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# **RESIDENTIAL CARE IN WALES: THE CHARACTERISTICS OF CHILDREN AND YOUNG PEOPLE PLACED IN RESIDENTIAL SETTINGS**

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## **1. INTRODUCTION**

The analysis undertaken within this report considered the characteristics of children and young people in Wales who are 'looked after' and who have experienced care in a residential setting.

### **DATA**

The data used for this analysis are derived from the information about children 'looked after' that is submitted by each Welsh local authority annually to the Welsh Government. The data is submitted in the form of the SSDA903 return (Welsh Government, 2014). The data used cover the period from 1<sup>st</sup> April 2008 to 31<sup>st</sup> March 2014.

The SSDA903 data are broadly divided into two sets of variables, these being identified by the guidance as related to Child Identity and Episodes of Care (Welsh Government, 2014).

The Child Identity data within the SSDA903 return consist of a relatively small number of key variables:

- The responsible local authority;
- Child identifier;
- Sex of the child;
- DOB (converted to age at the 31<sup>st</sup> March of the data collection year);
- The child's home postcode i.e. the address from which they entered the care system (converted to Lower Super Output Area).

The Episodes of Care data consist of the following variables:

- Date episode commenced
- Reason for episode
- Legal status
- Child in Need code (category of need)
- Type of placement (foster care, residential, placement with parents, etc.)
- Date episode ceased
- Reason episode ceased

### **DEFINITION OF RESIDENTIAL CARE**

The guidance produced by the Welsh Government for completion of the SSDA903 return categorises placements in residential settings as being a range of provisions that are wider than just those children and young people placed in "homes subject to Children's Home Regulations" (Welsh Government, 2014, p.32). The types of provision covered are:

- Young people, 'looked after' placed in secure units (both inside and outside the LA boundary)
- Placements in homes and hostels subject to Children's Home regulations (both inside and outside the LA boundary)

- Hostels and supportive residential settings not subject to Children’s Home Regulations
- Placements in other residential settings, specifically; residential care homes; NHS or other establishments providing medical or nursing care; Family centres or mother and baby units; and Youth Offender Institutions or prison
- Residential schools (except where dual registered as a school and a children’s home)

For the purposes of this analysis the data relating to children and young people coded as being *missing from placement* (which is included in the residential setting coding options) and those coded as *other placements not listed above* have been excluded.

## **ANALYSIS**

The analysis looked at the characteristics of children and young people in residential care at three points, these being:

- When a child or young person whose final placement was in a residential setting ceases to be ‘looked after’
- When a child or young person is placed in a residential setting at the point when they begin a period of being ‘looked after’
- When a child or young person who is already ‘looked after’ experiences a placement change that sees them move from a family placement or other provision to a residential placement or move in the opposite direction

## **2. LITERATURE REVIEW**

### **THE REVIEW PROCESS**

To contextualise the research on the residential care population in Wales, the aim of the literature review was to identify existing studies describing the residential child care population, either in Wales or elsewhere in the UK, in terms of demographics and children's histories.

The Welsh Government (wales.gov) and the English Government (gov.uk) websites were searched for relevant statistics and research reports, revealing useful statistical data for both countries and two relevant research reports for England.

To explore the wider literature, a systematic approach was initially taken, searching databases using specific search terms. The databases and websites searched and numbers of results returned were: Social Care Online (4854), PsycINFO (3938), International Bibliography of the Social Sciences (50), Applied Social Sciences Index and Abstracts (60).

Abstracts were searched using the terms: 'Child\*' or 'young person' AND 'residential care' or 'children's home' AND 'England' or 'Wales'. Material between 1989 and 2015 was searched, because of the importance of the Children Act 1989.

Two of the database searches returned an unmanageable number of results for a short literature review of this nature, and after screening a number of the initial abstracts, articles were found to be irrelevant. For those databases that returned a more manageable number of results (IBSS and ASSIA) all abstracts retrieved were screened and three relevant articles were found (Cameron 2014; Bullock and Blower, 2013; Gallagher and Green 2011). As this initial strategy did not prove fruitful, the bibliographies of two recent major research reports commissioned by the DfE (England) were used to guide the review (Berridge et al 2012; Hart, La Valle and Holmes 2014).

### **RESIDENTIAL CARE IN ENGLAND AND WALES: THE CONTEXT**

The numbers of children and young people placed in residential care have dramatically decreased in England and Wales since the 1980s (Ainsworth and Thoburn 2014). Bullock and Blower (2013) compared English data on placement patterns of looked after children and young people (LACYP) from studies undertaken in 1980 and 2010. They reported that, in relation to new entries into care in England, the use of residential care had declined from 46% in 1980 to 2% in 2010. In England and Wales this decline can be attributed to several interconnecting factors:

Concerns about institutionalisation and the development of attachment problems, particularly in young children;

- High-profile scandals revealing institutional sexual abuse perpetrated over many decades

- The Children and Young Person's Act 1969, reinforced by the Children Act 1989, emphasising alternatives to custody for young offenders (diminishing the need for community homes for young offenders)
- The high cost of residential care in comparison to foster or kinship placements

Currently, family-based, kinship or foster care is the preferred placement choice for LACYP in England and Wales. However a smaller number of LACYP, those who "have more acute needs...tend to be placed in more institutional-type settings" (Gallagher and Green 2011, 437). Residential care in England and Wales has been described as shifting "between (largely) temporary treatment or therapy of some kind with escalating severity of needs particularly around attachment difficulties" (Clark et al 2014, 5). Indeed, many of the children and young people that are placed in residential care are deemed unable to live in a family placement or exhibit more serious behavioural and emotional problems (Berridge et al 2012; Hart and La Valle 2015). This has resulted in a negative public discourse around residential care, often compounded by the media, based on a common perception that it is a placement of 'last resort' (Clackson et al 2006; Ainsworth and Thoburn, 2014).

Interestingly, the use of residential care in mainland Europe is higher than in England and Wales. For example, in 2015 4.45% of LACYP were in residential care in Wales (Welsh Government 2015). In England in this figure was 8%, compared with 27% in Sweden in 2008 and 47% in Denmark in 2007 (Ainsworth and Thoburn 2014; Hart and La Valle 2015).

## **CHILDREN LIVING IN RESIDENTIAL CARE IN ENGLAND AND WALES**

At 31<sup>st</sup> March 2015, there were 5,615 LACYP in Wales. The large majority (4,255) were placed in foster care, with only 250 (4.45%) housed in residential care provision (Welsh Government 2015). A further 155 LACYP were classed as either 'absent' (missing from an agreed placement for 24hrs) or 'other' (placed in a residential setting not covered by the SSDA903 placement codes).

A lack of data which are publically available, coupled with a lack of research on residential care specifically in Wales makes it very difficult to identify any existing reports or papers on the characteristics of children living in residential care in Wales. The data publically available in England are more comprehensive and more research into residential care populations has been carried out in England.<sup>1</sup> Due to the similar social, political and policy context it is worth exploring some of these English data to better understand the residential child care population.

At 31<sup>st</sup> March 2015 in England there were 69,540 LACYP (DfE 2015a). 8% of these were placed in a regulated children's home. Other residential placements included:

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<sup>1</sup> However, in their comprehensive review of literature on residential care, Hart, La Valle and Holmes (2014) note that we do not know enough about residential care and that the evidence we have in England, and by logical extension, in Wales, is "much weaker than the evidence available to inform other children's policy areas" (66).

Type of placement	% of LACYP
Residential children's home	8%
Residential care home (provision of personal/nursing care eg. feeding and washing but not provided in hospital or by NHS)	1%
Residential school	2%
YOI/prison (CYP already a LAC on entry into secure estate or concurrent with care order)	0.39%
Family centre/Mother and baby unit	0.17%
NHS facility (provision of medical/nursing care)	0.15%

## **BASIC CHARACTERISTICS OF CHILDREN IN ENGLAND IN RESIDENTIAL CARE**

Residential care is generally perceived as housing older children and adolescents and this is supported by the English government statistics: the average age of a LACYP living in residential care in England in 2014 was 14.7 and 78% are aged between 14 and 17 years old (DfE 2014). The prevalence of older children being placed in residential care is also supported by research (Boddy et al 2013; Berridge 2012). However, government statistics show that 11% of boys and 5% of girls living in residential care in England were aged 11 and under, with a further 5% of boys and 4% of girls aged 12. Children and young people in residential care in England are significantly more likely to be boys (64%) than girls (36%) (DfE 2014).

## **PLACEMENTS: NUMBERS AND LENGTHS**

A significant proportion of LACYP in residential care England (31%) experienced six placements or more in 2014. However, a quarter of LACYP in children's homes were on their first placement, compared with 32% of children in foster placements (DfE 2014). Further, in an English quasi-longitudinal study of children in care in 13 English Local Authorities (Sinclair et al 2007), half of the 694 children who were in residential care were found to be 'adolescent graduates' (they were 11 or over and had moved to residential care after a breakdown in one or more family placements). Half were 'adolescent entrants' (they were 11 and over and had experienced residential care as their first care placement).

Data for England for 2014 indicate that only 19% of placements in residential care lasted longer than a year (compared with 32% for foster care), whilst 35% lasted between one day and one month (compared with 30% in foster care) (DfE 2014). Against this however, in Berridge et al's 2012 study of 16 children's homes relating to 59 young people in England, only 23% were deemed by staff to be short-term: for emergency, assessment or preparation for another placement, whereas 43% were for 'long-term care and upbringing'.

## **SPECIFIC PROBLEMS OF LACYP IN RESIDENTIAL CARE IN ENGLAND**

Research studies from England suggest that many LACYP in residential care will have experienced serious problems before entering care (Wade et al. 1998) as well being disadvantaged socially (Bebbington & Miles 1989). LACYP in residential care in particular are very likely to have experienced physical or sexual abuse, neglect or other trauma as well as

dysfunctional family relationships (Berridge & Brodie 1998; Farmer & Pollock 1998; Barter et al. 2004).

Many problems have been identified as being prevalent in the residential care population. English data from 2014 indicate that the average Strengths and Difficulties Questionnaire (SDQ) score for a LACYP in residential care was 18.1 compared with 13.6 for all other LACYP (a score of 17 and over being a cause for concern). Also, 19.7% of LACYP in residential care aged 16-17 had been convicted of a crime or were subject to a final warning or reprimand compared with 9.8% of all other LACYP aged 16-17. Further to this, 18.7% had substance misuse problems, compared with 9.2% of other LACYP (DfE 2014). This is supported by Berridge et al's (2012) study which reported that 38% of the children in their sample who were living in children's homes had a statement of special educational needs; 62% had clinically significant mental health difficulties and 74% were reported to have been violent or aggressive in the past six months.

In a comparative study of LACYP in five European countries, Cameron (2014) reported that LACYP in residential care in England were more likely to have dropped out of education or employment, and were at greater risk of teenage pregnancy and criminal behaviour. However, despite the threshold for entry into care being relatively high in England, these poor outcomes could not be explained by differences in the characteristics or backgrounds of the LACYP themselves. Differing levels of professionalization and education in the workforce across the five countries were thought to be key in explaining these differences in outcomes for LACYP in residential care.

Schofield et al (2007) conducted a qualitative study of LACYP in England who had been in care 'long term' (for 4 years or more). They found violent and sexually aggressive behaviour and self-harming behaviour more frequently reported in LACYP in residential placements. Further, only 7 of 40 LACYP in residential care had not been involved in criminal behaviour and 80% were reported to have a disability.

In relation to speech, language and communication, McCool and Stevens (2012) undertook research with 30 LACYP in residential care and used diagnostic tools to detect the presence of speech and language difficulties. They found that almost two thirds of the sample (19 of 30 LACYP) demonstrated clinical impairment in this respect, but that none of these instances had been properly identified.

In terms of studies examining mental health specifically, Ford et al (2007) used survey data from both LACYP and children living in private households in England, Wales and Scotland. They found that LACYP were almost five times as likely to have a mental, emotional or conduct disorder as their peers. This was even greater for those in residential care than in foster or kinship care, with 61% reported to have a conduct disorder as opposed to 32% and 26% respectively. Stanley (2007) reported that residential staff surveyed identified regular or frequent problems at higher rates than foster carers on all measures of mental health need. This was especially evident in relation to severe tantrums which were reported in over three quarters of the questionnaires from residential staff compared with a third from foster carers. Further, 20% reported dealing with eating disorders regularly in comparison to 8% of foster carers and 29% reported substance misuse as being a regular problem compared with 5% of foster carers. Overdosing was not reported from foster carers, but



14% of residential staff reported this as being a regular occurrence. A further study that utilised survey data from the British Cohort Study in 1970 and its follow up wave in 2000, reported that residential care was related to poorer outcomes than foster care, including an increased risk of adult criminal convictions and depression (Dregan and Guildford, 2012).

## **SECURE CARE**

Children and young people who are detained under S25 of the Children Act 1989 either because they are likely to run away and pose a risk to themselves or others ('welfare' route) or are subject to remand or a sentence through criminal justice legislation will be placed in secure care. Secure Training Centres (STC) and Youth Offending Institutions (YOI) provide placements for those who have been detained within the criminal justice system, Secure Children's Homes (SCH) accommodate children and young people through either route.

At March 31<sup>st</sup> 2015, 205 Children were accommodated in SCHs in England and Wales: 194 in England and 11 in Wales (DfE 2015b). This represents a decrease of 21% of children and young people in SCHs compared with 31<sup>st</sup> March 2010. The proportion of children and young people placed in SCHs on the basis of the 'welfare' route has increased. On 31<sup>st</sup> March 2015, 43% were placed by the local authority on welfare grounds compared with 37% at 31 March 2010. Despite the low numbers of children and young people placed in these settings, more research is needed to understand the uses of SCHs, especially in light of anecdotal evidence about the use of secure care in cases of child sexual exploitation, which might explain the recent rise in proportion of children placed in SCH on welfare grounds.

The number of LACYP in YOIs or prisons in England and Wales was 271 at March 31<sup>st</sup> 2015. In research conducted by the HM Inspector of Prisons, it was found that LACYP who enter a YOI demonstrate high levels of problems upon entry. For example, 40% reported problems with drugs compared with 28% of those who had not experienced care, and 29% reported mental health problems compared with 17% of non-looked after young people (HMIP 2011). In addition, less than half of the social work teams involved with the LACYP prior to entry reported that that would keep a routine check on the LACYP's progress and wellbeing. Plans for resettlement are also more complex for LACYP upon release from the secure estate. More research is needed to understand this small but very vulnerable group.

## **TREATMENT**

Studies have repeatedly demonstrated elevated mental health need amongst the residential care population and problems around substance misuse (see above). Much of this need has been shown to be unmet (Ford et al 2007). However, while treatment for mental health, drugs and alcohol misuse or acute and complex behavioural problems in residential care is common in the US, in England and Wales there is no definition, regulatory framework or separate registration category that guides the provision of what have come to be known as 'Therapeutic Children's Homes' (TCHs) (Gallagher and Green 2011). Berridge et al (2012) found that 7% of the LACYP in their study were deemed by staff to have been placed in residential care for 'treatment' but the lack of regulatory framework or guidance in England and Wales and lack of research in this area makes it hard to determine exactly what constitutes a treatment placement, what LACYP are, and should, be receiving by way of treatment and which LACYP are receiving it.

### 3. CHILDREN AND YOUNG PEOPLE CEASING TO BE ‘LOOKED AFTER’

During the six years covered by the data there were 11412 instances of children and young people (0 – 18 years) ceasing to be ‘looked after’ in Wales. Of these instances of children and young people leaving care, 1044 or 9% relate to those whose last placement was in a residential setting.

The 11412 exits from care were experienced by a total of 9990 children and young people. As a means of sampling the data, the analysis contained within this section will look at the first time of exit (some children experience multiple periods of being ‘looked after’) within the six years covered by the data for those children and young people whose final placement was in a residential setting.

Of the 9990 children leaving care for the first time during the period, 769 or 7.7% of all those ceasing to be ‘looked after’ did so from a residential placement. This represents a sample of almost three quarters (73.7%) of the total number of 1044 instances of children and young people leaving residential settings during the six year period. Of these 769 cases 510 (66.3%) were boys and 259 (33.7%) were girls.

#### PLACEMENT TYPE

The type of residential setting a child or young person exited care from when leaving care for the first time during the period covered by the data, is presented in table 1.

**Table 1: Number of children exiting care for the first time by residential placement type**

	Number
Secure Unit	60
Children Home	402
Other Hostel	56
Care Home	80
NHS/Health Trust	13
Mother and Baby	22
YOI	48
School	88
Total	769

The table shows that of the 769 children exiting care, just over fifty percent (52.3%) did so from a children’s home covered by Children’s Home Regulations. The remainder did so from a range of settings classified within the SSDA903 as residential provision. Of those children and young people who had been placed in a children’s home as their last placement, 65.4% were placed in homes within the placing local authority’s boundary, whilst 34.6% were in homes outside the local authority boundary. After children’s homes, the next largest group are those children and young people who had been placed in residential schools, accounting for 11.4% of those ceasing to be ‘looked after’. These placements are defined in guidance for the completion of the SSDA 903 as being residential schools, “except schools that are dual-registered as children’s homes as defined in section

1(6) of the Care Standards Act 2000. Arguably, staff within these placements therefore fall outside the remit of the Care Council for Wales.

**Table 2: Residential placement type at first exit by the sex**

	Number		Total	Percentage	
	Boys	Girls		Boys	Girls
Secure Unit	49	11	60	81.7	18.3
Children's Home	245	157	402	60.9	39.1
Other Hostel	33	23	56	58.9	41.1
Care Home	51	29	80	63.8	36.3
NHS/Health Trust	*	9	13	30.8	69.2
Mother and Baby	9	13	22	40.9	59.1
YOI	47	*	48	97.9	2.1
School	72	16	88	81.8	18.2

Cells with less than 5 children have been suppressed and replaced with a \*

Table 2 shows the sex of children and young people ceasing to be 'looked after' by placement type. For the majority of residential placement types the highest proportion of children and young people ceasing to be 'looked after' from residential settings are boys. However, there are some settings where girls represent the larger group, specifically those whose last placement was an NHS or Health Trust provision and those in mother and baby units. In the case of the latter this may in part be due to the fact that the numbers including several teenagers, who it is assumed are mothers who are themselves 'looked after' (see table 4 in age section).

## LEGAL STATUS

The legal status of children and young people at the point at which they ceased to be 'looked after' for the first time during the period covered by the data is summarised in Table 3

**Table 3: Legal status at first exit from care**

	Care Order	Youth Justice	Detained CP	Voluntary
Secure Unit	*	47	0	8
Children's Home	51	7	12	332
Other Hostel	31	0	0	25
Care Home	13	*	0	66
NHS	8	0	*	*
Mother and Baby	*	0	0	20
YOI	23	19	0	6
School	*	*	0	82
Total	138	75	14	542

Cells with less than 5 children have been suppressed and replaced with a \*

The table shows that of the 769 children and young people who ceased to be 'looked after' for the first time during the six years covered by the data and whose last placement before leaving care was in a residential setting, 70.5% had been accommodated under Section 20 of

the Children Act 1989. Of the remain children and young people, 17.9% were 'looked after' on the basis of a care order and a further 9.8% as a result of involvement with the youth justice system.

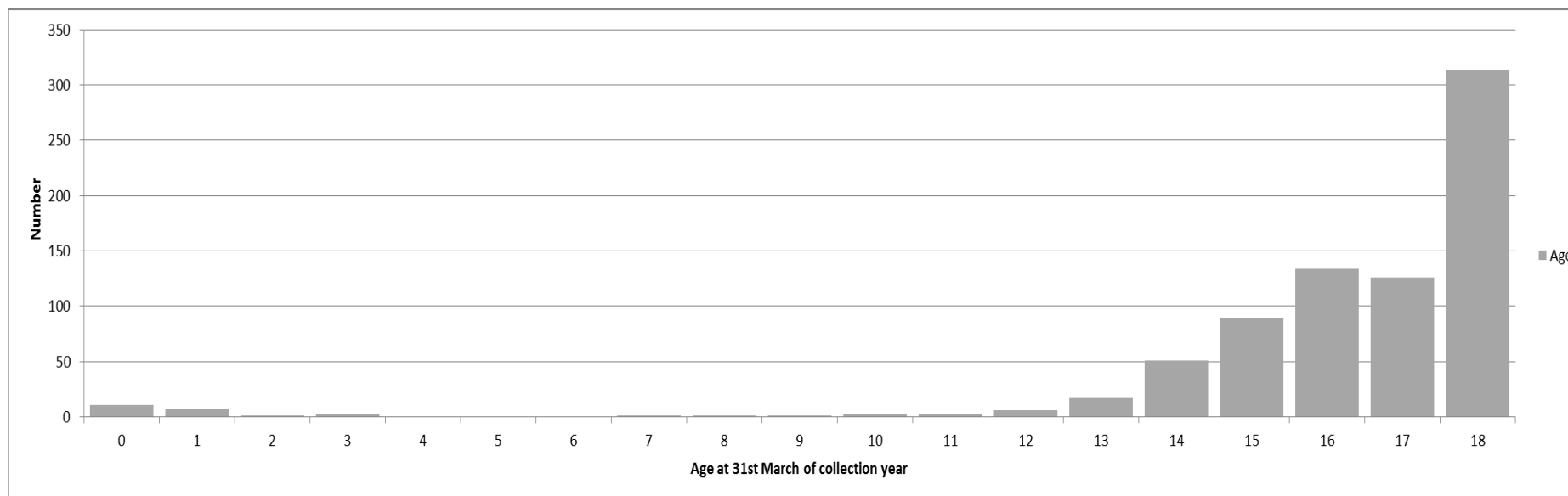
## **AGE**

The age profile of children and young people exiting care from a residential setting for the first time is presented in table 4 and the accompanying bar chart.

**Table 4: Number of children exiting care for the first time by age and residential placement type**

	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	Total
Secure Unit	0	0	0	0	0	0	0	0	0	0	0	0	0	*	6	14	14	14	9	60
Children's Home	*	0	0	0	0	0	0	*	0	*	*	*	*	12	35	54	83	81	128	402
Other Hostel	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	*	*	8	42	56
Care Home	0	0	0	0	0	0	0	0	0	0	0	0	*	*	7	10	19	11	30	80
NHS/Health Trust	*	0	0	*	0	0	0	0	0	0	0	0	0	0	0	0	*	*	8	13
Mother and Baby	8	7	*	*	0	0	0	0	0	0	0	0	0	0	0	0	*	*	*	22
YOI	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	*	*	7	35	48
School	0	0	0	0	0	0	0	0	*	0	*	*	*	*	*	8	7	*	61	88
Total	11	7	*	*	0	0	0	*	*	*	*	*	6	17	51	90	134	126	314	769

Cells with less than 5 children have been suppressed and replaced with a \*



Perhaps unsurprisingly the table highlights that the vast majority of children leaving care from residential settings do so as teenagers. It does however, also highlight the small number of children who leave at younger ages from certain settings, for example mother and baby units. Given the high number of children entering certain types of provision at young ages (see section on first entries to care) who are not represented within these exit figures it is assumed that these children move to other forms of 'looked after' children placement, such as foster care and then leave the care system from these placements. The four cases of teenagers leaving mother and baby provision, it is assumed, indicates young people who whilst teenagers became parents and who themselves were 'looked after'.

## CATEGORIES OF NEED

A category of need is provided within the SSDA903 for each period in care. The category of need code records the main reason for a child becoming 'looked after' at the time a particular period in care began. The code recorded at the start of a period of being 'looked after' will remain the same for as long as a period in care continues, even where that period lasts for several years.

The variable consists of nine categories of need (coded N1-N9), these are:

- Abuse and neglect (N1)
- Disability (N2)
- Parental illness and disability (N3)
- Family in acute stress (N4)
- Family dysfunction (N5)
- Socially unacceptable behaviour (N6)
- Low income (N7)
- Absent parenting (including children given up for adoption)(N8)
- Adoption disruption (N9)

(Welsh Government, 2014, p.26)

Table 5 provides a summary of the categories of need that underpin those children leaving care's original entry to the 'looked after' system.

**Table 5: Number of children exiting care for the first time by Category of Need**

	N1	N2	N3	N4	N5	N6	N7	N8	N9	Total
Secure Unit	10	4	0	*	*	35	0	*	0	60
Children's Home	89	34	13	79	87	71	*	25	*	402
Other Hostel	28	*	*	*	8	7	0	*	0	56
Care Home	16	6	*	15	24	14	0	*	0	80
NHS	*	0	*	*	*	*	0	*	0	13
Mother and Baby	11	0	0	*	9	*	0	0	0	22
YOI	16	0	*	*	*	19	0	*	0	48
School	9	56	*	12	*	7	0	*	0	88
Total	184	103	23	122	140	155	*	38	*	769

Cells with less than 5 children have been suppressed and replaced with a \*

The largest number of children and young people ceasing to be ‘looked after’ (184) originally entered the care system as a result of having been abused or neglected (N1). Allied to this group are those children whose entry to care was as a result of family dysfunction (N5). Resulting from “chronically inadequate parenting”, there are clearly links between children in this group and those children who have suffered neglect. When combined, children who originally entered care under these two categories account for over forty per cent (42.1%) of those children and young people exiting care from a residential placement during the six years covered by the data. The second largest category are those children whose needs arise from their socially unacceptable behaviour (N6), which the guidance defines as behaviour that impacts “detrimentally on the community” (Ref. p.26). Children and young people in this category account for 20% of those ceasing to be ‘looked after’ for the first time during the period. Whilst a proportion of these children and young were placed in residential settings such as secure units and youth offender’s institutions, the largest single group of children placed within this category are those whose last placement before exiting care was in a children’s home.

### REASON EPISODE OF BEING ‘LOOKED AFTER’ CEASED

Table 6 provides a summary of the reasons a child or young person’s period of being ‘looked after’ ended. The categories used within the SSDA903 to code the reason an episode ended are as follows:

- Adoption (both unopposed (E11) and consent dispensed with (E12))
- Died (E2)
- Care taken over by another LA (E3)
- Returned home (E4)
- Special Guardianship Order (both with foster carers (E43) and other carers (E44))
- Independent Living Arrangement (both with (E5) and without formalised support (E6))
- Transferred to care of adult social services (E7)
- Ceased for any other reason (E8)
- Sentenced to custody (E9)

**Table 6: Number of children exiting care for the first time by reason episode ceased**

	E11	E12	E2	E3	E4	E43	E44	E5	E6	E7	E8	E9	Total
Secure Unit	0	0	0	0	20	0	0	*	*	*	16	20	60
Children's Home	0	0	*	*	181	0	0	70	20	16	104	9	402
Other Hostel	0	0	0	0	7	0	0	12	*	*	29	*	56
Care Home	0	0	0	0	34	0	0	11	*	10	17	*	80
NHS/Health Trust	0	0	*	0	*	0	0	*	0	*	*	0	13
Mother and Baby	0	0	0	0	19	0	0	0	0	0	*	0	22
YOI	0	0	0	0	*	0	0	*	*	*	19	15	48
School	0	0	*	0	20	0	0	*	0	30	34	0	88
Total	0	0	*	*	289	0	0	108	32	63	223	50	769
Percentage	0.0	0.0	0.4	0.1	37.6	0.0	0.0	14.0	4.2	8.2	29.0	6.5	100.0

Cells with less than 5 children have been suppressed and replaced with a \*

Over a third of all children and young people (37.6%) at first exit from care in a residential setting returned home, which is perhaps surprising. Unfortunately, the next biggest category within the results, accounting for almost 30% of cases, are those children whose cases have been coded as “period ceased for any other reason”. These ‘system missing’ cases, whilst coded, tell us nothing about the children and young people and their route out of care. Excluding these cases the next largest category are those young people who on ceasing to be ‘looked after’ moved to a supported independent living arrangement. 108 young people, or 14% of those exiting care from a residential placement for the first time during the six years, did so as a result of moving to this type of provision. Exiting the care system through the routes of adoption or special guardianship appear not be ones available to the cohort of children and young people in residential provision. This may in part be a reflection of the age profile outlined earlier.



## 4. CHILDREN AND YOUNG PEOPLE STARTING TO BE ‘LOOKED AFTER’

During the six years covered by the data there were 16385 instances of children and young people (0 – 17 years) starting new periods in care in Wales. These new periods in care were experienced by a total of 10542 children and young people.

Of the 16385 instances of children becoming ‘looked after’ during the six years covered by the data, 1284 related to children who were placed in some form of residential setting at entry to care. This represents 7.8% of all entries to care during the period. Of the 10542 children and young people who experienced a first entry to care during the period covered by the data, 741 (7%) did so through placement into a residential setting at entry to care.

The data also consist of 3979 instances of children and young people who having experienced one period of being in care and ceasing to be ‘looked after’ returned for a second period in care. Of the 3979 who returned to care, 283 (7.1%) were placed in a residential placement at re-entry to care.

**Table 7: Total numbers of children in residential settings at first or second entry to care**

<b>First entry -residential</b>	741
<b>Second entry - residential</b>	283
<b>Total</b>	1024
<b>Total residential</b>	1284
<b>Percentage</b>	79.8

Table 7 indicates that those children and young who were placed in residential placements at entry to care, when that entry was either their first or second instance of being ‘looked after’, account for almost 80% of instances of children being placed in residential settings on entry to care during the six years covered by the data. This also highlights that just over 20% of instances of children being placed in residential settings on entry to care related to children and young people who have already experienced at least two periods in care (not necessarily in residential care) between 1<sup>st</sup> April 2008 and 31<sup>st</sup> March 2014.

The first part of analysis within this section will relate to children and young people placed in residential placements at first entry to care during the period. The second part of the analysis will look at the characteristics of those children who have already experienced one period of being ‘looked after’ within the six years covered by the data (not necessarily in a residential setting) and who were placed in residential placements on second entry to care. Doing the analysis in this way enables us to describe the characteristics of 80% of the total number of children and young people placed in residential placements at entry to care.

### PLACEMENT TYPE

The type of residential setting a child or young person was placed in on becoming ‘looked after’ for the first time during the period covered by the data is presented in table 8.

**Table 8: Number of children placed in residential provision at first entry by placement type**

	Number
Secure Unit	47
Children's Home	303
Other Hostel	23
Care Home	52
NHS	177
Mother and Baby	55
YOI	17
School	67
<b>Total</b>	<b>741</b>

It is perhaps not surprising that the largest number of those becoming 'looked after' who are placed in residential settings on first entry to care are those placed in children's homes. The 303 children and young people placed in this type of placement account for almost 41% of all children and young people placed in residential settings at first entry to care. Perhaps more surprising are the 177 children (23.9%) placed in NHS/Health trust provision at first entry. These children accounting for almost a quarter of children placed in residential settings at first entry. These placements are described in the SSDA 903 guidance as relating to "hospitals of all kinds when the child is placed there as part of the care plan.....also use for other facilities provided by health trusts (p.37)". The guidance also states that these placements do not relate to "temporary spells in hospital receiving treatment for injuries or illness (p.37)".

## SEX

**Table 9: Residential placement type at first entry by sex**

	Number		Total	Percentage	
	Boys	Girls		Boys	Girls
Secure Unit	43	*	47	91.5	8.5
Children's Home	190	113	303	62.7	37.3
Other Hostel	18	*	23	78.3	21.7
Care Home	30	22	52	57.7	42.3
NHS	90	87	177	50.8	49.2
Mother and Baby	30	25	55	54.5	45.5
YOI	17	0	17	100.0	0.0
School	56	11	67	83.6	16.4
<b>Total</b>	<b>474</b>	<b>267</b>	<b>741</b>		

Cells with less than 5 children have been suppressed and replaced with a \*

Of those children and young people placed in a residential setting at first entry to care, 64% were boys and 36% were girls. In this sample, boys represent the largest proportion of entries to all types of residential setting. This varies from 100% of all children and young

people entering Youth Offending Institutions to just over half of those placed in NHS/Health Trust provision.

## LEGAL STATUS

The data collected for the SSDA903 uses a total of 13 categories of legal status. One of these is planned regular short breaks (V1), which was removed from the dataset before analysis was started. The remaining 12 categories were collapsed down to 6 using the following broader headings drawn from the Welsh Government guidance document for the SSDA903 return:

- Care Orders (using those coded both Care Orders and Interim Care Orders)
- Adoption (including both Freeing Orders and Placement Orders)
- Voluntary accommodation
- Detained on child protection grounds (Police Protection Order (PPO), Emergency Protection Order (EPO) and Child Assessment Orders)
- Youth Justice (Remanded, Detained under PACE, CYPA 1969 supervision order)
- Wardship

Of the 10542 children and young people who experienced first periods of care during the 6-years covered by the data and who were placed in residential settings, the numbers that became 'looked after' based on the six categories of legal status outlined above are summarised in table 10. In terms of children and young people whose placement relates to adoption or wardship, there were no cases at first entry so these categories are not included in analysis.

**Table 10: Number of children placed in residential provision at first entry by legal status**

	Care Order	Youth Justice	Detained CP	Voluntary
Secure Unit	*	42	*	*
Children's Home	8	*	17	273
Other Hostel	*	0	0	19
Care Home	*	*	0	48
NHS	117	0	22	38
Mother and Baby	23	0	0	32
YOI	0	15	0	*
School	*	*	*	63
Total	157	65	41	478

Cells with less than 5 children have been suppressed and replaced with a \*

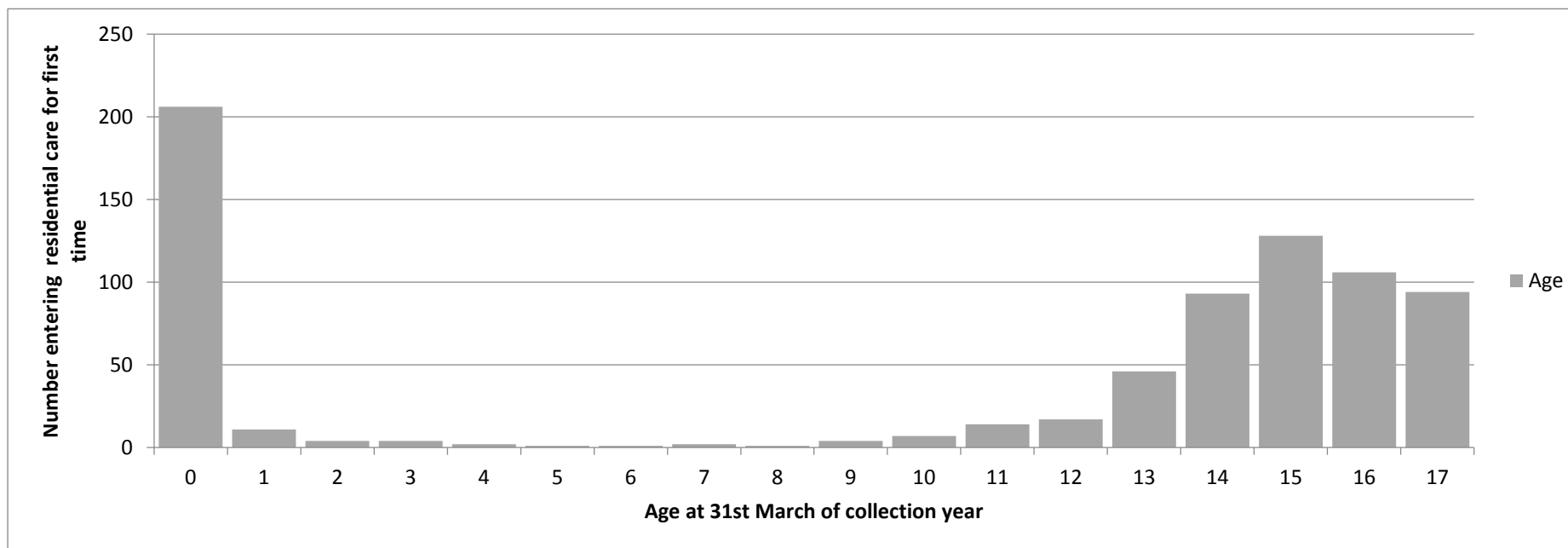
Of the 741 children and young people placed in residential provision on first entry to care, 478 (64.5%) did so on the basis of voluntary accommodation under S.20 of the Children Act 1989. The next largest group are those children and young people who entered care as a result of a care order, either interim or full. These children accounted for 21.2% of all those placed in residential settings at first entry to care. Of the 177 children placed in NHS/Health Trust provision, 139 (78.5%) were placed on the basis of a Care Order, Police Protection Order (PPO), or Emergency Protection Order (EPO). In contrast, of the 303 children and

young people placed in a children's home, 90% were voluntarily accommodated under S.20 Children Act 1989.

**Table 11: Number of children placed in residential provision at first entry by age**

	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	Total
Secure Unit	0	0	0	0	0	0	0	0	0	0	0	0	0	*	6	15	13	9	47
Children's Home	*	0	0	0	0	0	0	*	*	*	*	9	10	26	63	73	65	47	303
Other Hostel	0	0	0	0	0	0	0	0	0	0	0	*	0	*	*	*	*	10	23
Care Home	0	0	0	0	0	0	0	0	0	0	0	*	*	*	9	18	10	7	52
NHS	157	6	*	*	*	0	*	0	0	0	0	0	0	*	*	*	0	*	177
Mother and Baby	47	*	*	*	0	0	0	0	0	0	0	0	0	0	0	0	0	0	55
YOI	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	*	*	9	17
School	0	0	0	0	0	*	0	0	0	*	*	*	*	10	10	14	9	11	67
Total	206	11	*	*	*	*	*	*	*	*	7	14	17	46	93	128	106	94	741

Cells with less than 5 children have been suppressed and replaced with a \*



## AGE

Table 11 and the accompanying bar chart, summarise the age profile of children and young people placed in residential settings at first entry to care. Perhaps the most surprising finding of this analysis is that over a quarter (27.8%) of children and young people at first entry were under one year old. Of the remaining children, 87.2% were teenagers aged between 13 and 17 years in the year they became 'looked after'. For these children 15 years of age was the peak age for first entry, with over half (57%) of children of this age entering care for the first time during the six years being placed in children's homes.

## CATEGORY OF NEED

Table 12 provides a summary of the categories of need that underpin children becoming 'looked after' for the first time and being placed in a residential setting. The categories are drawn from the SSDA903 guidance document and are summarised on pages 19-20.

**Table 12: Number of children entering care for the first time by Category of Need**

	N1	N2	N3	N4	N5	N6	N7	N8	N9	Total
Secure Unit	8	*	0	*	*	31	0	*	0	47
Children's Home	42	31	7	74	63	65	0	20	*	303
Other Hostel	*	*	0	*	*	*	0	*	0	23
Care Home	*	7	0	12	8	13	0	8	0	52
NHS	149	*	*	*	15	0	0	6	0	177
Mother and Baby	35	0	*	*	14	0	0	0	0	55
YOI	*	0	*	0	*	12	0	*	0	17
School	8	38	0	6	7	7	0	*	0	67
Total	252	84	15	98	115	133	0	43	*	741

Cells with less than 5 children have been suppressed and replaced with a \*

As highlighted in the section on exits from residential settings, the largest category of need under which children and young people enter care for the first time is as a result of abuse and neglect. Over a third (34%) of all cases entered care for the first time do so on this basis. If these cases are combined with those children who entering as a result 'Family Dysfunction' (N5), as we did in the section on exits from care, these cases account for almost half (49.5%) of all those being placed in residential settings at first entry to care. The next largest category of need, are those children and young people whose needs stem from their Socially Unacceptable Behaviour (N6). The 133 children and young people in this category account for 17.9% of all first entries.

Of those children and young people placed in a school setting, just over half (56.7%) do so as a result of the child and their family's need for services arising from the child's disability or intrinsic condition (p.26).

The table also highlights that of those children placed in NHS/Health Trust provision almost all (92.7%) are placed on the basis of either abuse or neglect (N1) or family dysfunction (N5). Similarly, those children placed in mother and baby placements are predominantly placed in

this type of provision as a result of the same needs, with 89% of cases being as a result of abuse/neglect or family dysfunction.

### PLACEMENT TYPE AT SECOND ENTRY TO CARE

The type of residential setting a child or young person was placed in on entry to public care for the second time during the period covered by the data is presented in table 13 (NB. The first period of being 'looked after' may or may not have been in a residential setting).

**Table 13: Number of children placed in residential provision at second entry by placement type**

	Number
Secure Unit	16
Children's Home	149
Other Hostel	13
Care Home	35
NHS	7
Mother and Baby	6
YOI	6
School	51
<b>Total</b>	<b>283</b>

In contrast to children and young people becoming 'looked after' and being placed in a residential placement on first entry to care during the six years covered by the data, at second entry, children being placed in NHS/Health Trust provision only account for 2.5% of entries. This represents an almost ten-fold reduction on entries into this type of provision at first entry (23.9%).

### SEX AT SECOND ENTRY TO CARE

The sex of children and young people placed in a residential setting on becoming 'looked after' for the second time during the period covered by the data is presented in table 14.

**Table 14: Residential placement type at second entry by sex**

	Number		Total	Percentage	
	Boys	Girls		Boys	Girls
Secure Unit	14	*	16	87.5	12.5
Children's Home	94	55	149	63.1	36.9
Other Hostel	9	*	13	69.2	30.8
Care Home	18	17	35	51.4	48.6
NHS	*	*	7	57.1	42.9
Mother and Baby	*	*	6	33.3	66.7
YOI	6	0	6	100.0	0.0
School	44	7	51	86.3	13.7
<b>Total</b>	<b>191</b>	<b>92</b>	<b>283</b>		

Cells with less than 5 children have been suppressed and replaced with a \*

As identified in the analysis of first entries, in the case of the majority of types of residential placements, at second entry to care, boys represent the highest proportion of those becoming 'looked after'. In the case of second entries, the exception to this is in terms of children placed in mother and baby provision. However, this is a very small number of cases. With regard to certain types of provision such as; secure units, youth offending institutions and residential schools; as at first entry these are settings where boys predominate.

## LEGAL STATUS

Table 15 summarises the legal basis on which children and young people entering the 'looked after' system for the second time during the period covered by the data are placed in residential settings. As with this data on first entry, during the six years covered by the data, no children were placed in residential settings at entry to care with a legal status related to adoption or wardship and therefore these categories were removed from the analysis.

**Table 15: Number of children placed in residential provision at second entry by legal status**

	Care Order	Youth Justice	Detained CP	Voluntary
Secure Unit	*	14	0	0
Children's Home	*	*	*	140
Other Hostel	0	*	0	12
Care Home	*	*	*	31
NHS	7	0	0	0
Mother and Baby	*	0	0	*
YOI	0	6	0	0
School	*	0	0	49
Total	17	27	*	236

Cells with less than 5 children have been suppressed and replaced with a \*

Perhaps the most striking characteristic identified by the table above is the high proportion of children and young people placed in residential settings on second entry to care who do so on the basis of voluntary accommodation. Of the 283 children included in this wave of the analysis, 236 or 83.4% were placed under S.20 of the Children Act 1989. Youth Justice made up the next biggest category, accounting for 11.4% with the majority placed in either secure units or youth offending institutions. Care orders, which accounted for 21% of children placed in residential settings at first entry, only account for 6% at second entry.

## AGE AT SECOND ENTRY TO CARE

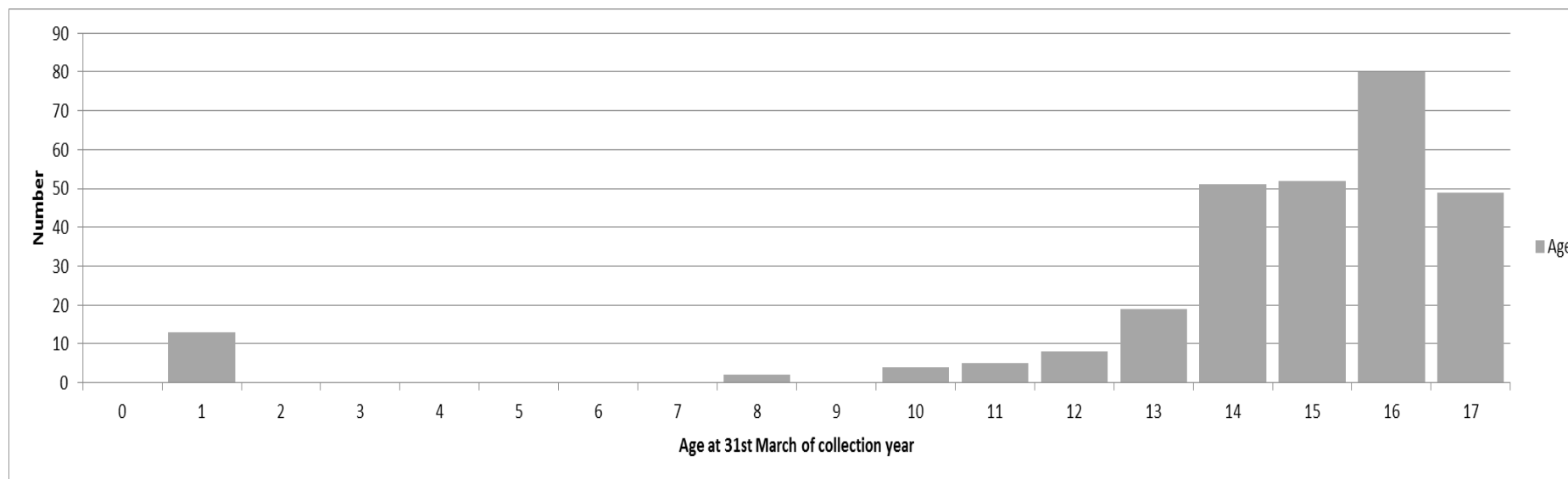
Table 16 and the accompanying bar chart, summarise the age profile of children and young people placed in residential settings at second entry to care.



**Table 16: Number of children placed in residential provision at second entry by age**

	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	Total
Secure Unit	0	0	0	0	0	0	0	0	0	0	0	0	0	*	*	*	*	*	16
Children's Home	0	*	0	0	0	0	0	0	*	0	*	0	6	10	30	26	47	27	149
Other Hostel	0	0	0	0	0	0	0	0	0	0	0	0	0	0	*	*	7	*	13
Care Home	0	0	0	0	0	0	0	0	*	0	0	0	*	*	*	11	10	*	35
NHS	0	6	0	0	0	0	0	0	0	0	0	0	0	0	*	0	0	0	7
Mother and Baby	0	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	6
YOI	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	*	*	*	6
School	0	0	0	0	0	0	0	0	0	0	*	*	*	*	12	9	9	8	51
Total	0	13	0	0	0	0	0	0	*	0	*	*	8	19	51	52	80	49	283

Cells with less than 5 children have been suppressed and replaced with a \*



With the exception of a small number of one year olds becoming 'looked after' as a result of being placed in NHS or mother and baby provision, the age profile provided by table 16 is perhaps nearer to what would be expected when thinking about residential provision. Those being placed in residential settings on entry to care for the second time are predominantly teenagers, with the highest number being young people who were 16 years old within the collection year in which they became 'looked after'. The majority of these young people were placed in children's home provision.

## CATEGORY OF NEED

Table 17 provides a summary of the categories of need that underpin children becoming 'looked after' for the second time during the period and being placed in a residential setting. The categories again are drawn from the SSDA903 guidance document and are summarised on pages 19-20.

**Table 17: Number of children entering care for the second time by Category of Need**

	N1	N2	N3	N4	N5	N6	N7	N8	N9	Total
Secure Unit	0	*	0	0	*	13	0	*	0	16
Children's Home	20	12	*	35	42	30	0	8	*	149
Other Hostel	*	0	0	*	*	*	0	*	0	13
Care Home	*	*	*	8	7	8	0	*	0	35
NHS	*	*	0	0	*	0	0	0	0	7
Mother and Baby	*	0	0	0	*	0	0	0	0	6
YOI	0	0	0	0	0	*	0	*	0	6
School	6	29	0	*	6	*	0	*	0	51
Total	39	46	*	48	65	66	0	16	*	283

Cells with less than 5 children have been suppressed and replaced with a \*

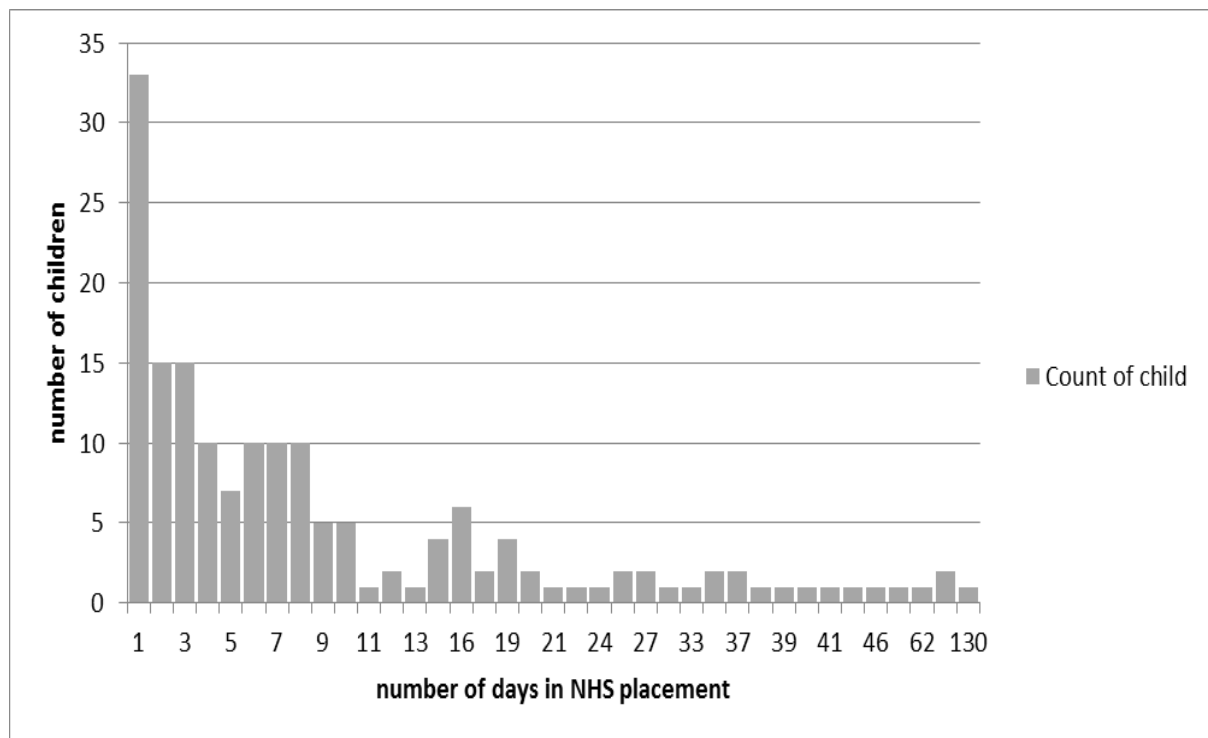
Unlike at first entry, where abuse and neglect (N1) was the largest single category of need, at second entry there are a number of categories of need with higher numbers. However, when combined with Family Dysfunction (N5) as previously these children still make up the largest proportion of children being placed in residential settings at second entry to care accounting for 36.7% of entries. This is a decrease from the almost half of all children entering care into residential provision at first entry. The largest single category of need within this wave of entries, are young people placed on the basis of Socially Unacceptable Behaviour. Young people being placed on this basis make up almost a quarter (23.3%) of all placed.

## ADDITIONAL ANALYSIS OF NHS/HEALTH TRUST PLACEMENTS AT FIRST ENTRY

Perhaps one of the most interesting groups of children placed in residential settings identified by this analysis is those children placed in NHS/Health Trust provision. At first entry to care these children account for 23.9% of placements into residential settings. These are very young children, with 163 of the 177 being placed in this setting being one year old or younger in the year they entered care. The reason for their entry to care is predominantly as a consequence of the risk of abuse or neglect with 149 becoming 'looked

after' for this reason and a further 15 as a response to chronically inadequate parenting. Together these cases account for 92.7% of all cases entering this type of setting. The majority of these children also become 'looked after' as a consequence of care orders or as a result of being detained on child protection grounds (Emergency Protection Order, Police Protection Order) rather than voluntary accommodation, with only 38 of 177 becoming 'looked after' on a voluntary basis. This group of children appear not to remain in an NHS setting for long. As illustrated by Graph 1 the majority of children only appear to remain in these placements for a matter of days or weeks. In fact of the 166 children who had left their placements by the end of the data collection period in March 2014, 70 children or 42% did so within 7 days. Of those placed at first entry, over three quarters left within 14 days. A small proportion of these children do however remain for longer periods with 17 children remaining for longer than a month.

**Graph 1: number of days in an NHS/Health Trust setting at first entry to care**



However, the end of episodes of care in NHS settings does not indicate ceasing to be 'looked after' in the case of these children. Of the 166 who have episode end dates within the data, all but three started new episodes on the same day (coded X1) indicating that they remained 'looked after', but changed placement to another setting. This would seem to tie in with the very small numbers of children ceasing to be 'looked after' from this type of setting identified in section 3. Given that these children are predominantly subject to child protection procedures and given their young age, it would seem reasonable to assume that these children are moved either to foster placements or are placed at home under placement with parent regulations.

## 5. CHILDREN MOVED TO A RESIDENTIAL SETTING WHILST IN CARE

The two previous sections explored the characteristics of children and young people placed in residential settings, either at the point of becoming 'looked after' or where they were in a residential placement at the point at which a period in care ended and they ceased to be 'looked after'. This section of the analysis will consider those children and young people who, whilst already 'looked after', moved from some form of family placement into a residential setting. It will also consider the characteristics of those children who during the six years covered by the data moved in the opposite direction, moving from a residential setting into a family placement.

Within this section of the report the description of what constitutes a family placement is based on the codes used within the SSDA903. This categorises these placements in the following groups: foster placements, both within and outside the local authority boundary; children placed for adoption, either with their current foster carer or with someone else (either with consent or with a placement order); children placed with their own parents or other person with parental responsibility; independent living, including living with friends; and residential employment.

There were 936 instances within the six years covered by the data of children and young people experiencing a change in either placement, or both placement and legal status, which saw them move from a family placement to a residential setting. These instances of placement changes were experienced by 821 children and young people. These 821 cases of children moving from family placements to residential care for the first time during the period, provide the sample used within this part of the analysis and represent 87.7% of all instances of children making this type of placement move during this six year period.

### PLACEMENT TYPE

Table 18 provides a summary of the types of residential settings that children and young people were moved to from a family placement.

**Table 18: Number of children placed in residential setting on moving from family placement**

	Number
Secure Unit	27
Children's Home	485
Other Hostel	51
Care Home	110
NHS	13
Mother and Baby	72
YOI	24
School	39
Total	821

Of those children who moved from a family placement setting to residential care, the largest number were moved to a children’s home (59%). The next largest group of children are those moving to some form of care home provision, representing 13% of children that moved to residential care during the period. ‘Care Homes’ within the SSDA903 are defined as residential care homes and nursing homes which fall within the scope of the Registered Homes Act 1984. As such they usually provide an element of personal or nursing care.

## LEGAL STATUS

Table 19 provides a summary of the legal status of children and young people at the point they moved between a family placement and a residential setting.

**Table 19: Number of children moving to a residential setting by legal status**

	Care Order	Youth Justice	Voluntary
Secure Unit	13	*	10
Children's Home	246	*	231
Other Hostel	33	0	18
Care Home	63	0	46
NHS	6	0	7
Mother and Baby	51	0	21
YOI	16	*	6
School	19	0	20
Total	447	10	359

Cells with less than 5 children have been suppressed and replaced with a \*

The range of legal basis which underpin a child’s current period of being ‘looked after’ appears to be much narrower at the first time they move from a family placement to a residential setting than for example at first entry to care. A very small number of children have a legal status that relates to either their adoption or being detained on child protection grounds. All the other children and young people have a legal status that relates to them either being on a care order, remanded to the care of the local authority by the courts, or being accommodated under S.20. One characteristic of note is that unlike at first and second entry to care, where voluntary accommodation under S.20 of the Children Act 1989 is the predominant legal basis for a children being ‘looked after’ and placed in a residential setting, at the point a child has a placement move to a residential placement the largest proportion of those children moving between provisions are those placed under care orders. At first and second entry to care those children placed under a care order represented 21% and 6% respectively, of those children moving between family placements and residential provision they represent 55%.

## AGE

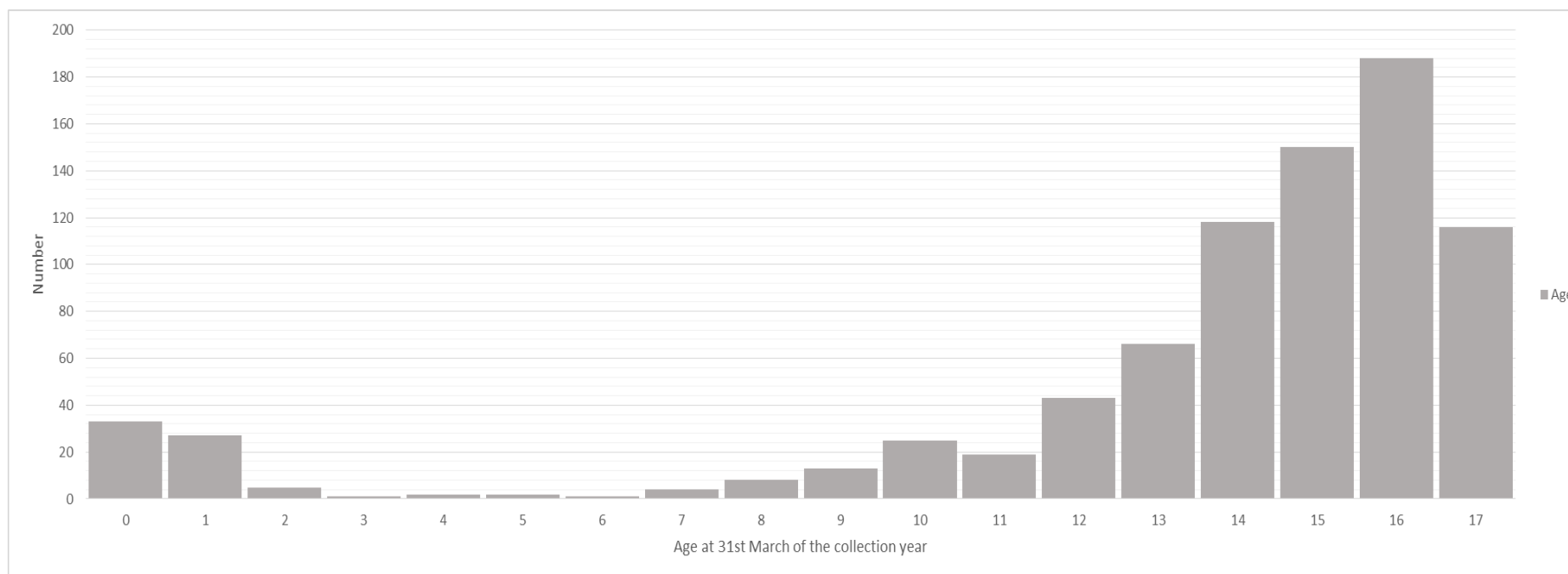
Table 20 and the accompanying bar chart provide a summary of the age profile of children and young people at the point they moved from a family placement for the first time during

the six years covered by the data. The graph and accompanying table shows a small number of very young children moving from family placements to mother and baby units or family centres. It seems reasonable to surmise that these are children who were either previously placed at home under placement with parents' regulations or were in foster placements and their move to this type of residential setting is as part of ongoing rehabilitation or assessment work. The peak age for young people to move from a family placement to a residential one is when they are 16 years of age within the collection year, with these children representing almost a quarter (22.9%) of those moving placements in this direction.

**Table 20: Number of children moving to residential provision from a family placement by age**

	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	Total
Secure Unit	0	0	0	0	0	0	0	0	0	0	0	0	0	*	*	7	10	*	27
Children's Home	0	*	0	0	0	*	0	*	*	7	9	13	30	50	82	105	128	52	485
Other Hostel	0	*	0	0	0	0	*	0	0	0	*	*	*	*	9	*	12	19	51
Care Home	*	0	0	0	0	0	0	*	*	*	7	0	9	10	14	29	19	13	110
NHS	*	0	*	0	0	0	0	0	0	0	*	0	0	0	*	*	*	*	13
Mother and Baby	31	25	*	*	*	*	0	0	0	*	0	0	0	0	0	0	*	*	72
YOI	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	8	16	24
School	0	0	0	0	0	0	0	0	0	*	6	*	*	*	8	*	*	*	39
Total	33	27	*	*	*	*	*	*	8	13	25	19	43	66	118	150	188	116	821

Cells with less than 5 children have been suppressed and replaced with a \*



## CATEGORY OF NEED

The predominant category of need of those children moving from family placement to residential care is summarised in table 21.

**Table 21: Number of children moving to residential settings by Category of Need**

	N1	N2	N3	N4	N5	N6	N7	N8	N9	Total
Secure Unit	13	0	0	*	*	6	0	0	0	27
Children's Home	242	8	8	75	82	42	*	22	*	485
Other Hostel	34	*	*	*	7	*	0	*	0	51
Care Home	59	*	*	13	22	7	0	*	*	110
NHS	*	0	0	*	*	*	0	*	0	13
Mother and Baby	48	0	*	7	14	*	0	0	0	72
YOI	11	0	*	*	*	6	0	*	0	24
School	16	6	*	*	*	*	0	0	0	39
Total	427	17	19	114	137	69	*	31	6	821

Cells with less than 5 children have been suppressed and replaced with a \*

In comparison to the proportion at first or second entry to care, the percentage of children whose predominant category of need is either as a consequence of having been abused or neglected (N1) or having lived in families where the parenting capacity is chronically inadequate (N5) is much larger in those that have placement moves to residential care. Whilst at first and second entry these children accounted for almost 50% and 36.7 respectively, of those children that moved from a family placement to residential care for the first time during the six years these children account for almost 70% (68.7%) of this group of children.

## SEX

Table 22 provides a breakdown of residential placement types that children have moved to from family placements by sex. Of the 821 children and young people who experienced first placement moves from family to residential settings during the period, 461 (56.2%) were boys and 360 (43.8%) were girls. This varies slightly from the two-thirds to one-third split elsewhere in the analysis.

**Table 22: Number of children moving to residential settings by Sex**

	Number		Total	Percentage		Total
	Boys	Girls		Boys	Girls	
Secure Unit	14	13	27	51.9	48.1	100
Children's Home	266	219	485	54.8	45.2	100
Other Hostel	19	32	51	37.3	62.7	100
Care Home	60	50	110	54.5	45.5	100
NHS	6	7	13	46.2	53.8	100
Mother and Baby	38	34	72	52.8	47.2	100
YOI	23	*	24	95.8	4.2	100
School	35	*	39	89.7	10.3	100
Total	461	360	821			



Cells with less than 5 children have been suppressed and replaced with a \*

At first entry and second entry to care, boys represented the largest proportion of entries to residential care in the majority of placement types. The exception to this was in the case of placements to mother and baby units at second entry to care where there were proportionally more girls, although with only six cases the numbers are too small to draw any meaningful conclusions. In terms of children at the point of moving placements to residential care, girls are the highest proportion in terms of NHS/Health Trust provision, but again the numbers of cases are low. A further group of interest are those moving from a family placement to hostels and other supportive residential settings not subject to the Children's Home Regulations (Other Hostel), where again girls make up the larger proportion of those moving to this type of provision. The guidance classifies these settings as including hostels, foyers, YMCAs and lodgings, flats and bedsits with some level of advice and support provided by employed staff (Welsh Government, 2014). Although only accounting for 50 young people, of those moving from a family placement to this type of provision, almost two-thirds were girls.

## 6. CHILDREN MOVING FROM RESIDENTIAL CARE TO FAMILY SETTINGS

Earlier analysis identified those children and young people who exited from residential settings as a result of ceasing to be 'looked after'. However, there are another group of children who leave residential care, these being children who experience placement moves that see them move from residential settings to family placements. In order to be consistent the definition used of what constitutes a family placement are those types of placements coded as such within the SSDA903. For completeness this group of children and young people are included in the analysis.

During the period covered by the data there were 846 instances of children moving from residential settings to family placements experienced by 757 children and young people. The 757 children who experienced a first placement move from residential to family care between 2008 and 2014, which will analysed here, therefore represent almost 90% (89.5%) of all these types of placement moves.

### PLACEMENT TYPE

For this analysis the family placements were grouped as follows:

- Kinship care (foster placement with relative or friend, either inside or outside the LA boundary)
- Foster placement (provided by LA or other agency, either inside or outside the LA boundary)
- Adoption
- Placed with parents (or other person with parental responsibility)
- Independent living e.g. in a flat, lodgings, bedsit, B&B or with friends

**Table 23: Number of children placed in family placement on moving from residential care**

Kinship Care	36
Foster Placement	507
Adoption	*
Placed with Parents	107
Independent living	105
Total	757

Cells with less than 5 children have been suppressed and replaced with a \*

Of those children moving from residential care to family placement, two-thirds moved to a foster placement, either with local authority or independent fostering agency carers. The next largest group are those children placed with their own parents or another person with parental responsibility representing 14%.

## SEX

Table 24 provides a summary of the sex of children and young people moving from residential care to family placement by destination placement type.

**Table 24: Number of children placed in family placement on moving from residential care by sex**

	Number			Percentage		
	Boys	Girls	Total	Boys	Girls	Total
Kinship Care	14	22	36	38.9	61.1	100
Foster Placement	275	232	507	54.2	45.8	100
Adoption	*	*	*	50.0	50.0	100
Placed with Parents	67	40	107	62.6	37.4	100
Independent living	58	47	105	55.2	44.8	100
Total	415	342	757	54.8	45.2	100

Cells with less than 5 children have been suppressed and replaced with a \*

At entry to care (either for the first or second time) or upon ceasing to be 'looked after', boys represent the largest proportion of children placed in residential care in the vast majority of placement types. The exceptions to this are in relation to NHS or mother and baby type provisions. The proportions of boys and girls moving from residential to some form of family placement would appear to be closer than the broadly two thirds boys and one third girls seen overall within the residential population, although in most cases boys are still the largest group. In terms of one family placement type, Kinship Care placements, girls are being placed in this type of provision from residential care more than boys.

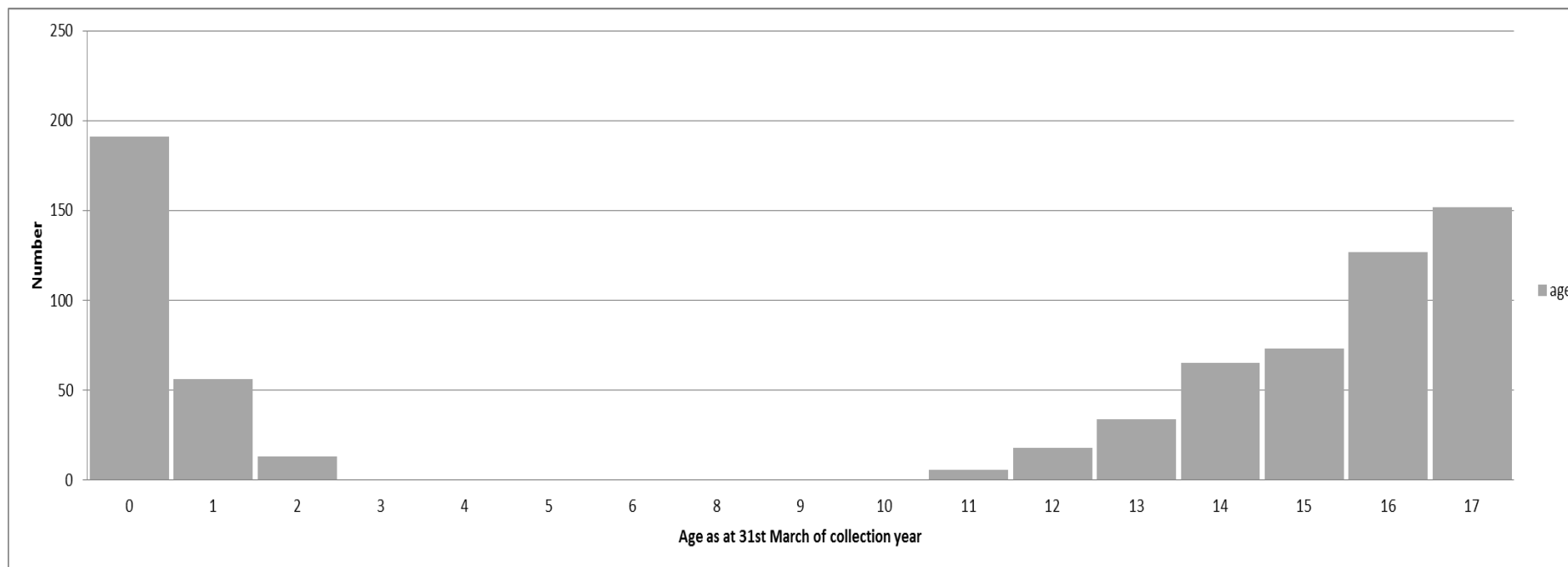
## AGE

The age profile of children and young people moving from a residential setting to a family placement for the first time is presented in table 25 and the accompanying bar chart.

**Table 25: Number of children moving from residential provision to a family placement by age**

	0	1	2	3	4	5	6	8	9	10	11	12	13	14	15	16	17	Total
Kinship Care	12	*	0	0	0	0	0	0	0	0	0	*	0	*	*	8	*	36
Foster Placement	164	35	8	*	*	*	*	*	*	*	6	17	33	56	64	63	42	507
Adoption	0	*	0	0	*	0	0	0	0	0	0	0	0	0	0	0	0	*
Placed with Parents	15	16	*	0	*	*	0	0	0	0	0	0	*	6	6	29	27	107
Independent living	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	27	78	105
Total	191	56	13	*	*	*	*	*	*	*	6	18	34	65	73	127	152	757

Cells with less than 5 children have been suppressed and replaced with a \*



The analysis of children placed in a residential setting at first entry to care during the period covered by the data, identified a relatively small but significant group of children placed in these settings at an early age. These children, predominantly subject to child protection procedures and ‘looked after’ under a care order, were not however represented in the data on children ceasing to be ‘looked after’ from residential care. This section of the analysis identifies that this group of children on leaving NHS or mother and baby provision are placed in family placements. Predominantly this is with foster carers, with smaller numbers being placed with parents (including others with parental responsibility) or kinship carers. This group (0-2 years) represent just over a third of the children that moved from residential care to a family setting during the period. Outside of this group young people move from residential care in increasing numbers throughout the teenage years with the peak being young people aged 17 during the collection year within which they moved. Of those 17 year olds that had placement moves, 50% moved to some form of independent living.

### CATEGORY OF NEED

The predominant category of need of those children moving from residential care to a family placement is summarised in table 26.

**Table 26: Number of children moving from residential care to family placements by Category of Need**

	N1	N2	N3	N4	N5	N6	N8	N9	Total
Kinship Care	24	0	*	*	6	*	0	0	36
Foster Placement	304	8	15	49	69	34	28	0	507
Adoption	*	0	0	*	0	0	0	0	2
Placed with Parents	74	*	*	10	15	*	*	0	107
Independent living	56	0	*	12	18	11	*	*	105
Total	459	9	22	74	108	50	34	*	757

Cells with less than 5 children have been suppressed and replaced with a \*

As highlighted elsewhere within this analysis, the group of children and young people who are ‘looked after’ as a consequence of having been abused or neglected (N1) or having lived in families where the parenting capacity is chronically inadequate (N5) represent the largest group and this remains the case. Of those moving to family placements, children whose predominant category of need falls into these groups represent almost 75%.

### LEGAL STATUS

Table 27 provides a summary of the legal status of children and young people at the point they moved between a residential setting and a family placement.

**Table 27: Number of children moving from a residential setting to family placement by legal status**

	Care Order	Youth Justice	Detained CP	Voluntary	Adoption
Kinship Care	28	0	0	8	0
Foster Placement	303	*	9	192	*
Adoption	0	0	0	0	*
Placed with Parents	105	*	0	*	0
Independent living without support	73	0	0	32	0
Total	509	*	9	233	*

**Cells with less than 5 children have been suppressed and replaced with a \***

Of those children moving placement from residential provision to family placement, over two-thirds (67.2%) are 'looked after' on the basis of a care order, whilst 30% are in voluntary accommodation. Youth Justice and children detained on child protection grounds represent only small numbers of children who experience these types of placement moves. This would seem noteworthy given that at first entry (64.5%) and second entry (83.4%), of children placed in residential settings, the majority were placed under voluntary arrangements. A higher proportion of children on care orders does however, mirror the findings in terms of children moving from family placement to residential care where 55% were on care orders.

## 7. SUMMARY OF FINDINGS

- There is arguably a tendency to use the terms children and young people placed in 'residential care' or placed in 'children's homes' interchangeably. Whilst children placed in children's homes, regulated under the Children's Home Regulations, constitute a significant proportion of those placed in residential settings they do not provide the whole picture in terms of children and young people placed in residential settings. Children placed in children's homes represent between 41% (at first entry to care during the 6 years covered by the data) and 59% (of those children who experienced a placement move from a family placement to residential care) of those placed in residential settings in Wales. Of those children who, on ceasing to be 'looked after', exited care from a residential setting, 52.3% did so from a children's home. This clearly suggests that conversely between 41% and 59% of children in residential care, dependent on when they are sampled, are placed in a range of residential settings.
- The proportion of children and young people placed in children's homes and in residential settings overall would appear to be lower in Wales than in England. On the 31<sup>st</sup> March 2015, 8% of children 'looked after' in England were placed in registered children's homes, at the same point in Wales children in this type of placement accounted for almost half that percentage (4.5%).
- The majority of children and young people placed in residential settings appear to be 'looked after' as a result of having been accommodated under Section 20 of the Children Act 1989. Of those ceasing to be 'looked after' for the first time, who exited care from a residential setting, 70.5% were placed in care under S.20. At entry to care the proportion of those placed under S.20 varies from 64.5% at first entry to 83.4% of those experiencing a second period of being 'looked after' during the six years.
- However, of those children that moved from a family placement to residential care, or who moved in the opposite direction whilst 'looked after', the majority were children and young people placed on a care order (55% and 67.5% respectively). This would perhaps suggest that those children with the most traumatic childhood experiences and the longest care histories are those mostly likely to make the transition between provision types in this way.
- For the majority of residential setting types, boys represent the largest proportion of those placed. The exceptions to this are placements in NHS or mother and baby provision, where girls are placed in proportionally higher numbers, although the numbers of cases at exit from care and second entry to care, where this was the case, are small. In terms of some residential provision types, such as youth offending institutions, boys make up almost the entire population (97.9% - 100%). In contrast, those children and young people placed in children's homes are split approx. 60% boys to 40% girls, dependent at which point this is measured. An overall split of two-thirds boys to one third girls in residential care in Wales is broadly consistent with findings from studies in England.

- The literature identifies the residential care population in England as consisting predominantly of young people in their teenage years. The findings of this analysis of children in residential settings in Wales reflect this. At first entry to residential care, 63% of those placed were between the ages of 13 and 17 years. Of those that had experienced a previous period of being 'looked after' and who subsequently returned to care in a residential setting, 88% were in this age group. Similarly, of those young people who experienced a placement change from a family placement to a residential setting, just over three quarters (77.7%) were in their teenage years.
- A significant outlier to this age profile is the substantial number of very young children placed in NHS or mother and baby provision at first entry to care. However, these children on the whole only remain in these placements for short periods with the majority then moving to family placement provision.
- Children and young people whose predominant need stems from abuse or neglect (including for the purposes of this analysis, children who have experienced chronically inadequate parenting classified as family dysfunction) make up the largest proportion of those placed in residential care. However, whilst they make up the largest group (42% of those leaving care from a residential setting) the categories of need which led to children being placed in residential care are wider ranging. At first exit from care, 20% of young people had needs related to their socially unacceptable behaviour; almost 16% as a result of acute family stress; and 13.3% were placed in order to meet the needs of a disabled child and their family.
- Of those children and young people who ceased to be 'looked after' for the first time during the period, and whose last placement was in a residential setting, the reason for exiting care for over a third (37.6%) was that they returned home. Almost 30% of cases were coded as 'period ceased for any other reason', which was the next biggest category. Of those children who experienced a second period in care and whose final placement at the end of that period was in a residential setting, the largest proportion were also those who returned home with over half (53.6%) having this outcome. It could be argued that there is a correlation between the high proportions of young people in residential care who are voluntarily accommodated in Wales and the percentage of children who subsequently return home.



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