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CORPORATE REPORT

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# Our mission and purpose

## Our Mission

To be a leading and independent voice in promoting a society where people with mental illness, learning disabilities, dementia and related conditions are treated fairly, have their rights respected, and have appropriate support to live the life of their choice.

## Our Purpose

We protect and promote the human rights of people with mental illness, learning disabilities, dementia and related conditions.

## Our Priorities

To achieve our mission and purpose over the next three years we have identified four strategic priorities.

- To challenge and to promote change
- Focus on the most vulnerable
- Increase our impact (in the work that we do)
- Improve our efficiency and effectiveness

## Our Activity

- Influencing and empowering
- Visiting individuals
- Monitoring the law
- Investigations and casework
- Information and advice

# **Corporate Parenting Plan**

## **Introduction**

The Commission welcomes its new role as corporate parent under the Children and Young People (Scotland) Act 2014. From our work with children and young people subject to mental health and incapacity legislation, we are aware of the increased mental health needs of looked after children and young people. Our aims in this plan are to embed our new role into our ongoing work; to learn more about this group of people, and about how our work can support them; and to raise any concerns or views we have about looked after children and young people with relevant services and policy makers.

This corporate parenting plan should be read in conjunction with the Commission's strategic plan and business plans. The strategic plan sets out the direction for the Commission. We continue to consult on the strategic plan and are confident that the plan clearly outlines the role and purpose of the Commission, sets out our main areas of work and the actions we intend to take to achieve our goals.

Our annual business plans outline the actions the Commission intend to take each year to achieve our strategy.

The National Confidential Forum is established as a committee of the Commission, but operates independently. The Forum is set up to hear and report on the experiences of people in institutional care as children. The reports of its work is part of seeking to improve the experience of current and future children in care.

## **Current work with children and young people**

The Mental Health (Care and Treatment) (Scotland) Act 2003 places a duty on health boards to provide sufficient services and accommodation for young people up to the age of 18 who require inpatient treatment. Monitoring the admission of young people to non-specialist settings, such as adult wards, and monitoring the inpatient care and treatment provided when children and young people are in hospital, have been priorities for the Commission since the legislation came into force. In carrying out this work, we endeavour to speak to as many young people as we can about their experience of inpatient care and treatment, some of whom will be, or have been, looked after children. We also -

- consider issues about services for young people during the process of preparing our annual business plan and deciding priorities for monitoring and themed visit programmes.
- include visits to individual young people subject to guardianship in our guardianship monitoring visit programme, as young people can be subject to guardianship orders after their 16<sup>th</sup> birthday.
- consider investigations into issues brought to our attention regarding the mental health care and treatment of individual children and young people. For example, should a deficiency in care that would have wide learning implications across agencies and professions be brought to our attention, we would consider investigating this further with a view to producing a national report with recommendations.
- participate in training for Mental Health Tribunal for Scotland tribunal members who will sit on tribunals dealing with child and adolescent cases.
- have appropriate input to national strategy groups which may be set up to look at specific issues relating to mental health services and young people.
- have formal information-sharing meetings with the Care Inspectorate and Healthcare Improvement Scotland. Relevant issues about services for children and young people are included on the agendas for these regular meetings.
- continue to develop links with national groups/organisations. This includes attending the Social Work Scotland Children and Families Committee, to update this committee on work the Commission is planning focussing on children and young people, and to find out if there are issues local authorities would want to bring to our attention. We are also in contact with the Commissioner for Children and Young People, and we have developed new links with third sector organisations who are involved with looked after children, such as Who Cares Scotland.

## Background

In March 2014 the Children and Young People (Scotland) Act 2014<sup>1</sup> received Royal Assent. The Act is underpinned by the Scottish Government's commitment to the United Nations Convention on the Rights of the Child 1989 (UNCRC)<sup>2</sup> and the national children's services improvement programme, Getting It Right for Every Child (GIRFEC)<sup>3</sup>.

Included in this legislation is an expanded list of corporate parents. Corporate parenting is defined in the statutory guidance on Part 9<sup>4</sup> as;

*An organisation's performance of actions necessary to uphold the rights and safeguard the wellbeing of a looked after child or care leaver, and through which physical, emotional, spiritual, social and educational development is promoted.*<sup>5</sup>

The Mental Welfare Commission (MWC) is included on the corporate parent list.

A Scottish Government working group is focussing on the implementation of the Act, and on developing guidance and regulations. The Commission will continue to respond to the various consultations on draft guidance and regulations on the Act as they are published.

## New role

In Part 9 of the Act, which came into effect on 1 April 2015, the Commission has the role of a corporate parent. As part of this responsibility we must produce a corporate parenting plan, and report on it at least once every three years. The plan must detail how the Commission will carry out the corporate parenting role within the current functions and parameters of the organisation. This document is our first full plan and report.

We are also listed as an Authority in schedule 1 of the Act and therefore have duties under Part 1. This part focuses on duties in relation to the rights of children and young people under the UNCRC. Part 1 duties began in 2017, with a first report expected in 2020. This report is additional to the report mentioned in the paragraph above.

<sup>1</sup> Scottish Government, Children and Young People (Scotland) Act 2014, Norwich, The Stationary Office, <http://www.legislation.gov.uk/asp/2014/8/contents/enacted>

<sup>2</sup> United Nations Human Rights, United Nations Convention on the Rights of the Child 1989, London, UNICEF.

<sup>3</sup> The Scottish Government, Getting it Right for Every Child 2006, <http://www.gov.scot/Topics/People/Young-People/gettingitright>

<sup>4</sup> Scottish Government, Children and Young People (Scotland) Act 2014: Statutory Guidance on Part 9: Corporate Parenting, Edinburgh, APS Group Scotland.

<sup>5</sup> Adapted from Sonia Jackson's definition of parenting presented in M. Davis (ed) (2000) The Blackwell Encyclopaedia of Social Work, Oxford, Blackwell and cited in the Scottish Government (2008) These are our Bairns: A Guide for Community Planning Partnerships on Being a Good Corporate Parent.

It is clearly stated in the corporate parenting guidance that the role encompasses the whole organisation, with collective responsibility for delivery of the corporate parenting plan. The responsibilities of the corporate parent are laid out in Section 58 of the Act.

## **National Data**

According to Children's Social Work Statistics Scotland 2013/14<sup>6</sup>, published in March 2015, there were 15,580 children looked after in Scotland. This dropped slightly in 2014/15 to 15,404. It has been well publicised that looked after children have a high incidence of mental health difficulties. In a 2007 paper Ford et al highlighted that, in Britain, young people in local authority care settings in particular have a higher rate of mental health difficulties than the wider population<sup>7</sup>.

In Scotland, the Information Services Division (ISD) of Scottish Government collect data on young people admitted to mental health in-patient beds. Included in this are the three regional inpatient units for the mental health care of 12 to 18 year olds and one national unit for 5 to 12 year olds. From this data collection, we are aware that 475 young people were admitted to mental health beds across the country in 2013/14<sup>8</sup>. There were approximately 21701 children and young people referred to child and adolescent mental health services (CAMHS) in Scotland in 2013/14<sup>9</sup>, but we are unable to separate out how many of these were for looked after children and young people.

The Commission does not provide direct services to children and young people, but can influence the provision of mental health services to this population. Under the Commission's statutory duties we are notified of all children and young people detained under the Mental Health (Care and Treatment) (Scotland) Act 2003 (MHA)<sup>10</sup>. Each year we report on the numbers of people detained by health board area in our annual report.

In 2016/17 we had notification of 247 detentions of children and young people under the MHA across Scotland. We were not informed if these were care experienced young people.

<sup>6</sup> Scottish Government, Children's Social Work Statistics Scotland 2013-2014, Edinburgh, APS Scotland.

<sup>7</sup> Psychiatric disorder among British children looked after by local authorities, comparison with children living in private households, Ford et al, British Journal of Psychiatry 2007, 190, pp319 – 125.

<sup>8</sup> Scottish Government, National Benchmarking Project, Child and Adolescent Mental Health, CAMHS Benchmarking Toolkit.

<http://www.isdscotland.org/Health-Topics/Quality-Indicators/National-Benchmarking-Project/Child-and-Adolescent-Mental-Health/>

<sup>9</sup> Scottish Government, National Benchmarking Project, Child and Adolescent Mental Health, CAMHS Benchmarking Toolkit.

<http://www.isdscotland.org/Health-Topics/Quality-Indicators/National-Benchmarking-Project/Child-and-Adolescent-Mental-Health/>

<sup>10</sup> Scottish Government, The Mental Health (Care and Treatment) (Scotland) Act 2003, Norwich, the Stationary office.

The Commission also monitors the numbers of children and young people admitted to non-specialist beds in hospital for treatment for their mental health. These are usually admissions to adult mental health beds or to general paediatric beds. Each time we are informed of such an admission, we ask the responsible medical officer (RMO) for the child during the admission to complete a monitoring form. The form provides us with detailed information about the admission. This information is then analysed and reported on in our annual report.

From 2016/17, as part of our new corporate parenting role, we changed our monitoring forms to include a question asking if the young person admitted to hospital had care experience. Of the 71 admissions of 66 young people to non-specialist inpatient beds in 2016/17, we were informed that eight had experience of being cared for by the local authority.

After receiving monitoring or any other information, we may also visit a young person who has been admitted to a non-specialist ward to ensure they are receiving age appropriate care and treatment, and have access to recreational activities and education, if appropriate.

## **Collaboration**

The Act places a responsibility on corporate parents to collaborate in the planning and implementation of their corporate parenting plan. As a non-service providing organisation, the Commission will benefit from collaborating directly with other corporate parents who do not provide direct services to children and young people.

We already meet on a regular basis with the Care Inspectorate and Healthcare Improvement Scotland. As part of our new corporate parenting role, we identified the Commissioner for Children and Young People, police, fire services, the Housing Regulator and the Scottish Social Services Council as additional prospective collaborators. In 2017, we became part of a national collaboration group between corporate parents. The group comprises of 10 corporate parents. In initial meetings, it has been agreed that we will now come together three times a year to discuss our work as corporate parents, and look at any further collaboration we can achieve in our organisations' work planning.

Collaboration will give us the opportunity to be more aware of what work others are doing in regard to looked after children and young people. We have also begun to discuss the possibilities of working more closely together where there would be benefit to the overall outcomes of the work being planned, as well as any direct benefits to care experienced children and young people. By collaborating, we will also be in a stronger position to challenge each other in our corporate parenting roles, and to address any issues that arise early.

Within the collaborative approach, we recognise the need to ensure we also have the input of young people to make sure we are working in a way they can engage with and



is effective in meeting their needs. To achieve this, in addition to our own visits to children and young people, we intend to work with Who Cares? Scotland in order to access young people's opinions as required.

Throughout all areas of work undertaken by the Commission focussing on children and young people, we will be alert to improvement and change. We will consider how to improve experiences of children and young people with mental health issues and learning disabilities, as we carry out our duties both within our statutory work and in collaboration with others.

## Corporate Parenting Plan 2018-2021

### Visits

We will continue to ensure we visit each of the regional in-patient units for young people with mental illness at least once per year. During these visits, we will now ask if there are any young people in the unit that have looked after experience and try to meet with them.

In undertaking our local visits across Scotland, we will now have a question, where appropriate, asking if individuals have looked after experience. We can then report on numbers of people seen with a looked after background. If we meet with a young person in a non-specialist ward, we will now ask if they have looked after experience. We will also have a question, where appropriate, asking if adults seen have any children who are looked after. This may lead to further questions regarding contact with the adult whilst they are undergoing treatment.

In all project planning for themed visits we will consider how to include looked after children. There are no current national themed visits planned specifically around children and young people, but some of our themed visit reports, such as the borderline personality disorder report which is underway in 2017/18, will include younger people.

We review our themed visits on an annual basis. If we have information from our work with young people in general that a specific themed visit to looked after young people would be useful to highlight their mental health needs and access to services, we will consider it in our annual business planning.

By identifying individuals as having had looked after experience, we can report on this data in our annual reports. If individuals are willing to tell us they have looked after experience, we will also have the opportunity to ask about and report on their experience in accessing mental health, or learning disability services.

It is of note that in 2015/16, although we did not have any themed visits specifically around children and young people, we did carry out a themed visit to perinatal services. Children in these services are not necessarily deemed looked after if separated from their mothers, however they may be viewed as such.

#### [Perinatal themed visit report: Keeping mothers and babies in mind](#)

In 2016/17 we carried out a visit to people experiencing homelessness. In focussing on questions about mental illness, we also asked whether individuals had care experience. Of the 43 people we met with, 14 told us they were care experienced. We reported this information along with further information on the impact of this in the report.

#### [Themed visit to homeless people with mental ill health](#)

## **Information**

In any reviews undertaken of Commission information specifically for children and young people, where appropriate, we will endeavour to consult with young people, including looked after young people, to ensure information is accessible for them. We will do this in partnership with third sector organisations.

After a review of the Commission telephone advice line in 2015/16, we wrote to agencies that support young people with mental health issues or learning disabilities to publicise the advice line to them, and to ask them to highlight it to the children and young people they work with.

The Commission will implement a recommendation from a local authority case review in 2015, following the death of a young person, to produce a good practice guide on capacity issues. This had been highlighted as a specific area of difficulty when caring for the mental health needs of young people. We are currently progressing consultations around this work with a view to publish the guidance later in 2018.

## **Influencing and challenging**

We will participate in and respond to consultations on policy and legislation, and national work, pertaining to the mental health needs of children and young people, including looked after children and young people. We will continue to discuss improvements to mental health services with Scottish Government in regard to the care and treatment of all children and young people, including the care experienced population.

We will challenge service providers on their delivery of mental health care to children and young people where necessary. We will also bring any poor practice to the notice of service providers, service regulators and where appropriate local and national government.

As we gain more information and experience of the looked after population, we will make specific recommendations, where appropriate, to services and policy makers to improve mental health needs and services.

## **Monitoring and evaluation**

The children and young people's group within the Commission<sup>11</sup> will continue to hold responsibility for all monitoring of work carried out in relation to children and young people, including those who have care experience

As already mentioned in reference to national data, in our monitoring of admissions of children and young people to non-specialist wards, the Commission now specifically asks if any of the children and young people admitted to these beds have care

<sup>11</sup> The Commission Children and Young Person's Group is an internal group of nursing, medical and social work practitioner staff who have experience of working with children and young people with mental health difficulties.

experience. The results of our monitoring are published in our annual monitoring reports, and as we gain more information and experience of the looked after population, we will consider further monitoring projects.

Work being carried out under the above headings will be monitored by the Executive Lead for Children and Young People, currently the Executive Director for Social Work, along with the practitioner lead for each specific piece of work. All work will be reported on annually in our annual report, and planning for future work will be included in the Commission business plan on an annual basis.

## Action Plan

Outcome1	Actions	Owners	Date	Progress
MWC will ensure the needs of care experienced children and young people are considered, including being alert to matters which may affect their wellbeing.	When setting out our business plan for coming years we will ensure we consider care experienced children and young people in our work commitments.	Executive Team	Ongoing	Ongoing
Outcome 2				
Ensure access to our services for care experienced children and young people.	In our review of our telephone advice line we will ensure staff are aware care experienced children and young people may call the advice line.	Kate Fearnley Executive Director, Engagement & Participation	June 2017	Complete
	We will write to agencies that support young people with mental health issues or learning disabilities to publicise the advice line to them, and to ask them to highlight it to the children and young people they work with.	Kate Fearnley Executive Director, Engagement & Participation	June 2017	Complete
	We will ensure on any local service visits that MWC staff ask that individuals with care experience are given the opportunity to meet with them. We will add information relevant to this in the pre visit letter sent to services.	Margo Fyfe, Nursing Officer	February 2018	Complete
	When on any visits, staff will ensure to ask if the individuals being visited have care experience and record this for reporting in the Commission's annual reports.	All practitioner staff	Ongoing	Ongoing
Outcome 3				
MWC will promote the interests of care experienced children and young people within the MWC work around mental health.	We will ensure we remain engaged with national work around mental health for children and young people.	Dr Ritchie Scott, Medical Officer, & Children & Young People's Group	Ongoing	Ongoing

	We will report statistics around care experienced young people we come in contact with in order to inform future work in this area by ourselves and wider agencies.	Dr Gary Morrison, Executive Director, Medical	Ongoing	Ongoing
Outcome 4				
MWC will seek to provide opportunities to participate in activities designed to promote the wellbeing of care experienced children and young people.	Through collaboration with other corporate parents, MWC will participate in information sharing and consider joint work within the collaboration group, where it seems appropriate.	Dr Ritchie Scott, Medical Officer	Ongoing	Ongoing
Outcome 5				
MWC will ensure that all staff, including Board members, understand and are aware of the needs of care experienced children and young people, and of our corporate parenting responsibilities.	Relevant Board members and managers to undergo refresher training around corporate parenting with Who Cares? Scotland.	Mike Diamond, Executive Director, Social Work	June 2018	
	Present Corporate Parenting Plan to practitioner forum and wider admin group.	Margo Fyfe, Nursing Officer	December 2018	
Outcome 6				
MWC will ensure that our Corporate Parenting responsibilities remain a corporate priority.	Business plan will signpost to the corporate parenting plan.	Alison McRae, Head of Corporate Services	February 2018	Complete
	Ensure governance of corporate parenting duties is overseen by the organisational management group and children & young people's group.	Alison McRae, Head of Corporate	February 2018	Complete
	Consider specific pieces of work around this group to promote their needs. (Revisit joint work with Care Inspectorate in future years)	Services Mike Diamond, Executive Director, Social Work	Ongoing	





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Mental Welfare Commission ( )