedings start to help with things like:

- Navigating legal jargon and understanding the courts
- Providing support before children are removed

However, one participant did not feel that advocacy support during the courts process had been very helpful. She had been told by her advocate that her child would "definitely" be taken off her, which she found very difficult to hear.

#### **Support for dads**

One father told us that there should be more support for fathers, and better signposting to services. He said that fathers can feel excluded, often because they don't know a lot about the care system.

A mum told us that her partner was offered support, but didn't actually receive any because the limited available services had really long waiting times.

Some people felt that fathers needed more support to understand if their behaviour is abusive and to help them change their behaviour.

#### **Domestic abuse**

We heard that not everyone in abusive relationships feel able to leave. Sometimes support workers need to take time to build a relationship and to help someone leave the relationship in a safe way.

#### Parenting assessment centres (or "mother and baby units")

Participants spoke to us about parenting assessment centres, in which birth parents and their child are placed for usually a minimum of 12 weeks.

We heard that parenting assessment centres can be far away from the birth parent's home. One birth parent living in South Wales told us she was initially placed in an assessment centre in Edinburgh. We were told that if you are placed in a parenting assessment centre far from your home any advocacy support you receive is likely to be virtual.

One birth parent told us that she found it distressing to be in parenting assessment centres alongside some other parents, some of whom had just been released from prison.

However, one participant told us that her time in a parenting assessment centre was welcome compared to what she was going through living with foster carers and in residential placements as a care experienced young person.

One birth parent told us that she would have welcomed the option of going to a parenting assessment centre as an opportunity to show the authorities that they could care for her child. Unfortunately, they weren't given that option.

Some participants told us that most birth parents have no choice but to give up their accommodation when they move into a parenting assessment centre because they can't afford to keep it. Another participant told us that after leaving the placement she had nowhere to go, and ended up living with her father. However, his connections to drugs put her child at risk, and ultimately her child was taken away from her for that reason. She felt that the system had set her up to fail.

#### The courts

We heard from some participants that the courts process can be lengthy, particularly if social workers keep changing or if insufficient parenting support has been offered to the birth parent.

Some participants felt that the outcomes of court proceedings depended on the character and even on the mood of the judge. We heard that some judges did not engage with the birth parents at all, whereas others seemed fairer and challenged social workers to provide more than "a risk of future emotional harm" to justify the removal of a child.

We heard that different judges and social workers had different attitudes to risk. For example, in the aftermath of the Baby P case there seemed to be a heightened risk aversion from some officials.

Some birth parents felt that the courts process was unnecessarily intimidating.

#### Support for birth parents after court proceedings

Some birth parents told us that once a child has been removed from their care there is no support for the parents. The social workers are there for their child, but actually there should be support for the whole family. One birth parent told us

that she had reached out for support from social services after her child had been removed from her care, but it took a crisis for that support to materialise.

One participant, who had kept her child, told us that she was unable to access the Welsh Government's childcare support. Although she works full-time, her partner does not. He is currently looking for work but, because he has spent time in prison, he is finding it difficult to find employment. She called for the childcare offer to be extended automatically to all care experienced parents.

#### In care

#### Support for care experienced children and their families

One young women told us that they did not receive enough support as care experienced young people to manage the trauma of being removed from their family. This leads to homelessness, and to drug and alcohol abuse.

#### **Social services**

One participant, who was placed with a grandparent, told her about her negative experiences of social services. She felt that they did not monitor or support her throughout her childhood. Another care experienced birth parent told us that while she was in care she had to cause a crisis – e.g. by getting arrested - to get any support from her social worker.

Some young women told us that they had a number of different social workers during their childhoods, and they told us that the lack of consistency caused mistrust. It was not possible to form positive relationships with them. There was no explanation of why there were different social workers, which increased their feelings of abandonment.

#### **Residential care**

One young woman raised concerns with us about the level of safeguarding in residential homes. She told us that as a 13 year old child living in a residential home she had a relationship with a 20 year-old man. The staff at her home knew about it but did not raise any concerns or talk to her about the risks. The relationship became abusive and controlling, and she fell pregnant at 16.

#### Kinship care

One participant questioned the appropriateness of some kinship care placements. She told us that social services had placed her child with her mother (the child's grandmother). However, the participant had herself been placed in

care because her mother was judged to be an unfit mother. The child has since been removed from the care of the participant's mother.

#### **Education**

Some young women told us that they had been excluded from a number of schools and Pupil Referral Units. Although teachers tried to tackle the bad behaviour, nobody helped them to seek support to tackle the underlying causes of that behaviour.

We also heard that moving schools meant that young people never felt that they belonged and did not form friendship groups.

#### **After care**

#### Housing

We heard from some participants that competition for housing is a major problem for care leavers. Some care experienced birth parents told us that up to 500 people can be in competition for one single house.

#### **Support for care leavers**

Some birth parents told us that they had had little or no contact with social services after turning 16 and leaving foster care. They did not have a pathway plan.

#### **Higher education**

One participant told us that her university offered her no support, despite the significant barriers that she faced as a care experienced student.

#### Big changes that are needed

We heard the following proposals for reform of the care system:

Early intervention support for vulnerable parents: vulnerable parents should receive intensive, holistic, wrap-around support from the start of pregnancy.

Do not judge a birth parent based on their childhood: social services and the courts should not assume that birth parents are unfit parents themselves just because they have experience of the care system.

**Support for dads**: better support for dads to help them to keep their children and to navigate the care system.

Statutory mental health support for care experienced children: all children should receive an immediate referral to children and adolescent mental health services when they are taken into care.

Being care experienced should be a protected characteristic under the Equality Act 2010.

Better support for foster carers: to help carers manage behaviour issues without needing to rely on social services.

# 2. Professionals and academics working with birth parents (26 January)

#### **Before care**

#### Advocacy

We heard that birth parents at risk really need advocacy support programmes to help them engage with social services and the child protection process. Very often things escalated too quickly and before they knew it they were in proceedings, at which point it was too late to pull it back, and the children went into the care system.

One participant told us that parents need to understand the system to empower them to engage with social services and assisted parents in making the changes needed to ensure children remain at home. The advocacy model does this, and every local authority should have an advocacy service to ensure that parents are getting the support they need.

Others pointed out that advocacy can help to rebalance the perceived imbalance of power by helping the birth parent to understand that the child protection process is there to safeguard the child.

#### **Early intervention support services**

Some advocated the value of support services with a relationship-based approach that focus on a plan for the family, rather than an arbitrary schedule of check-ins as birth parents will often experience from statutory services.

Participants agreed that intensive support projects such as Project Unity and Baby & Me provide much more than basic advocacy services - they signpost and handhold, accompany birth parents to meetings, etc.

Others pointed to the importance of support for domestic abuse victims and mothers who are vulnerable to domestic abuse. Participants raised concerns over funding for services to help those women.

Participants also agreed that those support services need to start early, at around 12 weeks into pregnancy.

Some participants argued for funding from Welsh Government as opposed to local authorities, which can help ensure consistency of approach across Wales.

Others added that the short-term nature funding for a lot of support services undermines the necessary systems for monitoring because they get overlooked in the rush to implement.

#### The experiences of care experienced birth parents

One charity worker explained that the children of care experienced birth parents are often subject to child protection proceedings immediately. Even before engaging with the system, the parents at the point that they become pregnant are registered as care experienced. Many young women have automatically had their child entered into the child protection register because the mum is care experienced, has had a difficult start in life or has been poorly parented.

One participant pointed out that, if we are putting children in care to give them a better start, it is inconsistent to tell those same children as adults that their child needs protection due to their own childhood. They added that there needs to be a culture change within some local authorities to understand that just because a parent is care experienced, it doesn't necessarily leave a negative blueprint for them as parents themselves.

# The dual role of social workers as corporate parents for care experienced parents

Some participants told us that local authorities need help to understand the barriers for care experience birth parents. For example, housing should be a particular priority for local authorities, which should ensure that care experienced birth parents have housing that's suitable for a new-born.

Again, we heard that local authorities and care experienced parents themselves should recognise that being a care experienced parent should not in and of itself mean that your child is placed on a child protection register.

#### The legal system

Some participants felt that solicitors often do not unpick the case, they tend to go along with what local authorities are saying. Sometimes what parents say, particularly care experienced parents, is not taken seriously.

Others added that care plan decisions are made at court without the parents having had access relevant support services beforehand.

We also heard concern that there are no women's prisons in Wales, so women from Wales are sent to prisons in England where they may not receive adequate

support. We heard case studies about women hiding their pregnancies and giving birth in their cells with no support.

#### Parenting assessment centres ("mother and baby units")

Participants discussed the challenges facing birth parents who are sent to parenting assessment centres. We hard that there are very few placements in Wales, so birth parents are sent relatively far away. When birth parents come back from the placements it can be difficult to re-integrate them into the community. Often they can't go back to their original accommodation because the local authority hasn't held their place.

#### **Parent/baby foster placements**

We heard about parent/baby foster placements, where a parent and a baby will stay with a foster parent, or vice versa, so that the parent can receive wrap-around help and advice on caring for their child. Participants told us that these placements can help parents to feel united with their baby and supported as new parents. However, participants also told us that there are very few such placements in Wales.

#### **Data collection**

We heard that better data is available about care experience young people in England than in Wales. While there is a lot of data collected by different agencies, it's not necessarily collected consistently, so it can't be interrogated in a way that answers the questions that most need answering.

We heard that Wales is "missing a trick": if better and more robust data was gathered, universities could be analysing it to identify where inefficiencies recur in the system or to identify good practice.

We heard frustrations from stakeholders who took part in a working group with Welsh and local government officials to look at improving the annual looked after children census data but it appears there was very limited change as a result of the work.

Participants called for longitudinal data with more contextual factors (e.g. deprivation, health, etc.).

#### Big changes that are needed

We heard the following proposals for reform of the care system:

Early intervention services, including advocacy, for all care experienced birth parents: to support care experienced birth parents with intensive, relationship-focused support services from the early stages of pregnancy to work with birth parents to understand and address social workers' concerns.

Parental advocacy as soon as a child is placed on the child protection register: to uphold parents' dignity and rights, to build a relationship with the family to better understand some of the barriers and challenges.

Better data: to help identify inefficiencies and good practice across the care system.

Mental health services to come under one roof: long-term goals and consistency of approach across mental health support services.

# 3. Professionals and academics working with care experienced children (2 February)

#### In care

#### Children's general experiences of the care system

Different groups of participants told us that care experienced children are usually acutely aware of their care status. We heard that stigma is a major barrier for young people - they can feel that their care status defines and influences how they are seen.

Some participants told us that there are significant inconsistencies in the level of support offered to care experienced children across Wales. The experiences of care experienced children can vary hugely depending on which local authority they live in.

We heard from one participant that where children have prospered it's not due to the system as a whole, but due to individuals who have made a difference. In other words, children have prospered *in spite* of the system rather than *because* of *it*. The participant added that, where professionals have made a difference, this is usually despite them not being given the resources to do their job.

#### Advocacy

Children need someone to have a strong, dependable relationship with. There needs to be one person who provides continuity and stability for them. We heard that advocates could fulfil that role.

Different groups of participants discussed the need for residential advocacy: advocates based on children's homes, rather than 'issue based' advocacies. We heard about a huge discrepancy in the proportion of local authority-run residential homes with assigned advocates (100%) and private/voluntary residential homes (around 15%).

We heard that one of the huge challenges within advocacy is to explain the system better to young people and to make language child friendly. Different groups of participants agreed, with some calling for independent advocacy to be extended to all children across the care system.

However, we heard concerns that some children don't take up the active offer because they feel they already have too many professionals in their lives. If a child doesn't have an advocate, they are then dependent upon their social worker to keep them up-to-date and to explain formal processes, for example. Not all young people get that support from their social worker. Others agreed, adding that it would be useful to know why some children don't take up their active offer in the first place to improve access.

#### Mental health

Different groups of participants told us that mental health is one of the biggest challenges facing children and young people in the care system. We heard from some participants that children have to be in crisis to get support. Others agreed, telling us that when young people are referred for therapeutic intervention, it is when their behaviours have already become problematic. Different groups of participants call for all young people to have access to mental health services in recognition of their past traumas, whether or not they are displaying problematic behaviour.

We head that mental health assessments as prescribed in the Social Services and Wellbeing (Wales) Act 2014 are inadequate. There is a lack of guidance available to staff, and therefore the assessments very in quality across Wales.

We heard that more funding should be given to services that focus on building a nurturing relationship with young people. The emphasis should not be to 'fix' the child.

Others highlighted the need for a trauma-based approach, which understands the impact of the trauma care experiences young people have faced on their mental health

#### **Social services**

Participants agreed that most young people have lots of social workers over the course of their time in the care system (we heard one example of a child having 18 social workers in 2 years). There creates a lack of stability and continuity, which is difficult for - and harmful to - young people for a number of different reasons:

- it can be hard for young people who have to repeat their life story so regularly to make sure their new social workers are up-to-date.
- the lack of consistency of social care professionals working with a child causes delays in care planning and forward actions.

 it negatively affects the working atmosphere of the children's care workforce, impacting on the attitudes of social workers and making the profession less attractive.

Some participants told us that there is a lack of data on the numbers of social workers each child has, and this would be helpful to understand children's experiences of social services.

We heard that, because of their high caseloads, social workers' focus tends to be on high-risk children. Others suggested that, because social workers' time is so limited, some vulnerable young people are supported by social work assistants, who may not be qualified to be social workers and may have had inadequate training.

Participants raised concerns about high caseloads, recruitment and retention across social services. There were also concerns about the funding for training and the levels of bursaries that are available to aspiring social workers.

We also heard that social services' approach can be 'tick box' and doesn't always consider the child's experiences or needs. Another participant told us that social workers don't always take responsibility for the lack of continuity in a child's care and support.

One participant stressed that, for them, radical reform meant reorganising services so that they are children centred, rather than system orientated.

#### **Placements**

#### **Foster placements**

We heard from different groups of participants that improving foster care was one of the best ways to improve the lives of care experienced children. Unfortunately, most participants told us that more should be done to improve placement stability.

Different groups of participants agreed that there are lots of temporary arrangements for care experienced children, which does not provide any sense of stability for them. Others added that some of those short-term placements become long-term due to staffing and shortages of better placements, even when they are not suitable to meet the child's long-term needs.

Some participants expressed concern that there was a national shortage of good foster placements. Before, social workers would match places to the needs of the

specific child. Now, children are sent anywhere because there is such a shortage of beds. Sometimes they are sent away from their friends and their support. However, we also heard that it sometimes right and appropriate to place a child far away from their home.

Some participants discussed the Children's Commissioning Support Resource (CCSE), an online database referred to as the 4-Cs, to match children with placements. This hasn't worked as expected. It was intended that local authorities would put all placements on there and all foster carers would be on there so there could be matches. But the system hasn't worked – it's added a layer of bureaucracy and hasn't helped matching. It's made the situation worse.

Different groups of participants told us that foster carers needed more support. We heard that they need stability and consistency in the professionals who work with them. We also heard that foster carers need support to meet the educational needs of care experienced young people. We heard that behavioural issues often take priority, rather than helping to address gaps in young people's education.

#### Residential placements (children's homes)

We heard that there is a lack of appreciation of the value of work provided by residential home staff. Subsequently, there can be frequent changes of staff which is distressing for young people. We also heard that some care staff lack training around trauma and attachment issues. This can lead to a failure to identify when children need support from mental health professionals, as opposed to therapeutic support by residential home staff.

Some participants explained to us that regular inspection of children's homes in Wales can be carried out by someone within the organisation, although not within the management chain. In England, inspections are carried out by an independent inspector once a month (known as 'regulation 44 visits' or 'independent monitoring visits'). Others told us that inspections are not carried out regularly enough, and that the performance of care homes is not adequately scrutinised.

We also heard that it is often very difficult to move children from residential placement to foster placement. Children in residential placements can be given labels that they do not deserve to have, which can influence placements with foster carers.

#### Kinship care

We heard from different groups of participants that there has been an increase in kinship placements and deviation away from adoption as a long term care option. Some participants were unsure whether this was positive, and felt that time would tell. Others expressed concern that family members are sometimes pressured to care for children who are at risk of being taken into care. Often these family members – often grandparents – are not well-placed to do so, and the placement is not successful. We heard that this was an unintended consequence of the policy of reducing the numbers of children in care.

Some participants told us that kinship carers need more support and training, like the support and training available to foster carers. We heard that it can be very challenging for a family member to take care of a vulnerable child, and that support is critical for the placement to be successful. Some called for the allowances of kinship carers to be promoted to match foster carers.

Other participants had concerns that some kinship care arrangements are informal, and they are not known to local authorities. Those carers and young people in particular don't have enough support.

#### Removing profit from children's care

We heard general support for the Welsh Government's intention to remove profit from children's care.

However, we heard concerns that the timeframe within which this was to happen was unrealistic and that there is too much for local authorities and care providers to do within the space of 5 years. It was suggested that a wholesale change to the social care market would require a timeframe of 10 to 15 years and that doing this within the current timescales would exasperate the current problem in supply and demand.

#### Missing children

Some participants called for a more consistent response to episodes where children go missing from care across Wales. Return home interviews provide opportunities for young people to speak about their experiences during a missing episode. But there are concerns that the approach to return home interviews varies across Wales.

#### Adoption

Some participants spoke of their concerns that when children are adopted they no longer receive the same support that other children who are still in the foster system receive.

Some participants reflected positively on PATHways (previously known as TESSA), an intervention programme that helps adoptive parents achieve better outcomes for their children by giving them early access to a clinical psychologist and peer support.

#### **Education**

#### **Moving schools**

The participants who spoke to us about education agreed that continuity in children's school education was important. Children should stay in the same school wherever possible, to develop and maintain friendship groups.

We were told that foster carers should be told from the outset if they will be expected to take their foster child to school in another area.

Other participants told us that, when a child does have to move schools, the incoming school should work with the child before their start date to make sure their needs are understood and that the child has a named point of contact from day 1.

#### **Extra-curricular activities**

We heard that extra-curricular activities are essential for care experienced young people. Young people can have a negative internal dialogue, which originates from the trauma they have experienced. Having social or sporting activities can give them opportunities to make connections with other children and give them a sense of belonging.

Some participants told us that foster carers should have sufficient allowances to be able to pay for extra-curriculum activities for their foster children. This can be challenging for some foster carers who are struggling financially. However, it should be an expectation that foster carers use some of their allowance for extra-curricular activities.

#### **Relationships with families**

Different groups of participants told us that care experienced children should be supported to maintain healthy relationships with everyone who is important to them, including siblings or extended family members. We heard calls for the

maintenance of sibling relationships to be given the same importance as maintaining contact with birth parents.

#### **Criminalisation of care experienced young people**

Some participants felt that care experienced young people are being criminalised more than they were before. There is a protocol in place which encourages non-criminalisation, but they felt that more research was needed to understand why police were more involved in the lives of care experienced children than before.

Other participants told us that things that happen in a conventional family - like siblings falling out and arguing - is treated completely different in residential care. Sometimes the police can get involved in relatively trivial matters.

#### **After care**

#### The cliff-edge at 18

Some participants spoke to us about the cut-off that many care leavers experience at 18. All of a sudden they have no support and are expected to make decisions on their own.

Some participants said that, although they understood the need to move young people into independent living, there was something "fundamentally wrong" about a model that prioritises moving young people through the system rather than meeting the specific needs of each individual young person.

Some participants felt that care leavers should be supported until at least 25, and potentially to 30 if the young person needs that additional support.

#### **Unregulated accommodation**

We heard concerns raised about unregulated accommodation, particularly for 16-17 year olds. Many of those children are very vulnerable. Some participants felt that Wales is lagging behind on legislation to address unregulated accommodation compared to in England.

#### The When I'm Ready scheme

We heard that fostering providers are unlikely to take on a 16 year old when they're not going to receive regular income for that placement for more than two years. Participants generally agreed that the Fostering Regulations should be reviewed so that young people can stay longer under the When I am Ready scheme.

#### Big changes that are needed

We heard the following proposals for reform of the care system:

Prioritise contact with the young person: have one independent person or organisation to be a constant source of support for the young person, to help them navigate services and the care system.

Mental health support for all care experienced young people: every care experienced young person should have the right to therapeutic support as soon a they enter the care system. This should be trauma-informed, and part of a wholesystem approach to mental health.

Advocacy for all care experienced children: long-term advocacy for all care experienced children and young people to provide a consistent source of support, help them get their voices heard, and to help them navigate the system.

**Focus on permanency planning**: focus on permanent, quality placements for care experienced children and young people. Foster carers and staff need more training and support.

**Develop home-school relationships**: bring foster carers into schools to work alongside staff to embed trauma-informed practice.

Focus on the social care workforce: refocus social care on face-to-face direct work. Redistribute administrative tasks, streamline processes to reduce bureaucracy and reduce caseloads.

**Prioritise relationships with siblings**: the maintenance of sibling relationships should be given the same importance as maintaining contact with birth parents.

Ensure the independence from the local authority of Independent Reviewing Officers: They are important and stay long in young people's lives. IROs have powers to flag things to CAFCASS. The IROs' approach should be consistent across Wales.

Make the When I'm Ready scheme fit for purpose: make sure it is financially viable for foster carers and approached consistently across Wales.

Establish robust processes to support children who go missing: the police's current 'safe and well' check is not working effectively.

Raise the age of all care leavers to 25: to ensure that all care experienced children are entitled to help and support as they transition to living independently.

**Better data**: to understand inefficiencies and successes of the care system as a whole, and to support research and policy development.

## Care experienced children and young people (15 February)

#### **Before care**

#### Support to help families stay together

Some young people told us that extra support for families would stop some children from being taken into care. But others said that, no matter what the level of support, some children couldn't stay with their birth parents and it was right to remove them.

#### Stigma against care experienced parents

Some participants told us that parents who have been in care themselves often have their children removed from them because of their care experience. The participants felt that this was unfair, and that young parents should be given the opportunity to demonstrate that they are good parents.

#### In care

#### **Being listened to**

Some young people felt that when they were younger nobody listened to them. Decisions were made for them without them having the opportunity to feed into that decision.

We heard from some young people that they became more confident as they got older, and made sure their voices were heard. Others told us that whether or not they were listened to depended mainly on how good their social worker was.

However, one participant told us that, in general, she felt that she had always been listened to by professionals.

One young person told us that they felt let down by the system. They requested their case files when they turned 16, and have been fighting for 5 years to access them.

#### **Advocacy**

One young person told us that they had advocacy support but when their advocate left they felt abandoned and that they had no voice. They could get

advocacy support, but there was no consistency in the advocates that were assigned to you.

We also heard that some young people don't trust advocates because they believe that they are working for the local authority.

Another mentioned that although they liked and trusted their advocate, he never accompanied them at LAC reviews, which they would have appreciated because they didn't feel able to speak up for themselves.

Others called for young people to be offered an advocate as soon as they enter the care system.

#### **Social services**

We mainly heard negative experiences of working alongside social workers. On the whole, participants told us that good social workers are rare. We heard some specific challenges care experienced young people had faced with social workers:

- Some of the young people had had lots of social workers. One young person told us that they had had 32. They explained that this means you have to tell your story over and over again, which can be triggering and overwhelming.
- One young person told us that it took 3 years for them to get a passport because social workers didn't act quickly enough.
- One young person told us that he wanted to go on a rugby tour, but after 4 months of trying he hadn't been given sign-off to go by his social worker. In the end he had to go to court to get permission.
- One young person told us that for the last 8 years he was supposed to spend time with his birth parents on his birthday. However, he had never been able to have that time with them because social workers had failed to show up on the day itself or failed to process the request in time.
- One young person told her they'd had so many social workers they don't even say goodbye to her anymore.

One foster carer said that all they hear about is that social workers have high caseloads. But she said that, to children, that just sounds like they don't matter, that they're not important enough to social workers to be worthy of their time.

Some foster carers and professionals supporting the young people attending suggested that more and more social workers seem to be agency staff at the moment, which makes relationship-building even more challenging.

We also heard calls for community social workers to be reintroduced, who work in specific areas and get know the schools and local environment.

But we also heard some positive experiences about social workers, too. One young person told us that they had a really good social worker, who would answer the phone when they called and came to meet her in person when they were struggling.

#### Mental health

We heard general agreement from young people that there is not enough recognition of the trauma that many care experienced young people have gone through, and the impact of that trauma on young people's mental health.

We heard calls for an 'active offer' of mental health support for all children in care, like the 'active offer' for independent advocacy. We heard that you should not have to ask for that support - it should be given to children in care automatically.

#### **Education**

#### **Challenges for care experienced pupils**

A common theme from our discussion was that care experienced pupils are treated differently at school. We heard that young people often experience a massive stigma over their care status, and are often bullied because of it.

We heard about lots of different challenges that some care experienced pupils face in school, including:

- Social workers come into school wearing their name badges, which makes it obvious to everyone that they're social workers, reinforcing the young person's care status.
- Social workers take care experienced pupils out of their lessons during the school day, which disrupts their learning.
- It can be difficult to get sign-off to go on school trips or to be involved in extra-curricular activities. Going abroad on trips is particularly challenging.

 LAC reviews taking place while the young person is in school, meaning that they couldn't attend.

We heard that some teachers take the time to understand the issues that care experienced children face, and work to build positive relationships with them. However, other teachers don't understand and don't have enough training.

Some young people told us that you can form positive relationships with different members of staff - not necessarily the 'designated person for looked after children' or even teachers, it could be anybody - so all school staff should have training to understand more about the care system.

We heard that moving schools can be traumatic for some care experienced young people. It can help to work with the new school before the young person's first day to make sure they feel welcome and supported.

#### **Extra-curricular activities**

Generally, the young people we spoke to told us that extra-curricular activities (such as sport or musical instruments etc.) are a welcome relief and break for them.

However, some young people told us that the costs of attending those activities can be a barrier to participation. Some social workers are supportive and help them get the money they need to buy kit or instruments, etc. But others told us that it can depend on their relationships with their foster carers – sometimes young people feel awkward asking for money for extra-curricular activities, so might delay asking their foster carer, or might not ask at all.

#### **Placements**

Some of the young people we spoke to had been regularly moved between placements. One told us they had been moved 18 times between their grandparents and foster carers. Another told us that they had been moved 21 times

One young person told us that they had lived on the streets at 12 years old for around 4 months. At 16 they were put in a hostel. They told us they felt unwanted, and that nobody wanted to keep them.

Another young person told us that they loved their foster carers, and their carers wanted to keep them. But their foster carers were considered 'short term carers', which meant that they had to move to another placement.

But we heard some positive stories - one young person had been with her foster carer since they were a baby. They had had stability and support throughout their childhood, and considered themselves very fortunate compared to most other care experienced children.

#### **Seeing family**

We heard that siblings of children in care are often put in different placements. This can be really difficult for some children, and we heard that - for some young people - their relationships with their siblings is more important than their relationships with their birth parents.

We heard that some social workers and foster carers recognise how important sibling relationships are, and they work really hard to keep siblings together.

#### Welsh language

One participant told us that Welsh was their first language, but that had been given no consideration. They had been sent to an English-language school, placed with an English-speaking foster carer, and allocated to English-speaking social workers.

#### **After care**

#### Cliff-edge at 21

One young person told us that at 21 your support fades away. If you have mental health issues you have nobody to turn to.

One young person said that as you get older and you're expected to live more independently you need support more than ever. They reminded us that if you have a conventional family you can call one of your parents for help – for example if you have a flat tyre. If you've been in care you probably don't have that. Even a helpline would be useful.

#### Moving into further or higher education

Some young people told us that the stigma they feel as care experienced pupils affects the expectations of them as they move into further or higher education. One young person told us that, on the whole, professionals think that "care experienced people don't go to university". They called for better careers advice to help them decide what to do next.

Some young people felt that although there was support available to go into higher education, most young people don't know about it or don't know about it early enough to affect their decision-making. We heard that, on the whole, staff at colleges and universities haven't been trained to work with young people with care experience.

#### **Unregulated accommodation**

One young person told us that they had been thrown out of their foster placement. They told her Personal Advisor, who proposed that they stay in a B&B. The young person didn't feel safe there - there were people in the B&B who had just come out of prison.

#### **Barriers to living independently**

One young person told us that care experienced young people are discriminated against when they look for housing. A landlord told them that they would not allow any care leavers to rent the property, because previous tenants had been a care leaver and had trashed the property.

#### **Young Person's Advisors**

The young people who spoke about Young Person's Advisors told us that they struggle to get hold of them, or that they don't offer them the support they need. One participant told us she didn't have a named advisor - she had been put on an 'unallocated list', and had to call the main office to ask for any support.

#### Big changes that are needed

We heard the following proposals for reform of the care system:

Education should be protected time: social workers and other professionals should not come into schools and interrupt care experienced pupils' learning, unless it is an emergency. When they do, they should take every effort to avoid publicising the care status of the child they are seeing.

Training for all school staff to understand the care system: it isn't only teachers or pastoral staff that young people feel comfortable talking to. All school staff should have basic training to understand the care system, so they can help care experienced young people who are comfortable talking to them.

Prioritise care experience children's contact time with their family: where possible, and safe, every effort should be made to enable care experienced children to have regular contact with members of their family.

Guaranteed mental health support for all children in care: therapeutic mental health support should be provided to every child when they enter the care system.

Support care experienced young people to make a difference within the care system: support them to be foster carers and social workers themselves, and include them in recruitment and training for social workers.

Establish peer-to-peer support networks: more networks and groups, online and offline, to help care experienced children share their experiences.

Mandatory training and more accountability for foster carers:

## Annex 1: List of oral evidence sessions.

The following groups of people/organisations attended our stakeholder events in spring 2023.

Date	Name and organisation
Birth parents - 26 January	<b>Birth parents (and supporting staff)</b> Barnardo's, Baby & Me
	<b>Birth parents (and supporting staff)</b> Barnardo's, Reflect
	Birth parents (and supporting staff) CASCADE at Cardiff University
	Birth parents (and supporting staff) National Youth Advocacy Service (NYAS), Parent Advocacy
	<b>Birth parents (and supporting staff)</b> National Youth Advocacy Service (NYAS), Project Unity
Professionals and academics working with birth parents - 26 January	<b>Leah Wood</b> Barnardo's
	<b>Seren Howarth</b> Barnardo's
	<b>Dr Helen Hodges</b> CASCADE at Cardiff University
	<b>Dr Louise Roberts</b> CASCADE at Cardiff University
	Nadia Lovell National Youth Advocacy Service (NYAS)
	Helen Parry National Youth Advocacy Service (NYAS)
	<b>Dr Charlotte Edney</b> Nuffield Family Justice Observatory
	Sarah Durrant Tros Gynnal Plant Cymru
Professionals and academics working with care experienced	Suzanne Griffiths Adoption UK Cymru
	Jason Baker Adoption UK Cymru

children and young people - 2 February	Penny Jeffreys Adoption UK Cymru
	<b>Lynette Lovell</b> Association of Directors of Education in Wales (ADEW)
	Samantha Frith-Jones Association of Fostering and Adoption Cymru
	<b>Katie Anthony</b> Barnardo's
	<b>Josh David-Read</b> Barnardo's
	<b>Dr Helen Hodges</b> CASCADE at Cardiff University
	Sean O'Neill Children in Wales
	<b>Kate Aubrey</b> Children in Wales
	<b>Tom Davies</b> Children's Society
	Sarah Thomas Fostering Network Wales
	Elizabeth Bryan Fostering Network Wales
	Ann Bell National Adoption Service
	Elly Jones National Youth Advocacy Service (NYAS)
	<b>Lisa Huish</b> Parents' Voices in Wales
	Gareth Thomas Parents' Voices in Wales
	Sarah Durrant Tros Gynnal Plant Cymru
Care experienced children and young people - 15 February	Care experienced children and young people (and supporting staff) Facilitated by Voices From Care Cymru