



# **ESTABLISHMENT OF A REGIONAL CARE AND JUSTICE CAMPUS**

**CONSULTATION DOCUMENT**

**October 2020**

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## MINISTERIAL FOREWORD

**Restricting the liberty of a child or young person is one of the most serious interventions that can be taken, making it essential that it is done only when absolutely necessary, for the shortest time possible and is subject to the strictest controls possible.**

**It has been made very clear from the Department of Justice Scoping Study which concluded in 2016 and more recently the Review of Regional Facilities for Children and Young People published in 2018, that we need to reform how we deliver juvenile justice and secure care services in Northern Ireland to, among other things, prevent some children and young people from moving from one service to another on a revolving door basis. Increasingly, children and young people are presenting with the most complex needs, resulting in some of them receiving a custodial sentence or requiring them to be admitted to secure care.**

**By establishing a regional Care and Justice Campus, we have dual aims, firstly to prevent some young people being deprived of their liberty in the first place and secondly, for those who are, to provide them with the highest level of service possible, capable of meeting their needs. The plan is that the secure element of the Care and Justice Campus will involve a repurposing of the existing Lakewood Secure Care Centre and Woodlands Juvenile Justice Centre sites and will provide a safe, secure and therapeutic environment focused on achieving stability and preparing for a return to the community in the shortest timeframe. To make this happen we also need effective multi-agency community services that complement the care in the secure centre, to ensure the transition back to the community is as seamless as possible.**

**This is a true partnership project, not only between the Departments of Health and Justice. It will also be supported by the Departments of Education, Economy and Communities. In terms of delivery, it will involve multiple agencies and disciplines working together, some of them in the secure centre but also in the community.**

**We fully recognise that this will require a significant change in how we think and how we do things. However, we consider that we are starting from a strong base and believe that by joining the forces of very dedicated and professional teams of staff, we have the capability to deliver so much more and, importantly, much improved outcomes for children and young people.**

**We would like to put on record our thanks and gratitude to every member of staff currently working with these vulnerable young children and to assure you that you will be involved in shaping the Campus every step of the way. We would also like to thank those of you who have helped us to develop our thinking to date, in particular the children and young people who are currently or were previously in the Secure Care or Juvenile Justice Centres.**

**This paper sets out a range of proposals which provide a new service model for a new Care and Justice Campus. We welcome your views to help us get this right and we will continue to engage with all relevant stakeholders in this process as we move to implementation phase of the Campus programme.**

**Finally, we would like to acknowledge that due to the NI Executive response to the COVID-19 Pandemic, there has been an unavoidable delay in progressing to this stage of the programme. However, as we now progress to public consultation we would like to reiterate our commitment to making this Campus happen within as short a timeframe as possible.**



**ROBIN SWANN MLA  
MINISTER OF HEALTH**



**NAOMI LONG MLA  
MINISTER OF JUSTICE**

## INTRODUCTION

This consultation seeks your views on proposals to establish a regional Care and Justice Campus for Northern Ireland. This was the primary recommendation of the Review of Regional Facilities for Children and Young People in Northern Ireland (“the Review”), commissioned by the then Health Minister in January 2017, with support from the then Justice Minister, and published in December 2018. The plan to establish a regional Care and Justice Campus also reflects a key proposal made by the Department of Justice Scoping Study into Children in the Justice System, completed in March 2016. The work to develop the proposals in this consultation document has been led by a cross-departmental, multi-agency Programme Board, jointly chaired by the Chief Social Worker in the Department of Health and the Director of Reducing Offending in the Department of Justice. The decision to proceed to consultation on these proposals has been taken jointly by the Health and Justice Ministers.

The proposals contained in this consultation document have been developed jointly by the Departments of Health and Justice, in consultation with relevant stakeholders including statutory authorities, academics, NGOs, staff and their representatives in both Lakewood and Woodlands, children and young people with experience of the Secure Care Centre and the Juvenile Justice Centre, and their parents and carers.

Sincere thanks are extended to all those who took the time to contribute their views to this process, in particular to the children and young people who provided honest and helpful input, and the members of the Programme’s Stakeholder Reference Group who facilitated this engagement—VOYPIC, Start360, Include Youth, NIACRO, Extern and Dr Colm Walsh at QUB who produced a very helpful summary report. The views expressed by children and young people during the engagement exercise are reflected throughout this consultation document.

The proposals are underpinned by the international and domestic legal and policy framework relating to the rights of children, their care and protection, and the responsibilities of relevant authorities in relation to those rights. Any decision to restrict the liberty of a child<sup>1</sup> is a serious step. Article 37(b) of the United Nations Convention on the Rights of the Child (UNCRC) requires States to ensure that no child is deprived of their liberty unlawfully or arbitrarily; and that the arrest, detention or imprisonment of a child shall be in conformity with the law and shall be used only as a measure of last resort and for the shortest appropriate period of time.

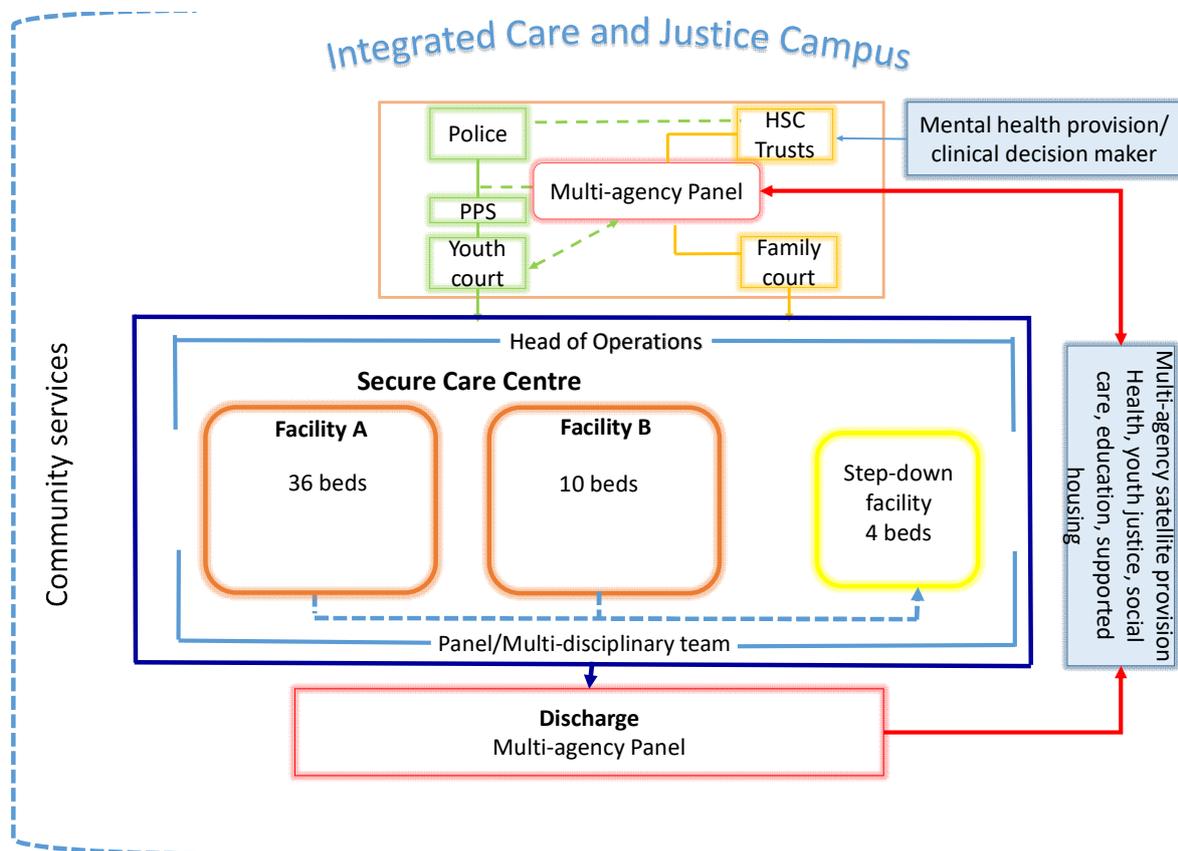
The proposals represent a significant change and the introduction of a unique partnership across Government Departments in supporting those children and young people who require time within a secure environment and their life after reintegration back into the community. The proposals detailed in the following sections therefore

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<sup>1</sup> The term “child” is used throughout this consultation document to refer to a person under the age of 18, as defined by Article 2(2) of The Children (Northern Ireland) Order 1995. While it is recognised that some older children do not see themselves as children and prefer the use of the term “young person,” the term child has been used for clarity when we are referring to people under the age of 18.

necessarily extend beyond the secure setting, and encompass wider community-based interventions. It is envisaged that a regional Care and Justice Campus will comprise (i) a Secure Care Centre made up of the existing Woodlands and Lakewood sites; and (ii) multi-agency satellite provision, including a step-down facility and community-based provision. A diagram representing the Campus design is included below which includes these individual elements of the Campus with the overall vision to provide a safe, secure and therapeutic environment for children and young people who cannot safely remain in the community.

**Figure 1 - The proposed design of the Care and Justice Campus**



Wherever possible, we want to prevent children from entering secure accommodation in the first place or, if a child cannot safely remain in the community, to ensure that a secure placement is for the shortest appropriate time, that a plan is in place from the earliest possible stage to support the child’s successful reintegration into the community and prevent re-entry to secure accommodation at a

future point. To support this, it will be essential that the coordination of services across organisational boundaries within the secure environment is complemented by equally coordinated, multi-agency services in the community.

For those children who cannot safely remain in the community and do require a period of time in a secure setting, the aim of the Secure Care Centre element of the Campus will be to provide a safe, secure and therapeutic environment focused on achieving stability and preparing for a return to the community in the shortest timeframe possible. All children placed in secure accommodation will receive an individually tailored support package in response to their assessed needs. A multidisciplinary therapeutic approach will be adopted to support planning and delivery of therapeutic intervention as well as consultation, training and support to staff.

It is essential that children feel supported and able to participate actively in decisions made about them, and the proposals for a regional Care and Justice Campus seek to ensure that the voice of the child is at the centre of decisions about admission planning, including planning to support their reintegration back into the community. As recommended by the Review, the proposals detailed in this consultation include the establishment of a multi-agency Panel which will have a decision-making role in respect of approving (or otherwise) a HSC Trust proposal to make an application to the Court seeking a Secure Care Order and an associated monitoring role. It is suggested that this Panel will be established in such a way as to enable the active participation of children and their advocates in its decision making.

Similarly, it is proposed that the care of children within the Campus will be supported by the introduction of a new Northern Ireland Framework for Integrated Therapeutic Care (NIFITC) across all settings where children are looked after. It is the intention that this framework will centre on a shared understanding of the impacts of trauma, and support children's recovery through relationally-focussed care, the identification of specific intervention and support needs and the implementation of a *team around the child* approach. The active participation of children and their families in all aspects of decision making about the child's care is recognised as an essential element of this proposed new framework.

The work of staff in both Woodlands and Lakewood must be commended. They perform a vital role in what can be very difficult circumstances, and we have heard from children, young people and their families and carers about the positive impact staff in both facilities have had on them. As well as helping to support the recovery of children from trauma, a key component of the proposed new NIFITC will be supporting staff through training and wellbeing programmes, to help them continue in the excellent work they do and continue to build and maintain positive relationships with the children in their care.

The establishment of a regional Care and Justice Campus introduces a number of proposals which may require new legislation or amendments to existing legislation to address. For example, the consultation document poses questions around the classification of the Campus; the legal status of children placed in the Campus; and

the governance arrangements within the Campus. Subject to the outcome of this consultation, legislation to establish the Campus will be developed.

The scope of this consultation is limited to children who may require to have their liberty restricted, either for their own safety or for the safety of others, whether this is for "care" reasons (children admitted to secure accommodation under the provisions of Article 44 of the Children (Northern Ireland) Order 1995<sup>2</sup>) or "justice" reasons (children who have been remanded or sentenced to custody, or are placed in the Juvenile Justice Centre as a place of safety, while awaiting a court appearance following arrest by the police). While it is recognised that many of these children have mental health needs which will require to be met within the new Campus, the consultation itself and the proposals for the Campus do not extend to children who require to be compulsorily admitted and detained for treatment under the Mental Health (Northern Ireland) Order 1986 and any child deprived of their liberty under the Mental Capacity (Northern Ireland) Act 2016.

In line with the agreed objectives for Phase 1 of the programme to establish the Campus, this consultation seeks your views on the service design and key principles which will underpin the operation of the Campus. This consultation marks Phase 2 of the Programme. Subject to the outcome of this phase, and further consideration by Ministers and the Executive, the Programme will move to Phase 3—implementation of the Campus. During this phase, the detail of how the Campus will operate in practice will be further developed in consultation with all relevant stakeholders. This will include consideration of the standards and regulatory framework within which the Campus will operate—including, for example, approaches to ensuring the safety and wellbeing of all children and staff, maintaining good order and managing difficult behaviour. Further targeted consultation on these operational matters will occur during the implementation phase.

All interested parties are encouraged to have their say on the proposals to establish the regional Care and Justice Campus. This consultation will run for 12 weeks from 21<sup>st</sup> October 2020 to 15<sup>th</sup> January 2021. An easy-read version of the consultation material will be made available. Should you require the consultation document in any other format, please contact [RegFacilitiesprogrammeteam@health-ni.gov.uk](mailto:RegFacilitiesprogrammeteam@health-ni.gov.uk).

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<sup>2</sup> <https://www.legislation.gov.uk/nisi/1995/755/article/44>

## 1. CURRENT ARRANGEMENTS FOR THE PROVISION OF SECURE CARE AND JUVENILE JUSTICE IN NORTHERN IRELAND

### Secure Care

Article 44 of the Children (Northern Ireland) Order 1995 (“the Children Order”) defines “secure accommodation” as “accommodation provided for the purpose of restricting liberty.” Under the provisions of the Children Order, a child who is being looked after by a HSC Trust may not be placed, and, if placed, may not be kept in secure accommodation unless it appears—

(a) *that—*

- (i) *he has a history of absconding and is likely to abscond from any other description of accommodation; and*
- (ii) *if he absconds, he is likely to suffer significant harm; or*

(b) *that if he is kept in any other description of accommodation he is likely to injure himself or other persons.*

The provisions of Article 44 of the Children Order are supplemented by the Children (Secure Accommodation) Regulations (Northern Ireland) 1996. These Regulations provide that a child under the age of 13 years shall not be placed in secure accommodation without the prior approval of the Department of Health. The Regulations also stipulate the maximum period of time beyond which a child to whom Article 44 applies may not be kept in secure accommodation without the authority of a court (an aggregate of 72 hours in any period of 28 consecutive days), provide for arrangements to review the placement of a child in secure accommodation, and prohibit the use of voluntary homes and private children’s homes for the purposes of restricting liberty.

Looked after children who satisfy the criteria set out in Article 44 of the Children Order, may be placed in secure accommodation by the relevant HSC Trust and kept there under an order granted by the family courts.

Lakewood Secure Care Centre is a regional service for children who have been assessed as requiring secure accommodation under the provisions of Article 44 of the Children Order. It can accommodate a maximum of 16 children across three secure homes—two with six beds each and one with four beds. Lakewood is located in Bangor and is the only dedicated secure care provision in Northern Ireland. The South Eastern HSC Trust is commissioned by the HSC Board to run the Centre.

Admissions to Lakewood over the last 5 years are shown in Table 1 below, including these admissions represented as a proportion of the looked after children population.

**Table 1: Total and repeat admissions to Lakewood Secure Care Centre 2014/15-2018/19 and represented as a proportion of the looked after children population**

	<b>Total admissions to secure care</b>	<b>Repeat admissions to secure care</b>	<b>Number of Children in care at 31 March</b>	<b>% of admissions to secure care during the year as a proportion of number of looked after children at year end</b>
2014/15	50	12	2,875	1.7%
2015/16	43	24	2,890	1.5%
2016/17	34	13	2,983	1.1%
2017/18	35	16	3,109	1.1%
2018/19	38	17	3,281	1.2%

Source: Delegated Statutory Functions Statistical Report

As shown in Table 1, the proportion of looked after children admitted to Lakewood Secure Care Centre has fallen since 2014/15 and there has been a general decline in the total number of annual admissions over the same period.

Over the five years from 2014/15 to 2018/19, 47% of children admitted to Lakewood were aged 16 and 17, 36% were aged 14 and 15, and 17% were aged under 14.

Running costs for Lakewood in 2018/19 were in the region of £4.88m<sup>3</sup> per annum.

### Juvenile Justice

The Youth Justice Agency (an Executive Agency of the Department of Justice) provides a range of statutory and non-statutory support services to children who offend, both within the community and in custody. Custodial services for children are provided at Woodlands Juvenile Justice Centre (JJC). This Centre accommodates children who have been remanded or sentenced to custody by the courts in Northern Ireland. Some children may also be placed in the Centre as a place of safety following arrest, under the provisions of the Police and Criminal Evidence (Northern Ireland) Order 1989 (PACE). Woodlands can accommodate a maximum of 48 children, although it is currently staffed and resourced to operate at a level of 36 children at any one time. Woodlands is also located in Bangor, close to the Lakewood site.

The Criminal Justice (Children) (Northern Ireland) Order 1998 and the Juvenile Justice Centre Rules (Northern Ireland) 2008 provide the legislative basis for the operation of the Centre. This legislation is complemented by the Human Rights

<sup>3</sup> Annual Trust Financial Returns (TFRs) (2018/19) South Eastern HSC Trust – Analysis of Expenditure Programme of Care 3. To note this represents a net figure.

Guidance for the Youth Justice Agency Conditions of Detention 2014 issued by the Attorney General for Northern Ireland under Section 8 of the Justice (Northern Ireland) Act 2004<sup>4</sup>. This guidance is designed to present a framework for professionals to use to ensure that their work is compliant with international human rights standards.

Table 2 shows the total number of admissions of children to Woodlands JJC over the last five years, broken down by the status of their admission.

**Table 2: Total admissions to Woodlands JJC 2014/15-2018/19**

Financial Year	Admission			
	PACE	Remand	Sentence	Total
2014/15	233	220	20	473
2015/16	204	126	21	351
2016/17	194	110	9	313
2017/18	269	139	16	424
2018/19	228	102	7	337
% of admissions over 5 year period	59.4%	36.7%	3.9%	100%

In 2018/19, the average total daily population in Woodlands was 18, down from 21 in 2017/18. The number of children who were admitted one or more times to the JJC has also dropped over the last five years, from 199 in 2014/15 to 160 in 2018/19- a reduction of almost 20%. Less than one young person in every thousand in Northern Ireland was involved with Woodlands in 2018/19.<sup>5</sup>

However, for looked after children, the rate of involvement with the JJC is much higher than for the general population. In 2018/19, 62 of the children involved with the JJC were looked after. Taking the total looked after population at 31 March 2019, this equates to a rate of almost 19 per one thousand looked after children who were involved with the JJC in 2018/19.<sup>6</sup>

Woodlands running costs are in the region of £9.075m per annum<sup>7</sup>.

<sup>4</sup> Guidance by the Attorney General for Northern Ireland pursuant to Section 8 of the Justice (Northern Ireland) Act 2004 Human Rights Guidance for the YJA Conditions of Detention (2014) can accessed at: <https://www.attorneygeneralni.gov.uk/sites/ag/files/human-rights-guidance-youth-justice-agency-on-conditions-of-detention.pdf>

<sup>5</sup> Northern Ireland Youth Justice Agency Annual Workload Statistics 2018/19: YJA Statistical Bulletin 2019 (NISRA: 2019) this includes portioned administration costs for YJA

<sup>6</sup> Directorate of Social Care and Children Delegated Statutory Functions Annual Corporate Parenting Report 2018/19 (HSC Board).

<sup>7</sup> Youth Justice Agency Annual Report and Accounts 2018/19. This figure includes apportioned administration costs for the Youth Justice Agency.

## 2. CASE FOR CHANGE

### Strategic context

The proposals detailed in this consultation document are underpinned by wider strategic priorities aimed at improving outcomes for children and young people in Northern Ireland, as well as the findings, recommendations and proposals emerging from recent studies and reviews.

#### Scoping Study on Children in the Justice System

In May 2015, the then Justice Minister, David Ford, announced the launch of a scoping study on children in the justice system. The proposals emerging from that study focused on putting welfare at the heart of the juvenile justice system, maximising community involvement and increasing exit points from the system, and developing the range of disposals available to the judiciary to make the use of custody a measure of last resort. A key proposal was the repurposing of Woodlands JJC to become part of a multi-unit interventions centre and develop alternatives to custody, including the development of overnight “calm-down” spaces and a step-down facility to enable children and young people to have a phased return to their community following intervention.

#### Review of Regional Facilities for Children and Young People<sup>8</sup>

In January 2017, following recommendations from an RQIA inspection and growing concern that children in care, often with the most complex needs, were spending periods of time within specialist facilities and sometime experiencing repeat admissions, the Department of Health and HSC Board—in collaboration with the Department of Justice—commissioned a review of existing Regional Facilities for Children and Young People.

The four specialist facilities included in the Review were:

- Donard House, a residential children’s home
- Woodlands Juvenile Justice Centre
- Lakewood Secure Care Centre
- Beechcroft, an inpatient hospital for children and young people.

The Review report was published in December 2018. While the Review identified a number of strengths across all four facilities, it also identified a number of areas for improvement, including inconsistent interfaces between—for example—youth justice and social services, high levels of repeat admissions and reoffending rates, and lack

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<sup>8</sup> The Review of Regional Facilities for Children and Young People in Northern Ireland is available on the DoH website at: <https://www.health-ni.gov.uk/publications/review-regional-facilities-children-and-young-people-review-report>.

of continuing therapeutic support following discharge from the facilities. It found that children admitted to each of the facilities often had needs in common, and that a number of children experienced admissions to more than one of the facilities.

Among the areas for improvement identified, the Review team found that therapeutic support services at Lakewood were under-resourced and identified issues associated with the classification of a Secure Care Centre as a children's home. For Woodlands, the Review Team drew attention to the high level of admissions under the Police and Criminal Evidence (Northern Ireland) Order 1989 and a lack of stepped discharge arrangements.

The Review made eleven recommendations across five broad themes. The primary recommendation was the establishment of a new integrated Regional Care and Justice Campus for Northern Ireland comprising the Secure Care Centre at Lakewood and the Juvenile Justice Centre at Woodlands. The Review team considered that the Campus should be capable of offering a short-term safe space at one end of the spectrum through to longer-term, high intensity, therapeutic support at the other. In making the recommendation, the Review team considered that integrating Woodlands JJC and Lakewood Secure Care Centre would lead to a more aligned model of service provision, which would significantly reduce placement moves between the two facilities, provide greater continuity for the children admitted, and make the best use of the available estate.

Linked to the establishment of the Campus, the Review also recommended the introduction of a regional, independently chaired Panel which would make decisions about admissions to the Campus (other than admissions directed by a criminal court or the police). The Review team considered that this Panel would help to ensure consistent and effective decision making, prevent inappropriate admissions, minimise placement moves, and ensure a consistent approach to the management of risk. The Review team recommended that the voice of the child should be represented on this Panel, either through direct involvement or through a competent advocate.

Recognising the important links between a Care and Justice Campus and wider residential care, the Review also recommended the early adoption of a single therapeutic model, including behaviour management techniques, across all residential children's homes in Northern Ireland. In addition, it recommended that work is undertaken to review staffing in children's homes, to ensure that staff have the right skill sets and training and are supported in the work they carry out.

### Improving Health Within Criminal Justice

In June 2019, the Departments of Health and Justice published a joint Strategy and accompanying action plan, to ensure that children, young people and adults within the criminal justice system are healthier, safer, and less likely to be involved in offending behaviour. The Strategy includes commitments to provide everyone in contact with the criminal justice system with improved continuity of care, access to

social services, options to divert them away from the criminal justice system where possible, and access to a range of accommodation options.

### Children and Young People's Strategy 2019-2029

The new Children and Young People's Strategy identifies eight outcomes to be achieved for all children and young people in Northern Ireland, specifically that they can:

- live in a society in which equality of opportunity and good relations are promoted;
- are physically and mentally healthy;
- enjoy play and leisure;
- learn and achieve;
- live in safety and stability;
- experience economic and environmental wellbeing;
- make a positive contribution to society; and
- live in a society which respects their rights.

This Strategy is being delivered by all nine government departments, and it is well recognised that achieving the desired outcomes will require departments, agencies and sectors to work together.

The Strategy identifies care-experienced children and young people, and children and young people in contact with the youth justice system, as requiring particular focus to help them learn and achieve, and to live in safety and stability.

### Draft Strategy for Looked After Children

The Department of Health, in conjunction with the Department of Education, is finalising a draft Strategy specific to looked after children and care-experienced young people: ***'A Life Deserved: "Caring" for Children and Young People in Northern Ireland'***. The Strategy will set out a range of measures aimed at improving outcomes for children and young people who may be on the edge of care, are in care, or have left care. Effective partnership working, co-design/ co-production approaches, a robust legislative framework and a skilled workforce are recognised as key enablers to delivering these improved outcomes. Actions identified within the draft Strategy include a commitment for the Departments of Health and Justice to work together to establish the new Regional Joint Care and Justice Campus; this will be supported by wider reform in children's residential care, foster care, community juvenile justice and enhanced family support.

Following a wide-ranging consultation in 2018, a further targeted engagement session with care-experienced children and young people took place in January 2020 to obtain their input on the latest version and a consultation analysis report has been completed. Once finalised, publication of the Strategy will be subject to the

agreement of the Health and Education Ministers and the wider Executive; it is hoped that publication will take place in the coming months.

### Improved stability and consistency of care

Following publication of the Review report, a working group was established to carry out an analysis of admissions of looked after children to each of the four facilities<sup>9</sup>.

This analysis found that, over the five year period between April 2014 to March 2019, 122 looked after children were admitted to Lakewood on 198 occasions and 229 looked after children were admitted on 841 occasions to Woodlands. Over the same period, 65 looked after children had between five and nine admissions to one or more of the regional facilities, accounting for a total of 433 admissions to the facilities. 18 children experienced ten or more admissions, accounting for a total of 268 admissions.

We know that children who enter secure accommodation are among some of the most vulnerable in our society, and many have very complex needs. The Review found that children admitted to both Woodlands and Lakewood had a history of a range of adverse experiences, including violence, sexual abuse, and substance misuse, and presented with conduct disorders such as self-harm, suicidal ideation, anxiety and depression<sup>10</sup>. Our understanding of the impact of trauma in early life has grown in recent years, and it is now recognised that children and young people who have experienced trauma may find it difficult to trust others and form positive and meaningful relationships. While many of the children and young people consulted as part of the development of the proposals for a new Campus spoke of the positive relationships they had built with staff in secure accommodation, frequent placement moves can be disruptive, serve to undermine the benefits of established relationships and leave children and young people feeling confused. While children move between Lakewood and Woodlands, they experience different approaches to their care, all aimed at meeting their needs but in different ways. We believe that the development of a new regional Care and Justice Campus—underpinned by more aligned and coordinated interventions in the community, as well as a consistent and integrated therapeutic framework across all looked after children settings—presents an important opportunity to respond more effectively and consistently to the complex needs of this vulnerable cohort of children, in a way which promotes safety and stability and can help build positive relationships, regulate emotional or behavioural issues, and support a range of improved outcomes.

### Increased effectiveness

While the population of Lakewood Secure Care Centre has remained broadly consistent over recent years, there has been a general reduction in the number of children in custody over the last five years. Over the years 2014/15 to 2018/19, the

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<sup>9</sup> Regional Review of Specialist Facilities – Recommendation 10 Progress Report (HSCB, November 2019)

<sup>10</sup> Review of Regional Facilities for Children and Young People in Northern Ireland (DoH, 2018), pp.39 & 43.

maximum monthly population in the JJC was 42 (in 2014/15). The minimum monthly population over the same five year period was seven (in 2018/19). The highest population level recorded in 2018/19 was 30. Of the total movements (that is, an admission or a change in status, such as from PACE to remand), almost half related to admissions under PACE. Of these, more than half were subsequently released without being remanded or sentenced to custody.<sup>11</sup>

As outlined in the previous section, annual running costs for Lakewood and Woodlands taken together total approximately £13.96m, both the Department of Health and Justice recognise that a great deal more could be done with this resource for the benefit of children and young people. As indicated, in creating the Campus, we have a number of mutually supporting policy aims, including preventing entry and re-entry into secure care where possible. Subject to us being successful, this creates the scope to redirect funding to preventative community-based interventions.

### Views of children

Some of the children who contributed their views to the Review spoke of being unsure of the implications of being admitted to one of the facilities, and that they had little control over or input to the decision. While for some, the facilities became like a second home, and they became familiar with the routines and what to expect, they also recognised the risk of becoming institutionalised and spoke of repeated admissions as indicators that something was not right. Some children remarked on the positive relationships that staff in the facilities had built with them, and the positive impacts of routine and meaningful activities. However, some raised concerns about the lack of support they received in the facilities. The issue of what happened when they left the facilities was an important one for some children, with opportunities missed to build on the positives of a period in secure accommodation by providing continued support on discharge.

These same issues emerge in further engagement with children and young people conducted as part of the development of design proposals for a Care and Justice Campus<sup>12</sup>. Some of the children who participated in this exercise pointed to the safety and structure provided by a secure facility, but felt that more could and should have been done to address problems in the community and prevent an admission to a secure setting. Some spoke of being admitted to secure care without any advance notice or communication about what this meant for them, and many recognised the importance of having a plan for discharge which ensured continuity of relationships and services such as health and education.

The next sections detail our proposals for a new Care and Justice Campus, which seek to address the findings and recommendations from the Review, and which take account of the views of stakeholders including the children and young people and their parents and carers who have contributed to this process. Building on what we

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<sup>11</sup> NI Youth Justice Agency Annual Workload Statistics 2018/19

<sup>12</sup> Review of Regional Facilities- Youth Consultation Report January 2020, Dr Colm Walsh, Queens University Belfast

have heard, the proposals go beyond the secure setting. Rather, they recognise that what happens in the community is more important in preventing children from reaching the point where an admission to secure setting is the only way to keep them or others safe. Also, if we recognise that agencies must work better together in a secure setting, then a more integrated way of working must be matched in the community. Therefore, as well as proposals for a new regional Care and Justice Campus comprising a Secure Care Centre, the proposals extend to preventing admission to the Secure Care Centre and to supporting children on discharge, in an effort to prevent their readmission.

A common theme that we have heard from the children and parents who have contributed to these proposals is that time spent in a secure environment can provide feelings of safety and stability that they did not have in the community. While this is a credit to all of those staff who work in the secure facilities, it should be a cause of concern for us all that, for some children, being in a secure environment is the only time they feel safe and experience a meaningful structure to their days. The proposals which follow seek to ensure that, for as many children as possible, this safety and security can be delivered in the community.

### 3. A REGIONAL CARE AND JUSTICE CAMPUS – OVERVIEW

The new Campus as described in the sections which follow will comprise a Secure Care Centre made up of the existing Woodlands and Lakewood sites, and multi-agency satellite provision, including a step-down facility and community-based provision. The intention is that all parts of the Campus will have access to existing community-based services operating in a coordinated way to respond to the needs of children. As recommended by the Review, it is proposed that a multi-agency Panel will be established to make decisions about admissions to the Secure Care Centre (other than by a criminal court) and to monitor the appropriateness of continued placement in the Centre. ***A graphic representation of this Campus design is provided at Figure 1 in the introduction to this document.***

In addition, a new relationship-based, trauma-informed therapeutic practice framework will apply in the Campus and across all settings for looked after children, including residential children's homes and foster care. This is a particularly important component of the new Campus proposals, and it will underpin much of what is being proposed both in terms of a new approach to secure accommodation and more integrated working in the community, including in the proposed satellite provision associated with the Campus. This trauma-informed approach reflects contemporary models for understanding complex needs and the aim is to ensure that the framework will align with and complement therapeutic approaches already in place or under development within relevant agencies..

Taken together, these proposals are aimed at providing effective community-based services as an alternative to a secure placement. Where a secure placement is considered essential for the child's own safety or the safety of others, the proposals are aimed at securing emotional and behavioural stability and facilitating a return to community-based services in the shortest timeframe possible. In the Secure Care Centre and across the Campus, children will be provided with individually-tailored interventions aimed at meeting their needs in a planned and coordinated way. For children placed in the Secure Care Centre, the intention is that this will include access to mental health and drug and alcohol services appropriate to their assessed needs, and delivered by a multi-disciplinary team based in the Centre, working collaboratively with community-based services.

The proposals being consulted on will have the potential to result in improved outcomes for some of the most vulnerable children in our society. Overall, it is hoped that the implementation of a Care and Justice Campus as described will enable more children and young people to be supported in the community, with fewer children requiring to be placed in secure accommodation for their own safety or the safety of others. Where a child does need to be placed in secure accommodation, the proposals aim to ensure that they will be safe and protected from harm and that they will experience safety and greater stability following discharge. Recognising the vital role of staff across the Campus, the proposals also aim to ensure that they are safe and supported to do their job.

## 4. THE SECURE CARE CENTRE

### **It is proposed that:**

- **the Secure Care Centre will be based in Bangor and will comprise the two facilities currently operating as Lakewood Secure Care Centre and Woodlands Juvenile Justice Centre.**
- **Each facility will be made up of separate houses. The larger of the two facilities (Facility A) will have six houses, initially with six beds each. The smaller of the two (Facility B) will have three houses—two with four beds and one with two beds. In total, the secure care centre will have 46 beds.**
- **Over time, the longer-term goal will be to reduce the capacity of the secure care centre so that no house accommodates any more than four children at any one time, giving a maximum capacity of 34.**
- **Consistent standards will apply across both facilities.**

The current maximum capacity of secure accommodation across both the Woodlands and Lakewood sites is 64. As shown in section 1, the number of admissions to both Lakewood and Woodlands has been on a general downward trend over recent years. During 2018/19, the maximum number of children in both facilities at any one time would have been 46.

However, an important objective of the Campus design proposals in the medium to longer term is to reduce the numbers of children entering secure accommodation. In line with Art 37(b) of the UNCRC, restricting the liberty of any child must be a measure of last resort. A number of elements of the Campus design proposals are aimed at ensuring that this is the case.

We also want the operation of the Campus to be underpinned by a consistent therapeutic approach aimed at providing safety and stability for children placed in secure accommodation, as well as across all settings for looked after children (see section 6). Ensuring that the Secure Care Centre is as calm and settled as possible will be critical to achieving and maintaining this therapeutic environment. Therefore, we are proposing that no house within the centre will initially have more than six children at any one time, with the intention to reduce this to a maximum of four within the two years of operation.

Currently, Lakewood and Woodlands are governed by different standards and regulatory/ inspection regimes. It is proposed that the new Secure Care Centre will operate to a consistent set of standards and practices. Subject to the outcome of this consultation, work will be undertaken with all relevant stakeholders to develop

and agree those standards and operating practices, including agreeing a consistent approach to ensure the safety and wellbeing of children and staff within the Secure Care Centre and managing difficult behaviour.

It is proposed that a Head of Operations will be appointed who will have responsibility for the day to day running of the Secure Care Centre, as well as for the on-site step down unit (see section 10).

#### **Questions**

- 1** *Do you have any comments on the proposal that the Secure Care Centre will comprise the existing Lakewood and Woodlands sites?*
- 2** *Do you have any comments on the proposed capacity of the Secure Care Centre?*
- 3** *What are your views on the longer-term aim of reducing the overall capacity within the Secure Care Centre, so that no child will be placed in a house with any more than three other children?*

**It is proposed that:**

- **Children will be admitted to the Secure Care Centre in one of two ways-either:**
  - **the criteria set out in Article 44 of the Children Order are satisfied;**
  - or**
  - **they are remanded or sentenced by the authority of a court.**
- **The Secure Care Centre will be designated as a place of safety for children who have been arrested and who need to be placed there following arrest, while awaiting their court appearance. However, admissions in this category should be kept to a minimum, and alternative accommodation options will be developed.**

As noted under Article 37(b) of the UNCRC<sup>13</sup>, the detention of a child should be ‘used only as a measure of last resort and for the shortest possible time’. The Havana Rules for the protection of juveniles deprived of their liberty also state that deprivation of liberty ‘should be limited to exceptional cases’<sup>14</sup>. These international standards aim to protect and safeguard the child in respect of an individual child’s right to liberty and security.

This is reinforced by Guidance and Regulations accompanying the Children (Northern Ireland) Order 1995 which states that ‘restricting the liberty of children is a serious step which must be taken only when there is no appropriate alternative. It must be a “last resort” in the sense that all else must first have been comprehensively considered and rejected...’<sup>15</sup>

Existing processes to place a child in Lakewood and Woodlands require the authorisation of a court. This reflects the serious nature of the decision making process in restricting the liberty of a child through either the Care or Justice systems. The integration of these two facilities will not diminish the seriousness of undertaking the responsibility to place a child in secure accommodation within the Campus. Therefore, it is proposed that existing admissions processes will remain in place.

Children will be placed in the Secure Care Centre through one of two main routes of admission:

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<sup>13</sup> <https://www.unicef.org.uk/what-we-do/un-convention-child-rights/?sissr=1>

<sup>14</sup> United Nations Rules for the Protection of Juveniles Deprived of their Liberty Available at <https://www.ohchr.org/EN/ProfessionalInterest/Pages/JuvenilesDeprivedOfLiberty.aspx>

<sup>15</sup> Children (NI) Order 1995 Guidance and Regulations Vol 4: Residential Care, p. 200.

- where the criteria set out in Article 44 of the Children Order<sup>16</sup> are satisfied (including instances on an emergency or potentially short term basis); or
- where they have been remanded or sentenced to custody by the authority of a court.

For children who have been arrested and are required to be kept in police detention prior to a court appearance, the Police and Criminal Evidence (Northern Ireland) Order 1989 (“the PACE Order”) requires that they should be taken to a place of safety and detained there, unless it is impracticable to do so. Currently, Woodlands JJC is designated as a place of safety under Article 39(8) of the PACE Order. Other such places of safety include any hospital or surgery, or any other suitable place, the occupier of which is willing to temporarily receive the arrested juvenile. However, in practice, Woodlands is the only place which is currently used.

It is proposed that the Secure Care Centre will continue to be used as a place of safety under the PACE Order. However, we want to keep the number of children admitted to the Secure Care Centre for this reason to an absolute minimum. Therefore, the Campus design proposals also include satellite provision which may be used as a place of safety under the PACE order.

#### **Questions**

- 4. Do you agree that the admissions criteria for the Secure Care Centre should be based on existing criteria, clarifying that children will be admitted to the Campus in one of two ways:**
  - *where the criteria set out in Article 44 of the Children Order are satisfied; or*
  - *where the child is remanded or sentenced by the authority of a court.*
- 5. Do you agree that the Secure Care Centre should continue to be used as a place of safety for children following their arrest, if this is required?**
- 6. Do you agree that the use of the Secure Care Centre as a place of safety should be kept to a minimum, and that alternative accommodation options should be developed?**
- 7. Do you think any changes are required to the existing criteria for admissions to secure accommodation under Article 44 of the Children Order?**
- 8. Are there any other comments you wish to make about the routes of admission to the Secure Care Centre?**

<sup>16</sup> Children (NI) Order 1995 Article 44 <https://www.legislation.gov.uk/nisi/1995/755/article/44>

## 5. MULTI-AGENCY PANEL

### **It is proposed that:**

- **A regional, independently-chaired multi-agency Panel will be established with responsibilities in relation to decision-making about admissions to the Secure Care Centre and associated monitoring responsibilities.**
- **Based on its monitoring activities, the Panel will form an opinion on the appropriateness of a child's continued placement in the Secure Care Centre.**
- **The Chair of the Panel will escalate any issues requiring resolution in relation to any child to the Head of Operations.**

In order to facilitate a consistent needs-based approach to the admissions process, it is proposed that a regional, independently-chaired multi-agency Panel will be established. It is envisaged that the Independent Chair of this Panel will work closely with the Head of Operations in the monitoring and decision making in respect of admissions and discharges to the Secure Care Centre and across the Campus; however, it is acknowledged that the Head of Operations will retain ultimate responsibility for the management and operation of the Secure Care Centre.

### [Decision making role in relation to admissions](#)

It is proposed that a regional, independently-chaired multi-agency Panel will be established which will have a decision-making role in relation to admissions to the Secure Care Centre in respect of children who HSC Trusts consider meet the criteria for secure accommodation as set out in Article 44 of the Children Order; and in respect of a child admitted to the Secure Care Centre on an emergency or potentially short-term basis.

While some children will continue to be admitted to the Secure Care Centre following a direction by a criminal court, it is proposed that there may be scope for the courts to make reference to the Panel in determining the most appropriate disposal for a child who has been involved in offending behaviour.

It is envisaged that this Panel will permanently replace the restriction of liberty panels that were in operation in each of the five HSC Trusts, prior to the establishment of the multi-agency Panel on a pilot basis. The Review team identified that this approach contributed to inconsistent decision making on admissions to secure care, and recommended the establishment of a regional Panel that would have the potential to deploy alternatives to a secure admission, prevent inappropriate admissions, minimise unnecessary placement moves, monitor in-centre care and

discharge and alongside the Head of Operations ensure a consistent approach to the management of risk.

### Monitoring role

It is proposed that the Panel, through the Independent Chair, will have an important role in working with the Head of Operations to ensure that an individually-tailored care plan is in place for each child or young person, and that this is kept under regular review during a child's stay in the Secure Care Centre through to discharge.

This is to ensure that the child is supported during their time within the Campus and, secondly, being satisfied that planning to facilitate the child's transition back to the community or to other services is in their best interests. An important aspect of the Panel's monitoring role will be to ensure that no child remains in the Secure Care Centre for longer than necessary, and certainly no longer than any court-mandated period of stay. If, through its monitoring activities, the Panel is not satisfied with a child's care plan, this will be escalated by the Independent Chair to the Head of Operations.

### Panel governance and membership

The Panel will have multi-agency representation involved in the provision of services within the Secure Care Centre, across the Campus and in the wider community. Agencies will be represented on the Panel to facilitate and promote a more effective integrated and collaborative approach, aimed at identifying alternatives to a secure admission where possible, providing coordinated interventions in the Secure Care Centre, and also providing seamless and coordinated support for children and young people leaving the Secure Care Centre.

It is acknowledged that decision-making by the Panel is significant and that the proposals raise questions around the responsibility for and management of children who the Panel decides should not be admitted to the Secure Care Centre. As a consequence, it is considered that the Panel needs sufficient authority to exercise its role and that this will require it to have a statutory basis.

It is proposed that key membership of the Panel will include senior representation from the following organisations:

- Independent Chair,
- HSC Board and Trusts,
- the Head of Operations (or nominated representative),
- The Youth Justice Agency,
- PSNI, and
- Education Authority.

In addition, the Panel will also encourage and facilitate the attendance of the individual child at the Panel alongside a competent advocate.

This multi-agency arrangement should promote a more collaborative and co-ordinated response to providing the most appropriate services aimed at improving the outcomes for children referred to the Panel, many of whom will have a range of complex needs. It is also intended that the voice of the child will be represented at every step of the process. The proposed make-up of the Panel facilitates the attendance of either a competent advocate to act on behalf of the individual child and/or the attendance by the individual child - if they agree and are willing to attend. Fundamentally the attendance of either the advocate, the child, or both parties at the Panel will provide the opportunity to have an active two-way engagement process whereby the Panel can listen to the voice of the child and enable the individual child to more fully understand the process, the potential outcomes for them and what that may involve.

Many of the proposals relating to the establishment of the multi-agency Panel are currently being tested. Following publication of the Review, the HSC Board established a multi-agency Panel for admission to secure care on a pilot basis in September 2019. Since the Panel has been in operation, its performance has been subject to ongoing assessment with a full evaluation of the pilot Panel due to be completed. The findings of this evaluation will inform final decisions about the specific functions, responsibilities and make-up of the Panel established as part of the new Care and Justice Campus. However, based on feedback to date, this new way of working is already demonstrating the potential to have a positive impact for children in terms of preventing admissions, ensuring that their voice is a key part of the decision-making process, and providing a more coordinated response to their individual needs.

An overview of the key findings is summarised below.

### **Pilot Multi-Agency Panel**

This new process for admissions to the Secure Care Centre reflects key elements of learning from the HSC Board pilot Multi-Agency Panel for Admission to Secure Care that was established in September 2019. This pilot Panel was established in response to Recommendation 5 of the Review Report which recommended that a workstream is established to deliver the establishment of a regional independently chaired Panel responsible for decision making relating to admissions to the new Campus [other than admissions directed by a criminal court or PSNI] and operated within the existing legislative framework for admissions to secure care.

The Multi-Agency panel has been fully operational since September 2019 with 38 panel meetings convened during period 1 September 2019 – 30 August 2020. This represents an average of 3 panel meetings per month. Comparing this to previous arrangements (prior to the establishment of the panel) we can see a reduction as each HSC Trust convened an average of 7 panels per month.

A total of 70 referrals (involving 45 children and young people) have been made to the pilot Panel during this period with the quorum of Panel members present at each Panel meeting.

Engagement of VOYPIC Advocacy service to ensure the voice of the child is represented as part of the Panel process has proved to be successful with more children also actively requesting to attend the Panel meetings as a result.

As the panel continues to operate, the ongoing assessment and evaluation of performance will continue. These outcomes and key learning will have a significant impact on the framing of the Multi-Agency Panel introduced for the Secure Care Centre within the Campus.

The children and young people who we have engaged with during this design and development phase have been particularly enthused by the prospect of establishing the Panel and the opportunity to have their voices heard as part of the decision making process<sup>17</sup>.

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<sup>17</sup> Review of Regional Facilities- Youth Consultation Report January 2020, Dr Colm Walsh, Queens University Belfast (p.11)

### **Questions**

- 9. Do you agree with the proposal to establish a regional, independently- chaired multi-agency Panel with the roles and responsibilities as described?**
- 10. Do you agree with the membership proposed?**
- 11. Do you think, in some cases, there may be scope for the courts to make reference to the Panel in determining the most appropriate disposal for a child who has been involved in offending behaviour?**
- 12. Thinking about the roles, responsibilities and make-up of the Panel as described, do you have any views on whether the Panel and its functions should be established in legislation?**
- 13. Do you think the Panel should have any other roles and responsibilities within the Campus, other than what is described here?**
- 14. Do you have any other comments on the proposal to establish a regional, independently-chaired multi-agency Panel as described?**

## 6. SERVICES IN THE CAMPUS

### **It is proposed that:**

- **The regional Care and Justice Campus alongside all settings for looked after children—will adopt a new regional Framework for Integrated Therapeutic Care.**
- **The new Framework will identify and promote strategies for effective integrated working across all relevant agencies.**
- **A multi-disciplinary team is established in the Secure Care Centre to co-ordinate the development and implementation of a holistic therapeutic plan for each child.**
- **All children placed in the Secure Care Centre will have access to health and social care services, education, training and other services appropriate to their individual needs.**

### [Therapeutic approach in the Campus](#)

Alongside the establishment of a regional Care and Justice Campus, the Review of Regional Facilities recommended the early adoption of a single therapeutic model, including behaviour management techniques, across all children's homes. In response to this recommendation, the Department of Health has been leading the development of a new Northern Ireland Framework for Integrated Therapeutic Care (NIFITC) for Looked After Children. In developing this new framework, the Department of Health has been working closely with the HSCB, HSC Trusts and a number of other agencies, including the Youth Justice Agency and the Education Authority. The aim is to ensure that the framework will align with and complement therapeutic approaches already in place or under development in those agencies.

The NIFITC will facilitate a regionally consistent approach to providing therapeutic care, aligned with models of practice in other agencies. Within the Secure Care Centre, in conjunction with other relevant standards, the framework will help identify organisational commitments and care and the treatment delivery standards necessary to ensure that the care provided at the Centre is person-centred and therapeutic. An emphasis on relationship-focussed work will provide the basis for securing safety and stability for the child, building an understanding of the child's presenting needs and putting in place the types of supports and intervention that will facilitate a return to community-based services within the shortest timeframe possible. For those children placed in the Centre for a longer period of time, the Framework will support the integration of therapeutic supports and interventions to help children, their families and carers build positive relationships, begin to address emotional, behavioural and developmental issues, and deliver improved outcomes.

It is proposed that the application of the NIFITC in the Secure Care Centre will be supported by a multidisciplinary therapeutic service to co-ordinate the development and implementation of a holistic therapeutic plan for each child and to provide the training, consultation and support required by the wider staff group to effectively practice therapeutic care. This will facilitate integrated working across all relevant agencies, so that all interactions with children are underpinned by a shared understanding of the impacts of the child's experiences on their development, and interventions are planned and monitored based on a shared understanding of the child's individual needs.

Importantly, the NIFITC also recognises the emotional impact that caring for traumatised children and young people can have and the importance of supporting carers to cope with the challenges so they can remain attuned, compassionate and optimistic. Therefore, it is proposed that staff working in all looked after children settings, including in the Campus, will receive a range of supports and training to maintain their own health and wellbeing and to continue to build and maintain positive relationships with the children in their care.

A diagram explaining the key building blocks of a new Framework for Integrated Therapeutic Care is attached at Annex B.

In developing these draft proposals for a new Care and Justice Campus, we spoke to some parents and carers of children who have experienced time in Woodlands and/or Lakewood. Many of those parents and carers pointed to the need for more support to help them respond to the complex needs of their children when they leave a secure setting. Work with parents, carers and the child or young person will be central to the effective therapeutic working, in order to encourage positive relationships and secure active participation in decisions about the child's care.

#### [Healthcare and education in the Campus](#)

All children placed in the Secure Care Centre will have their needs assessed by a multi-disciplinary health and wellbeing team in collaboration with community based staff, resulting in an individual care and treatment plan and access to high quality health, education, training and other services aimed at meeting their individual needs.

Recommendation 3 and 4 of the Review drew particular attention to need for coordinated mental health and drugs and alcohol services as part of a new Care and Justice Campus. While we recognise that many children admitted to secure accommodation may require support from mental health and/ or drug and alcohol services, it is also acknowledged that children may only be in secure accommodation for a very short period of time. Of all admissions between April 2014 and March 2019, the length of stay in Lakewood ranged from 2 to 631 days, with an average length of stay 12 days. For Woodlands over the same period, the length of stay ranged from 0 to 392 days, with an average length of stay of 21 days. This emphasises the need to focus on strengthening and coordinating community provision which aligns with the aims of the NIFITC. Therefore, it is the intention that

all children admitted to the Secure Care Centre will have access to the mental health and drugs and alcohol services appropriate to meet their assessed needs, provided in a coordinated way by the multi-disciplinary team based in the Secure Care Centre working collaboratively with community-based services.

The Review also recommended that an analysis should be undertaken of the need for secure mental health beds for children and young people in Northern Ireland. This analysis has been completed and, while it did identify a need for secure mental health provision, it is not proposed that this provision will form part of the regional Care and Justice Campus. Rather, it is proposed that the provision of secure mental health beds for children and young people will be aligned with existing inpatient mental health services.

In relation to education, it is proposed that children within the Secure Care Centre will have access to a range of education and training which will provide them with opportunities to develop existing or new skills, and enable them to reconnect with education or training when they leave the Centre.

#### **Questions**

- 15. *What are your views on the proposal to implement a new Framework for Integrated Therapeutic Care, to be applied across all looked after children settings, including within the regional Care and Justice Campus?***
- 16. *What are your views on the multi-disciplinary team in the Secure Care Centre – how should it be made up?***
- 17. *Have you any other comments or views on the range of services that should be provided in the secure care centre?***

## 7. A NEEDS-BASED APPROACH

**It is proposed that children will not be separated within the Secure Care Centre based on their route of admission. Instead, decisions about where a child is placed within the centre will be based on an assessment of his/ her individual needs and any risks that may be posed to or by him/ her.**

As described at section 4, it is proposed that children will continue to enter the Secure Care Centre in one of two ways—either placed there by HSC Trusts under the provisions of Article 44 of the Children Order, authorised by the Family Proceedings Courts; or remanded or sentenced by a criminal court.

However, it is not proposed to use the route of a child's admission to the Secure Care Centre as a basis of separation within the Centre. Rather, we are proposing that the Centre will focus primarily on meeting the needs of all children placed there in a consistent way and in a therapeutic environment.

Therefore, it is proposed that decisions about where a child will be placed within the Centre will be based on a comprehensive assessment of their needs and any risks that may be posed to them or by them. It is proposed that assessments are done collaboratively with young people and families and informed by the professionals involved with the child, the views of the multi-agency Panel, the multi-disciplinary team and staff within the Secure Care Centre to ensure that the full range of needs that may need to be addressed are considered, recognising issues such as the increased prevalence of neurodevelopmental difficulties, substance misuse and mental health concerns. It will also take account of the child's age, sex, their physical and mental health and type of offence (where appropriate) and take account of the particular needs of other children in the Centre. The final decision about where a child will be placed within the Centre will rest with the Head of Operations.

The rationale for not separating children based on their route of admission is tied to the overall aims and objectives of the new regional Care and Justice Campus. The Review found that children admitted to Lakewood and Woodlands often had needs in common, experienced frequent repeat admissions, and that there was considerable movement of young people between both facilities, already bringing them into contact with each other. In addition, it is proposed that the Secure Care Centre will focus primarily on responding to the needs of all children placed there, regardless of their admission route, through the application of the NIFITC aimed at achieving safety and stability; and the provision of consistent, high quality services including health and education.

The findings of the Review about the commonality of needs across children in secure care and youth custody are echoed by other research. For example, research on the

family characteristics and experiences of children entering secure settings in Surrey found that children in secure settings, whether on welfare or justice grounds, had experienced similar levels of adverse experiences including bereavement, parental separation, and domestic abuse, and came from similarly deprived backgrounds. Therefore, the authors argue, the reasons for separating these children into different regimes with different resources and rationale appear arbitrary and unclear.<sup>18</sup>

Further, the UN Rules for the Protection of Juveniles Deprived of their Liberty state that:

*The detention of juveniles should only take place under conditions that take full account of their particular needs, status and special requirements according to their age, personality, sex and type of offence, as well as mental and physical health, and which ensure their protection from harmful influences and risk situations. The principal criterion for the separation of different categories of juveniles deprived of their liberty should be the provision of the type of care best suited to the particular needs of the individuals concerned and the protection of their physical, mental and moral integrity and well-being.*<sup>19</sup>

A similar needs-based approach is adopted in some Secure Children's Homes across England, Wales and Scotland, where there is an acknowledgement that children who offend have key welfare needs that must be addressed and likewise, children who have significant welfare needs are often in danger of offending. However, it is acknowledged that Secure Training Centres operate alongside secure children's homes in England and Wales and Young Offender Institutions operate in England, Scotland and Wales.

We consider that the draft proposals provide the Head of Operations with the necessary flexibility to make an informed decision about where a child would be best placed within the Centre, taking account of all relevant information about the needs of the child and any presenting risks and the needs of other children residing in the Centre. Nevertheless, it is essential that all children placed in the Secure Care Centre feel safe and secure, that the Centre is equipped to respond effectively to the assessed needs of each individual child, and that the rights of all children in the Centre are respected and protected. For that reason, we are also proposing to work closely with the NI Human Rights Commission to develop a human rights framework which will underpin the operation of all elements of the Care and Justice Campus, including the Secure Care Centre.

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<sup>18</sup> Andow, C and Byrne, B "Family characteristics and experiences of children entering secure settings" in McAra et al, *Child-friendly youth justice: A compendium of papers given at a conference at the University of Cambridge in September 2017* (National Association for Youth Justice), pp.46-51.

<sup>19</sup> *UN Rules for the Protection of Juveniles Deprived of their Liberty*, Rule 28.

### **Questions**

- 18. *What are your views on the proposal that children within the Secure Care Centre will not be separated on the basis of their route of admission?***
- 19. *Do you agree that decisions about where a child will be placed within the Secure Care Centre should be based on an assessment of their individual needs, taking into account the factors described?***
- 20. *Do you have any other suggestions for how children should be managed within the Secure Care Centre?***

## 8. LEAVING THE SECURE CARE CENTRE – DISCHARGE/ EXIT PLANNING

### **It is proposed that:**

- **Children admitted to the Secure Care Centre will remain there only for as long as the criteria for admission (see section 4) continue to apply, or for the length of any court-mandated period of remand or sentence.**
- **For each child admitted to the Secure Care Centre, a plan will be in place to support discharge from the Centre and resettlement back into the community.**
- **Planning for discharge/ transition from the Secure Care Centre will begin from the point of admission, and will be regularly reviewed. The development of Discharge plans will be subject to monitoring by the Multi-Agency Panel.**

As detailed in section 4, the international and domestic legislative framework is clear that restricting a child's liberty is a significant step which must only be taken when there is a sound and justifiable reason for doing so. It follows that no child should remain in a secure placement for longer than is necessary, and every child will remain in a secure placement only for as long as the criteria for admission continue to apply, or for the length of any court-mandated period of remand or sentence. Therefore, key elements of the design proposals for a new Care and Justice Campus focus on how best to enable children to prepare for exit from a Secure Care Centre in a way that seeks to secure lasting positive outcomes, with the ultimate aim of reducing the possibility of readmission in the future. It is essential that it remains the case that a secure placement should not be a substitute for effective, sustainable community-based services.

In pre-consultation engagement with children and their families and carers it was made clear that preparing to leave secure accommodation is an integral part of the prevention of readmission and re-integration back into the community.<sup>20</sup> One particular issue that has been raised on a number of occasions during pre-consultation - and was a view echoed by some of the young people who provided input to the Review - was the lack of planning, once they had left a secure placement.<sup>21</sup> Another issue raised was the number of different professionals and organisations that children and young people are expected to engage with on

<sup>20</sup> Review of Regional Facilities- Youth Consultation Report January 2020, Dr Colm Walsh, Queens University Belfast (p.14)

<sup>21</sup> *Review of Regional Facilities for Children and Young People*, p.73.

discharge from the Campus and the lack of co-ordination of the provision of care and support.

Currently, both Lakewood and Woodlands have very separate discharge and exit planning processes in place. The current discharge process in Woodlands, for example, begins at the point of admission when each young person undergoes a range of assessments with qualified medical and care workers who, in conjunction with the young person, carers, family workers and community-based social workers, discuss and determine what needs the young person may have or risks posed to their health, safety and well-being that must be addressed while in secure care and in community, following discharge. As the young person progresses toward their discharge date more emphasis is placed on work to be done by dedicated community-based 'key workers' to ensure community supports are in place including family and carer engagement, appropriate accommodation is sourced, regular financial allowances are activated and educational and vocational training placements are engaged. In Lakewood currently, the discharge planning processes largely mirror fundamental principles of that in Woodlands. Due to the 'looked after' status of children placed within secure care, the wider statutory duties of HSC Trusts as they relate to looked after children apply, including planning and review duties, alongside the statutory requirement to monitor and review the placement of the child or young person in secure accommodation to ensure the criteria for placement continue to apply in accordance with Regulation 11 of the Children (Secure Accommodation) Regulations (Northern Ireland) 1996. This is now one of the key responsibilities of the Independent Chair of the interim multi-agency Panel (see section 5).

The current practice across the two facilities highlights the importance of having an aligned and meaningful discharge planning process embedded within the new Secure Care Centre and across the whole Campus. It is acknowledged that a holistic multi-agency approach to the preparation for discharge and reintegration back into the community will need to be adopted across all transitional arrangements within the new service model. It is proposed that we take this opportunity to build on strengths of the existing processes to ensure that that children and young people are successfully reintegrated back into their communities. This may include transitioning through a bespoke step-down facility and/or the proposed satellite provision within local areas.

It is proposed that each child placed in the Secure Care Centre will have a comprehensive exit plan, underscored by an effective and seamless hand-over from the Secure Centre to integrated and co-ordinated service provision in the community. It is anticipated that this exit plan will represent just one element of the overall individualised care plan which aims to address the young person's emotional, social, physical health and educational needs. This will be facilitated by the NI Framework for Integrated Therapeutic Care. The aim is to deliver the best possible outcomes for children and young people as they move out of a secure environment back to life in the community, thus preventing their re-entry.

It is essential that preparing for exit begins at the point of admission, as evidence suggests that children and young people who leave custody with a lack resource and support are more vulnerable to returning to custody, particularly in cases where there is limited co-ordination between agencies.<sup>22</sup>

#### **Questions**

- 21. Do you agree that an exit plan, as part of the overall care planning process, should be developed for each child and young person on admission to the Secure Care Centre and will be subject to regular review?**
- 22. Do you have any views or comments to share on the proposed care planning, discharge and exit planning process described in this section?**

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<sup>22</sup> The Social Reintegration of Offenders and Crime Prevention; International Centre for Criminal Law Reform and Criminal Justice Policy, Griffiths, Dandurand & Murdoch; (2007)

## 9. SATELLITE PROVISION AND STEP-DOWN UNIT

**It is proposed that:**

- **In addition to the Secure Care Centre, the regional Care and Justice Campus will also include associated satellite provision.**
- **This satellite provision will support the work of the Secure Care Centre by having locally based provision to support the delivery of meaningful transitional support into local communities, as well as potentially preventing entry into the Secure Care Centre and, where possible, reducing the need for readmission.**
- **The satellite provision will comprise a step-down unit on the site of—but separate from—the Secure Care Centre in Bangor, and community-based satellite provision in each of the five HSC Trust areas.**
- **The community-based satellite provision will be a mixed economy of residential provision and improved more co-ordinated ways of working to respond more effectively to the needs of children and young people, to prevent entry to the Secure Care Centre in the first place or prevent readmission following discharge.**

We fully recognise that the care and support provided in the Secure Care Centre cannot operate in isolation and that this will represent only one element of a continuum of care and support available to some of the most vulnerable children and young people living in Northern Ireland. A co-ordinated and consistent care and support pathway with alignment of local community services is vital to ensure that we respond more effectively to the needs of children and young people, to prevent entry to the Secure Care Centre in the first place or prevent readmission following discharge. The following sections consider each element of the proposed satellite provision in more detail.

**It is proposed that:**

- **A step-down facility, located on the same site as—but separate from—the Secure Care Centre, will form part of the Care and Justice Campus satellite provision.**
- **This step-down unit will provide a gradual and supported reintegration back to the community for some children following discharge from the Secure Care Centre.**

As recommended by the Review<sup>23</sup>, it is proposed that a step-down facility is established and located on the Bangor-based Campus site to help promote gradual reintegration to the community following discharge from the Secure Care Centre.

The aim of a step-down unit will be to gradually prepare children, for whom it is appropriate and necessary, to be discharged to a more open and less intensive setting, in addition to facilitating a continued period of engagement and programme of support. This will include supporting and encouraging children to safely and appropriately build relationships with family and friends, build life skills, and engage with services in the community, including education, training or work.

The children and young people who have engaged in pre-consultation exercises were supportive of adopting a step-down model as part of the Campus.<sup>24</sup>

Similar step-down provision aimed at easing the transition from secure accommodation is currently available in some parts of Scotland. These “close support” units are defined as “residential accommodation providing a safe structured nurturing environment. In Scotland, a child or young person can be placed in close support either as a route into secure accommodation [aimed at preventing admission to secure accommodation] or on the way out of secure to help with the transition back to their families or communities.”<sup>25</sup> A 2006 study by the Scottish Executive on secure care and its relationship with alternative arrangements found that young people who had experienced a gradual step down approach from a secure placement were more likely to experience positive outcomes—in terms of safety and stability of placement following discharge; whether the young person was in work or education; whether the behaviour that had resulted in their admission to secure accommodation had been modified; and an overall assessment of their general wellbeing compared with at admission to secure accommodation.<sup>26</sup>

<sup>23</sup> *Review of Regional Facilities for Children and Young People*, p.100.

<sup>24</sup> Review of Regional Facilities- Youth Consultation Report January 2020, Dr Colm Walsh, Queens University Belfast (p.14)

<sup>25</sup> <https://www.gov.scot/publications/childrens-social-work-statistics-2011-12/pages/4/>

<sup>26</sup> *Secure Accommodation in Scotland: Its role and relationship with “alternative” services* (Scottish Executive, 2006) p.88.

Evidence suggests that an on-site step-down unit can result in improved outcomes for children and young people who have spent a period of time in secure accommodation and that this step-down support tended to be more effective when it was provided on or close to the same site as the young person's secure placement—as it facilitated a more effective approach to care and discharge planning and allowed for continuing contact with staff with whom the young person had built positive relationships.<sup>27</sup> One example where an on-site step-down facility is working in practice is the High Dependency Unit (HDU) at Barton Moss a Secure Children's Home located outside Manchester. This unit in practice provides for the assessment of children and young people to determine their readiness for discharge into the community. During their time in the HDU the children and young people are, supported in line with their care plans and other regulations, enabled to leave to attend college or work placements or to visit friends and family. This benefits and supports a slow, measured and safer discharge to community for some at risk or less resilient children and young people.

Nevertheless, it is not proposed that all children placed in the Secure Care Centre will transition to the on-site step-down unit. We recognise that for some children and young people, a return to their families or previous or alternative care placement—supported by coordinated community-based services as appropriate—may be in their best interests.

#### **Questions**

- 23. Do you agree that a step-down facility should be located within the Campus, on the same site as—but separate from—the Secure Care Centre?**
- 24. Given the stated purpose and function of the step-down unit, do you have any views on how it should operate in practice? For example, do you think it should be an open setting (ie. not a locked facility)?**
- 25. Do you have any comments on the function and role of the step-down unit, over and above what is described here?**

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<sup>27</sup> Ibid, pp.113, 27-8, 80.

**It is proposed that:**

- **The regional Care and Justice Campus will include a network of locally-based satellite services across each of the five HSC Trust areas.**
- **The community-based satellite provision will include both residential accommodation and more integrated, multi-agency working.**
- **The purpose of this community-based satellite provision will be to (i) prevent entry to the Secure Care Centre where this can be avoided or (ii) to provide coordinated support on discharge from the Secure Care Centre to facilitate successful resettlement and reintegration.**
- **The satellite provision could potentially incorporate existing suitably resourced children's homes as an alternative to the Secure Care Centre, for example for some children who require a place of safety following arrest.**
- **The satellite provision could also include designated supported accommodation for 16 and 17 year olds, either as an alternative to entry to the Secure Care Centre or to provide supported living arrangements following their discharge from the Secure Care Centre.**

It is envisaged that the integrated Campus will have a network of locally-based, connected satellite services across each of the five HSC Trust areas. The purpose of this satellite provision will be to prevent entry to the Secure Care Centre where possible and to prevent re-admission by supporting the child or young person's return to the community following discharge from the Secure Care Centre. It is proposed that the community-based satellite provision will be a mixed economy of residential provision and improved ways of working together in a coordinated, connected way to respond more effectively to the needs of children and young people.

Indeed, research suggests that there appears to be a 'window of opportunity' following discharge from secure accommodation, when children and young people are enthusiastic to change; however this can change to disillusionment if the appropriate package of support is not sufficient, relevant or timely.<sup>28</sup> This research directly echoes what we have heard from the parents and carers of children and young people who had had spent time in Woodlands and/ or Lakewood. We

<sup>28</sup> Child-friendly youth justice? Professor Lesley McAra 2018 pp 42

consider the locally-based satellite provision will offer this essential and critical support.

In terms of new ways of working, it is proposed that the satellite provision will include agencies connected in a way which enables them to wrap services around 'at risk' young people, guided by the new NI Framework for Integrated Therapeutic Care. We want to build on the concept of peripatetic teams by either adding to their membership or by developing clear pathways between them and other services, for example, youth services and youth justice services

In terms of residential provision, section 1 points to the number of children currently admitted to Woodlands JJC by the police as a place of safety under PACE arrangements. While it is recognised that, for some of these children, a secure setting will continue to be the most appropriate placement for them while they await a court hearing, we are proposing that all relevant partner agencies work together to ensure that the use of the Secure Care Centre as a place of safety under PACE is kept to an absolute minimum. The current legislative framework and accompanying guidance make clear that children who require to be detained by the police following arrest may be so detained in other types of accommodation, subject to an assessment of risk to the public posed by the arrested child<sup>29</sup>. It is proposed that other residential provision (for example, suitably resourced children's homes) may provide suitable alternative places of safety for arrested children.

In addition, we are considering if satellite provision could also serve the needs of children being considered for bail, complemented by a range of bespoke wrap-around services, as part of a bail package, which in turn will reduce admissions to secure accommodation.

It is also proposed to designate some supported accommodation as part of the Care and Justice Campus, to meet the needs of older children being discharged from the Secure Care Centre. This cohort of 16 and 17 year olds was highlighted in the Review as requiring particular focus and attention, and it is acknowledged that supported housing for these children is a particular issue. We are therefore proposing that designated supported housing provision is included as part of the new Campus.

A multi-agency approach to the provision of these satellite services is essential in order to provide a meaningful package of care and support at every step of the process. To ensure effective provision, which enables these children and young people to stay within a community setting, the co-ordinated support of a number of agencies/delivery organisations will be required, this will include PSNI, HSC Trust children's services, community-based youth justice teams, Education Authority youth services and voluntary and community services. It is envisaged that the multi-agency panel will have an important role in assisting the Head of Operations to mobilise multi-agency responses in the community and helping to remove any barriers to access where they exist.

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<sup>29</sup> *Police and Criminal Evidence Order (Northern Ireland) 1989, Code C: Code of Practice for the Detention, Treatment and Questioning of Persons by Police Officers* (Department of Justice, 2015).

### **Questions**

- 26. Do you agree that the Secure Care Centre should be supported by a network of locally-based connected satellite services across each of the five HSC Trust areas?**
- 27. Do you agree that the purpose and focus of this satellite provision should be twofold:
  - a. To prevent children and young people from entering the Secure Care Centre, and**
  - b. To provide support to facilitate the transition of these children and young people back into the community.****
- 28. Do you agree that a multi-agency approach to this satellite provision should be adopted?**
- 29. Do you have any views on the use of alternatives to the Secure Care Centre for children who have been arrested and require a place of safety while awaiting a court appearance? Do you think that suitably resourced children's homes may be a suitable place of safety for some of these children, subject to an assessment of risk?**
- 30. Do you have any views on the use of alternatives to the Secure Care Centre for children being considered for bail, and the use of wrap-around services as part of a bail package?**
- 31. Do you agree that designated supported housing for 16 and 17 years olds should form part of the community-based satellite provision?**
- 32. Do you think that there are alternative options for the design and functionality of satellite provision? If so, please outline.**

## 10. GOVERNANCE AND ACCOUNTABILITY ARRANGEMENTS FOR REGIONAL FACILITIES WITHIN THE CARE AND JUSTICE CAMPUS

### Head of Operations for Secure Care Centre & step-down unit

It is proposed that a Head of Operations will be established who will have day to day responsibility for the operation of the Secure Care Centre and the on-site step-down unit (to be referred to as the 'regional facilities').

The Head of Operations will have a role in determining which children will be placed in the Secure Care Centre and where within the Centre they will be placed, informed by the needs and risk assessments of individual children. They will work closely with the Independent Chair of the Multi-Agency Panel to ensure that a placement within the Centre or the on-site step-down unit for an individual child or young person is appropriate. Where necessary, the Independent Chair of the Panel will escalate matters of concern for the consideration of, and/or resolution by, the Head of Operations.

It is proposed that the appointment of a Head of Operations will be required in law and that their specific role and responsibilities will also be specified in legislation.

It is also proposed that the Head of Operations will be appointed as early as possible to oversee the move towards a Secure Care Centre comprising the current Lakewood and Woodlands sites. This will be on a shadow basis initially.

### Accountability arrangements

It is recognised that any decision regarding future accountability arrangements has the potential to impact on staff currently employed in both Lakewood and Woodlands; therefore, no decisions will be taken without consultation with trade union side and staff.

Potential options for accountability arrangements for the regional facilities (the Secure Care Centre and step-down unit) are set out below. The options considered include the running of the regional facilities by a Government Department (either the Department of Health and/or the Department of Justice) or by an existing Agency or Arm's Length Body (ALB) of either Department. They also consider whether accountability arrangements should be established on a single or joint basis.

It should be acknowledged that in the development of these options, we did scope the possibility of establishing a new Agency or ALB. In considering the guidance *Public Bodies: A Guide for NI Departments* (2008) and more recently the *New Decade, New Approach* (2020) endorsed by the NI Executive, it is clear that the establishment of a new public body should be seen as a last resort. As directed by the New Decade, New Approach agreement, Government Departments are undertaking a review of existing ALBs to consider the possible duplication of the accountabilities and responsibilities within these ALBs and their continued appropriateness. On the basis that the Departments of Health and Justice have well

established ALBs with duties and responsibilities in relation to this cohort of children and young people, we discounted the establishment of a new ALB/Agency as a potential option.

Options for consideration therefore include:

Option 1: The regional facilities are run by a single Government Department (either the Department of Health or the Department of Justice)

Having the Campus accountable to one Department could represent a more transparent and arguably a more efficient governance structure. With a Head of Operations being accountable to only one Department, existing accountability arrangements could potentially be adopted and amended as necessary; therefore, reducing the need to establish a new joint approach to accountability with associated governance arrangements.

As detailed in section 6, it is proposed that a needs-based, trauma-responsive regional NI Framework for Integrated Therapeutic Care will guide the day to day operation of the Campus; therefore, lead accountability functions would naturally fit within the Department of Health. However, the youth justice element of the Campus has specific roles and responsibilities regarding the response to offending behaviours, actions to address offending behaviours and to protect the public and reassure them of action being taken in response to offending by children and young people; therefore, locating accountability for the Campus could also naturally fit within the Department of Justice.

Consequently, given the fundamental and quite unique nature of a joint Care and Justice Campus, the rationale for one Department taking lead responsibility of the Campus over another is unclear and locating accountability within a single department may not be a suitable option.

Option 2: The regional facilities are run by both Government Departments under a formal partnership agreement, supported by a jointly managed Partnership Board.

A second option under consideration is that the regional facilities are accountable to both the Department of Health and the Department of Justice, working jointly under a partnership agreement and overseen by a jointly chaired and constituted partnership board.

The Children's Services Co-operation Act (Northern Ireland) 2015 ("the Act") provides the statutory basis for this joint approach. The Act requires children's authorities to co-operate with each other and children's service providers in the exercise of functions which contribute to the wellbeing of children and young people. Section 1(2) of the Act defines "wellbeing" of children and young people—the definitions of particular relevance to the Campus project include living in safety and stability, the making by them of a positive contribution to society, living in a society which respects their rights, and physical and mental health.

Section 4(2) of the Act provides that—in the exercise of such functions—a children’s authority may provide staff, goods, services, accommodation or other resources to another children’s authority; or contribute to a fund out of which relevant payments may be made.

The Act could potentially form the legal basis of a formal partnership agreement between the Departments of Health and Justice in connection with the Campus. Such arrangements could also potentially incorporate other services, like education, youth services and housing. This agreement would detail the funding and financial management arrangements and the governance and accountability arrangements.

Joint accountability arrangements could help to ensure that both the health and social care and justice sectors can continue to fulfil their statutory responsibilities in meeting the needs of this cohort of children and young people, ensuring public safety, and support effective joined up working to secure improved outcomes in terms of reduced admissions to secure accommodation, reduced readmission/ reoffending rates, and more effective use of resources.

Option 3: The regional facilities are run by an existing Agency or Arm’s Length Body (ALB) of either the Department of Health or Department of Justice and is accountable to either Department in line with current sponsorship arrangements for that organisation.

Under this option, it is proposed that the regional facilities would be run by an existing Agency or ALB of either the Department of Health or the Department of Justice in line with the current sponsorship arrangements of the organisation.

Having an existing well established ALB running the regional facilities would benefit from the existing accountability and governance arrangements already well embedded in an existing organisation. Again, as detailed in option 1, having a single line of accountability could represent a more transparent and arguably a more efficient governance structure. Also, existing accountability arrangements could potentially be adopted and amended as necessary; therefore, reducing the need to establish new governance arrangements.

However, the rationale for one Department taking lead responsibility of the regional facilities over another remains unclear and locating accountability within an existing ALB with accounting arrangements remaining with a single department may not be a suitable option.

Option 4: The regional facilities are run by an existing Agency or ALB of either the Department of Health or the Department of Justice and is accountable to both Departments working together under a formal partnership agreement, supported by a jointly managed Partnership Board.

As detailed in option 3 above, the regional facilities could potentially benefit from existing governance and accountability arrangements already embedded within a well-established ALB.

However, it is acknowledged that under this option, the proposal for joint accountability arrangements could lead to a potentially complex governance arrangement. It could also have the potential to confuse existing lines of accountability and governance; however, the joint partnership nature of this option supports and could ensure that both the health and social care and justice sectors can continue to fulfil their statutory responsibilities in meeting the needs of this cohort of children and young people. Particularly by ensuring public safety, supporting effective joined up working to secure improved outcomes in terms of reduced admissions to secure accommodation, reduced readmission/ reoffending rates, and more effective use of resources.

#### **Questions**

- 33. Do you agree with the proposal to appoint a Head of Operations responsible for the operation of the regional facilities (Secure Care Centre and on-site Step Down Unit)? If yes, do you agree that the appointment should be required in law and that the role and responsibilities should also be specified in legislation?**
- 34. In terms of the options detailed in respect of accountability arrangements for the regional facilities, which do you consider to be the most appropriate? Please explain the reasons for your response.**
- 35. Do you have any alternative options for the accountability arrangements for the regional facilities?**

## 11. LEGISLATION

A legislative programme to support the establishment of a regional Care and Justice Campus will be developed following the outcome of this consultation. However, the proposals contained in the consultation prompt a number of questions relating to the existing legislative framework. These questions are set out below and we would be grateful for your views at this stage.

The Departments of Health and Justice will continue to engage with all relevant stakeholders in the development of legislation to support the establishment of the Campus, as we progress to the implementation phase of the programme. However, it should be acknowledged that delays to the Programme due to the NICS wide response to the COVID-19 Pandemic, will mean that it is unlikely that the introduction of new legislation and any amendments to existing legislation will be completed within this current Assembly Mandate. It is possible that the Campus may operate in a shadow form until the necessary legislation is passed.

### Classification of the Secure Care Centre

Currently, Lakewood Secure Care Centre is categorised as a children's home within the meaning of Article 9 of the Health and Personal Social Services (Quality, Improvement and Regulation) (NI) Order 2003. Woodlands JJC is classified as a juvenile justice centre within the meaning of Article 51 of the Criminal Justice (children) (NI) Order 1998. It is considered that the Secure Care Centre operating as a single entity will need to be classified/categorised as something other than a children's home or a juvenile justice centre.

Subject to views on the classification of the Secure Care Centre, further work will be undertaken with all relevant stakeholders to develop and agree revised operating standards that will apply consistently across the Centre.

#### **Question**

**36. Do you have views on the classification of the Secure Care Centre?**

### Classification of satellite provision and step-down unit

#### Satellite provision

The proposed satellite provision may incorporate other residential provision, for example designated children's homes and supported accommodation. It is not proposed to alter the classification of existing children homes, although it is accepted that children's homes will need to be resourced to enable them to effectively support the preventative and improved re-integration aims of the Campus. It may also be

necessary to regulate any supported accommodation designated as part of the Campus.

#### Step-down unit

A decision will also be required on the classification of the proposed on-site step-down facility within the Campus.

Subject to the outcome of this consultation, work will be undertaken with all relevant stakeholders to develop a statement of purpose setting out the specific functions of the step-down unit and a transitions policy which describes the process for children moving between the Secure Care Centre, step-down unit and its satellite provision.

#### Multi-agency working

Currently, both HSC Trusts and the Youth Justice Agency have statutory duties and responsibilities in respect of the provision of services to children and young people most in need. The Youth Justice Agency in carrying out Department of Justice functions for the provision of youth justice services under the Criminal Justice (Children) (NI) Order 1998 and Justice (NI) Act 2002, delivers a range of services with the principal aim of making the community safer by helping to stop offending. In parallel to this, Article 18 of the Children (NI) Order 1995 places a general duty on HSC Trusts to provide social care for children in need, their families and others. For the purpose of facilitating this general duty, every HSC Trust has the specific powers and duties set out in Schedule 2 of the Order.

It is proposed that the duties on HSC Trusts and the Youth Justice Agency (as detailed above) could underpin the provision of a range of services proposed as part of the satellite provision within the Care and Justice Campus. However, as discussed within section 9, part of this satellite provision will consist of agencies working together in a more integrated, consistent and connected way to try to prevent a child from entering the Secure Care Centre where possible, or to facilitate a settled reintegration back to the community following discharge. It is recognised that health, social care, youth justice, youth services and education professionals already work together to try to prevent children coming into contact with the youth justice system or care systems, or to try to prevent children slipping further into those systems. We are currently mandated to do this via the Children's Services Co-operation Act (Northern Ireland) 2015 and in particular Section 2 (1) of the Act<sup>30</sup> which states that Children's Authorities are required to (i) co-operate with one another and (ii) to co-operate with other children's service providers, in order to contribute to better outcomes for children and young people in regard to well-being. We are proposing to strengthen this by creating statutory Campus partners with supporting legislation.

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<sup>30</sup> <http://www.legislation.gov.uk/nia/2015/10/section/2/enacted>

### **Questions**

- 37. Do you have any views on the classification of the Campus satellite provision?**
- 38. Do you consider that legislation will be required to support and formalise multi-agency working as part of a new Care and Justice Campus, by, for example, designating specified agencies or statutory Campus partners?**

### Multi-agency Panel

Section 5 describes the proposed role of a new multi-agency Panel in making decisions about admissions to the Secure Care Centre (except in cases where a child has been remanded or sentenced to custody). It is also proposed that the Panel will undertake a monitoring role to ensure that the continued placement of a child in the Secure Care Centre remains appropriate and in the child's best interest.

In performing its role, the Panel may potentially make a decision with which the placing HSC Trust disagrees. It may be that a statutory basis will be required to support the operation of the Panel, its decision making and action-taking in connection with any child admitted to the Campus.

### **Question**

- 39. Do you have any views on whether the proposed multi-agency Panel would require a statutory basis?**

## 12. THE LEGAL STATUS OF CHILDREN AND PARENTAL RESPONSIBILITY

### Legal status of children & young people in the Secure Care Centre

The creation of a single Secure Care Centre (as part of a regional Care and Justice Campus) from two distinct entities with two different operating regimes and different legislative frameworks raises questions about the status of the children and young people placed there.

Currently, all children placed in Lakewood Secure Care Centre are looked after children as defined by Article 25 of The Children (NI) Order 1995<sup>31</sup>—indeed the provisions of Article 44 of the Children Order only apply to a child who is being looked after by a HSC Trust. The HSC Trust assumes moral as well as legal responsibility for enabling looked after children and young people in its care to experience happy and fulfilling lives. Not all children placed in Woodlands JJC are looked after; however, under Article 53 of The Criminal Justice (Children) (NI) Order 1998<sup>32</sup>, while a child is being detained by the managers of a juvenile justice centre, the managers shall (a) have parental responsibility for him; and (b) if they are satisfied that it is necessary to do so in order to safeguard or promote a child's welfare, have the power to determine the extent to which a parent of the child may meet parental responsibility for the child.

It is proposed that those who were looked after prior to entering the Secure Care Centre will continue to be looked after; however, it is not proposed to make all children looked after when they are admitted to the Centre. This will mean that not all children in the Centre will have the same legal status.

### Parental responsibility

In line with and linked to these legal status proposals is the parental responsibility arrangements for the children and young people admitted to the Secure Care Centre. We consider that the current position within Woodlands JJC, where the Director – as the person having the management and control of the Centre under the Juvenile Justice Centre Rules (NI) 2008- obtains parental responsibility for children should continue. This will mean that the future Head of Operations of the Secure Care Centre will obtain parental responsibility for any child who was not looked after prior to entering the Secure Care Centre.

This raises a question about **parental responsibility** for those children who are looked after while in the Secure Care Centre. Possible options for the looked after population once admitted to the Secure Care Centre include:

- I. the placing HSC Trust solely retains parental responsibility;
- II. the parental responsibility passes fully to the Head of Operations of the Secure Care Centre; or

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<sup>31</sup> Within the meaning of Article 25 of the Children (NI) Order 1995

<sup>32</sup> <http://www.legislation.gov.uk/nisi/1998/1504/article/53/made>

- III. the placing HSC Trust and the Head of Operations share parental responsibility.

We do not consider that a HSC Trust should lose its parental responsibilities when a looked after child or young person is in the Secure Care Centre on the grounds that the HSC Trust continues to be part of care planning for a child, in particular planning for discharge from the Centre. Figure 2 below provides an overview of the possible options for parental responsibility arrangements within the Secure Care Centre.

**Figure 2: Overview of the possible options for parental responsibility arrangements within the Secure Care Centre**

CHILDREN WHO ARE NOT 'LOOKED AFTER'	
Option 1	Head of Operations
'LOOKED AFTER' CHILDREN	
Option 1	Placing HSC Trust
Option 2	Head of Operations
Option 3	Joint Parental Responsibility (Placing Trust and Head of Operations) if a child was 'looked after' prior to entering the Secure Care Centre.

**Questions**

- 40. *Do you agree that only children who were looked after prior to admission to the Secure Care Centre should be looked after while in the Centre?*
- 41. *Do you agree that the Head of Operations within the Secure Care Centre should be given parental responsibility for children who are admitted to the Secure Care Centre by way of a juvenile justice disposal?*
- 42. *Do you think that parental responsibility for looked after children should:*
  - I. *Lie with the placing HSC Trust only;*
  - II. *Pass to the Head of Operations for the duration the child is in the Secure Care Centre; or*
  - III. *Be shared between the placing HSC Trust and the Head of Operations.*

*Please indicate which option you support and why.*

### Legal status of children under Place of Safety arrangements

The proposals for the regional Care and Justice Campus recognise that some children may be placed in the Campus—either the Secure Care Centre or the satellite provision—for a short period of time. This will include those children who require a place of safety following arrest, while awaiting the next available court date.

Currently, under Article 25(2) of the Children Order, any child provided with accommodation by an HSC Trust for a continuous period of more than 24 hours is a looked after child. Therefore, proposals to utilise children’s homes as alternatives to the Secure Care Centre as a place of safety for some children could potentially result in those children becoming looked after if their stay exceeds 24 hours.

However, the draft Adoption and Children Bill makes provision to amend Article 18(6) of the Children Order [*General duty of authority to provide personal social services for children in need, their families and others*] to enable a Trust to provide accommodation for an “eligible child” without that child becoming looked-after after 24 hours, as would normally be the case. In the Bill as drafted only disabled children are specified as being eligible for this provision, however there is a power to make regulations to prescribe further categories of children.

Subject to responses to this consultation, if the proposal to offer alternative accommodation in children’s homes to some children who require a place of safety following arrest is supported, consideration could be given to prescribe these children as an eligible category under proposed revised provisions of Article 18(6) of the Children Order. This would mean that, where any part of the Campus to be used as a place of safety for a child following arrest, they would not automatically become a looked after child if their stay was for more than 24 hours.

#### **Question**

- 43. Do you have any views on whether the Department of Health should make regulations to prescribe children subject to the provisions of Article 39(6) of Police and Criminal Evidence (NI) Order 1989, so that they do not automatically become a looked after child if the duration of their stay within the Campus is longer than 24 hours?**

## 13. EQUALITY AND HUMAN RIGHTS

Alongside this consultation on proposals for a regional Care and Justice Campus, your views are also being sought on the potential equality and human rights implications of these proposals. A draft equality, disability duties and human rights screening exercise has been completed. The screening document has been published alongside this consultation.

In order to assist in finalising the assessment of the equality and human rights impacts of these policy proposals, your views are sought on the following four questions:

### **Questions**

- 44. Are the proposals set out in this consultation document likely to have an adverse impact on any of the nine equality groups identified under Section 75 of the Northern Ireland Act 1998? If yes, please state the group or groups and provide comment on how these adverse impacts could be reduced or alleviated in the proposals.**
- 45. Are you aware of any indication or evidence—qualitative or quantitative—that the proposals set out in this consultation document may have an adverse impact on equality of opportunity or on good relations? If yes, please give details and comment on what you think should be added or removed to alleviate the adverse impact.**
- 46. Is there an opportunity to better promote equality of opportunity or good relations? If yes, please give details as to how.**
- 47. Are there any aspects of this consultation where potential human rights violations may occur?**

## 14. RURAL IMPACT

[The Rural Needs Act \(NI\) 2016](#) became operational on the 1 June 2017 and places a duty on public authorities, including government departments, to have due regard to rural needs when developing, adopting, implementing or revising policies, strategies and plans and when designing and delivering public services.

A draft rural needs impact assessment has been prepared against these policy proposals and has been published as part of this consultation.

In order to assist in finalising these assessments, your views are sought on the following question:

### **Question**

**48. Are the actions/proposals set out in this consultation document likely to have an adverse impact on rural areas?**

## 15. IMPLEMENTATION PLAN

Following the public consultation, a consultation analysis report will be prepared and submitted to Ministers and the Executive for consideration.

Subject to the outcome of this, and the agreement of Ministers and the Executive, work will begin to implement the proposals for a regional Care and Justice Campus.

While it is recognised that some of the proposals may take longer than others to implement, it is proposed that some early actions will be taken.

It is proposed that an important, early step will be the appointment of the Head of Operations responsibility for overseeing the move towards a Secure Care Centre comprising the current Lakewood and Woodlands sites. Subject to the outcome of this consultation exercise, we would like to see the Head of Operations appointed early in 2021.

We also think the early adoption of the NI Framework for Integrated Therapeutic Care presents real opportunities to begin to make real improvements for all looked after children, including those in secure accommodation. Implementation of this framework also has the potential to support staff, both in residential children's homes and in secure care, look after their own health and wellbeing and also to maintain and continue to build positive relationships with children and their families/ carers. It is expected that training in and implementation of the new Framework will begin later this year.

No decisions have yet been taken in relation to staffing of the Secure Care Centre or across the Campus. However, we fully appreciate that all staff who may be affected by these proposals will want early certainty about what they mean for them and their jobs. No decisions relating to staffing in the Secure Care Centre will be taken without the full involvement of trade unions and staff, and we expect detailed discussions to begin as soon as possible.

Subject to the outcome of this consultation exercise, a legislative programme will be developed to support the implementation of the Campus. In parallel, work will be undertaken to develop and agree the standards and regulatory framework within which the Campus will operate.

The departments of Health and Justice will continue to engage with all relevant stakeholders—including staff across Health and Social Care, youth justice, and other partner agencies; regulatory bodies; advocacy, support and advice organisations; and children and young people and their families—as we progress these proposals towards full implementation.

## SUMMARY OF QUESTIONS

	<b>Question</b>
1	<b><i>Do you have any comments on the proposal that the Secure Care Centre will comprise the existing Lakewood and Woodlands sites?</i></b>
2	<b><i>Do you have any comments on the proposed capacity of the Secure Care Centre?</i></b>
3	<b><i>What are your views on the longer-term aim of reducing the overall capacity within the Secure Care Centre, so that no child will be placed in a house with any more than three other children?</i></b>
4	<b><i>Do you agree that the admissions criteria for the Secure Care Centre should be based on existing criteria, clarifying that children will be admitted to the Campus in one of two ways:</i></b> <ul style="list-style-type: none"> <li data-bbox="347 763 1283 831">• <i>where the criteria set out in Article 44 of the Children Order are satisfied; or</i></li> <li data-bbox="347 837 1362 864">• <i>where the child is remanded or sentenced by the authority of a court.</i></li> </ul>
5	<b><i>Do you agree that the Secure Care Centre should continue to be used as a place of safety for children following their arrest, if this is required?</i></b>
6	<b><i>Do you agree that the use of the Secure Care Centre as a place of safety should be kept to a minimum, and that alternative accommodation options should be developed?</i></b>
7	<b><i>Do you think any changes are required to the existing criteria for admissions to secure accommodation under Article 44 of the Children Order?</i></b>
8	<b><i>Are there any other comments you wish to make about the routes of admission to the Secure Care Centre?</i></b>
9	<b><i>Do you agree with the proposal to establish a regional, independently-chaired multi-agency Panel with the roles and responsibilities as described?</i></b>
10	<b><i>Do you agree with the membership proposed?</i></b>
11	<b><i>Do you think, in some cases, there may be scope for the courts to make reference to the Panel in determining the most appropriate disposal for a child who has been involved in offending behaviour?</i></b>
12	<b><i>Thinking about the roles, responsibilities and make-up of the Panel as described, do you have any views on whether the Panel and its functions should be established in legislation?</i></b>
13	<b><i>Do you think the Panel should have any other roles and responsibilities within the Campus, other than what is described here?</i></b>
14	<b><i>Do you have any other comments on the proposal to establish a regional, independently-chaired multi-agency Panel as described?</i></b>

15	<i>What are your views on the proposal to implement a new Framework for Integrated Therapeutic Care, to be applied across all looked after children settings, including within the regional Care and Justice Campus?</i>
16	<i>What are your views on the multi-disciplinary team in the Secure Care Centre – how should it be made up?</i>
17	<i>Have you any other comments or views on the range of services that should be provided in the secure care centre?</i>
18	<i>What are your views on the proposal that children within the Secure Care Centre will not be separated on the basis of their route of admission?</i>
19	<i>Do you agree that decisions about where a child will be placed within the Secure Care Centre should be based on an assessment of their individual needs, taking into account the factors described?</i>
20	<i>Do you have any other suggestions for how children should be managed within the Secure Care Centre?</i>
21	<i>Do you agree that an exit plan, as part of the overall care planning process, should be developed for each child and young person on admission to the Secure Care Centre and will be subject to regular review?</i>
22	<i>Do you have any views or comments to share on the proposed care planning, discharge and exit planning process described in this section?</i>
23	<i>Do you agree that a step-down facility should be located within the Campus, on the same site as—but separate from—the Secure Care Centre?</i>
24	<i>Given the stated purpose and function of the step-down unit, do you have any views on how it should operate in practice? For example, do you think it should be an open setting (ie. not a locked facility)?</i>
25	<i>Do you have any comments on the function and role of the step-down unit, over and above what is described here?</i>
26	<i>Do you agree that the Secure Care Centre should be supported by a network of locally-based connected satellite services across each of the five HSC Trust areas?</i>
27	<i>Do you agree that the purpose and focus of this satellite provision should be twofold:</i> <ul style="list-style-type: none"> <li>• <i>To prevent children and young people from entering the Secure Care Centre, and</i></li> <li>• <i>To provide support to facilitate the transition of these children and young people back into the community.</i></li> </ul>
28	<i>Do you agree that a multi-agency approach to this satellite provision should be adopted?</i>
29	<i>Do you have any views on the use of alternatives to the Secure Care Centre for children who have been arrested and require a place of safety while awaiting a court appearance? Do you think that suitably resourced children's homes may be a suitable place of safety for some of these children, subject to an assessment of risk?</i>
30	<i>Do you have any views on the use of alternatives to the Secure Care Centre for children being considered for bail, and the use of wrap-around services as part of a bail package?</i>

31	<i>Do you agree that designated supported housing for 16 and 17 years olds should form part of the community-based satellite provision?</i>
32	<i>Do you think that there are alternative options for the design and functionality of satellite provision? If so, please outline.</i>
33	<i>Do you agree with the proposal to appoint a Head of Operations responsible for the operation of the regional facilities (Secure Care Centre and on-site Step Down Unit)? If yes, do you agree that the appointment should be required in law and that the role and responsibilities should also be specified in legislation?</i>
34	<i>In terms of the options detailed in respect of accountability arrangements for the regional facilities, which do you consider to be the most appropriate? Please explain the reasons for your response.</i>
35	<i>Do you have any alternative options for the accountability arrangements for the regional facilities?</i>
36	<i>Do you have views on the classification of the Secure Care Centre?</i>
37	<i>Do you have any views on the classification of the Campus satellite provision?</i>
38	<i>Do you consider that legislation will be required to support and formalise multi-agency working as part of a new Care and Justice Campus, by, for example, designating specified agencies or statutory Campus partners</i>
39	<i>Do you have any views on whether the proposed multi-agency Panel would require a statutory basis?</i>
40	<i>Do you agree that only children who were looked after prior to admission to the Secure Care Centre should be looked after while in the Centre?</i>
41	<i>Do you agree that the Head of Operations within the Secure Care Centre should be given parental responsibility for children who are admitted to the Secure Care Centre by way of a juvenile justice disposal?</i>
42	<i>Do you think that parental responsibility for looked after children should:</i> <ul style="list-style-type: none"> <li><i>I. Lie with the placing HSC Trust only;</i></li> <li><i>II. Pass to the Head of Operations for the duration the child is in the Secure Care Centre; or</i></li> <li><i>III. Be shared between the placing HSC Trust and the Head of Operations.</i></li> </ul> <i>Please indicate which option you support and why.</i>
43	<i>Do you have any views on whether the Department of Health should make regulations to prescribe children subject to the provisions of Article 39(6) of Police and Criminal Evidence (NI) Order 1989, so that they do not automatically become a looked after child if the duration of their stay within the Campus is longer than 24 hours?</i>
<b>Equality and Human Rights</b>	
44	<i>Are the proposals set out in this consultation document likely to have an adverse impact on any of the nine equality groups identified under Section 75 of the Northern Ireland Act 1998? If yes, please state the group or groups</i>

	<i>and provide comment on how these adverse impacts could be reduced or alleviated in the proposals.</i>
<b>45</b>	<i>Are you aware of any indication or evidence—qualitative or quantitative—that the proposals set out in this consultation document may have an adverse impact on equality of opportunity or on good relations? If yes, please give details and comment on what you think should be added or removed to alleviate the adverse impact.</i>
<b>46</b>	<i>Is there an opportunity to better promote equality of opportunity or good relations? If yes, please give details as to how.</i>
<b>47</b>	<i>Are there any aspects of this consultation where potential human rights violations may occur?</i>
<b>Rural impact</b>	
<b>48</b>	<i>Are the actions/proposals set out in this consultation document likely to have an adverse impact on rural areas?</i>

## GET INVOLVED

You can share your views on the proposals for a Regional Care and Justice Campus in a number of ways. The Department of Health and Department of Justice websites provide full details of the consultation and ways to get in touch – see <https://www.health-ni.gov.uk/consultations/regional-care-justice-campus> or <https://www.justice-ni.gov.uk/consultations/consultation-establishment-regional-care-and-justice-campus>

Responses can be submitted using the online questionnaire at <https://consultations.nidirect.gov.uk/doh-social-services-policy-group/establishment-of-a-regional-care-and-justice-campus/>

Alternatively, you can respond by post or by e mail to:

Regional Facilities for Children and Young People Programme Team  
Room C3.6  
Castle Buildings  
Stormont Estate  
Belfast BT4 3SQ

E mail: [RegFacilitiesProgrammeTeam@health-ni.gov.uk](mailto:RegFacilitiesProgrammeTeam@health-ni.gov.uk)

This document is also available in alternative formats on request. Please contact the Team at the address above or by phoning 02890523401 or 02890378672 to make your request.

The consultation closes on **15 January 2021**.

## PRIVACY, CONFIDENTIALITY AND ACCESS TO CONSULTATION RESPONSES

For this consultation, we may publish all responses except for those where the respondent indicates that they are an individual acting in a private capacity (e.g. a member of the public). All responses from organisations and individuals responding in a professional capacity will be published. We will remove email addresses and telephone numbers from these responses; but apart from this, we will publish them in full. For more information about what we do with personal data please see our consultation privacy notice on the DoH website at <https://www.health-ni.gov.uk/publications/privacy-notice-establishment-regional-care-and-justice-campus-consultation>

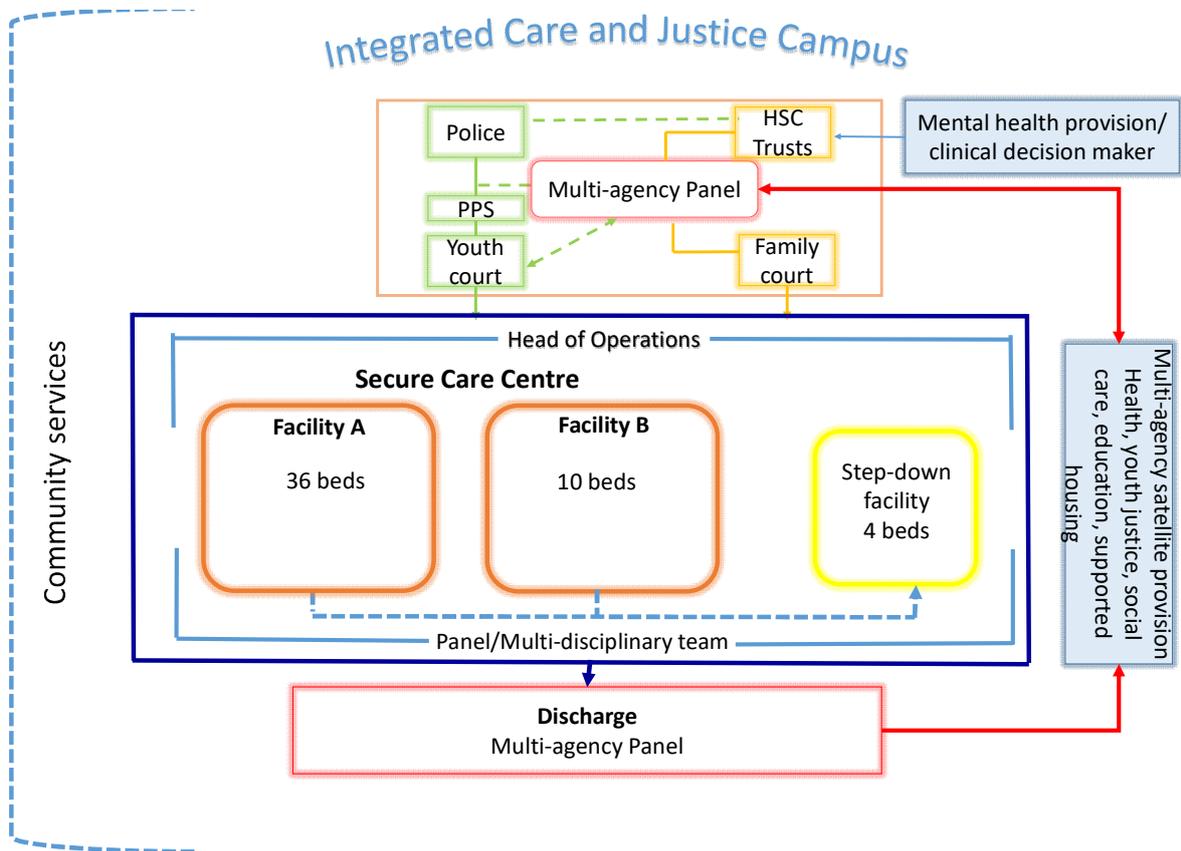
Your response, and all other responses to this consultation, may also be disclosed on request in accordance with the Freedom of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR); however all disclosures will be in line with the requirements of the Data Protection Act 2018 (DPA) and the General Data Protection Regulation (GDPR) (EU) 2016/679.

If you want the information that you provide to be treated as confidential it would be helpful if you could explain to us why you regard the information you have provided as confidential, so that this may be considered if the Department should receive a request for the information under the FOIA or EIR.

## ABBREVIATIONS

ALB	Arm's Length Body
DPA	Data Protection Act
EIR	Environmental Information Regulations
EU	European Union
FOIA	Freedom of Information Act
GDPR	General Data Protection Regulations
HSC	Health and Social Care
JJC	Juvenile Justice Centre
NGO	Non-governmental organisation
NI	Northern Ireland
PACE	Police and Criminal Evidence (refers to the provisions of the Police and Criminal Evidence (Northern Ireland) Order 1989)
PSNI	Police Service of Northern Ireland
RQIA	Regulation and Quality Improvement Authority
UNCRC	United Nations Convention on the Rights of the Child
VOYPIC	Voice of Young People in Care

Diagram representing the Care and Justice Campus design



## A FRAMEWORK FOR INTEGRATED THERAPEUTIC CARE FOR LOOKED AFTER CHILDREN

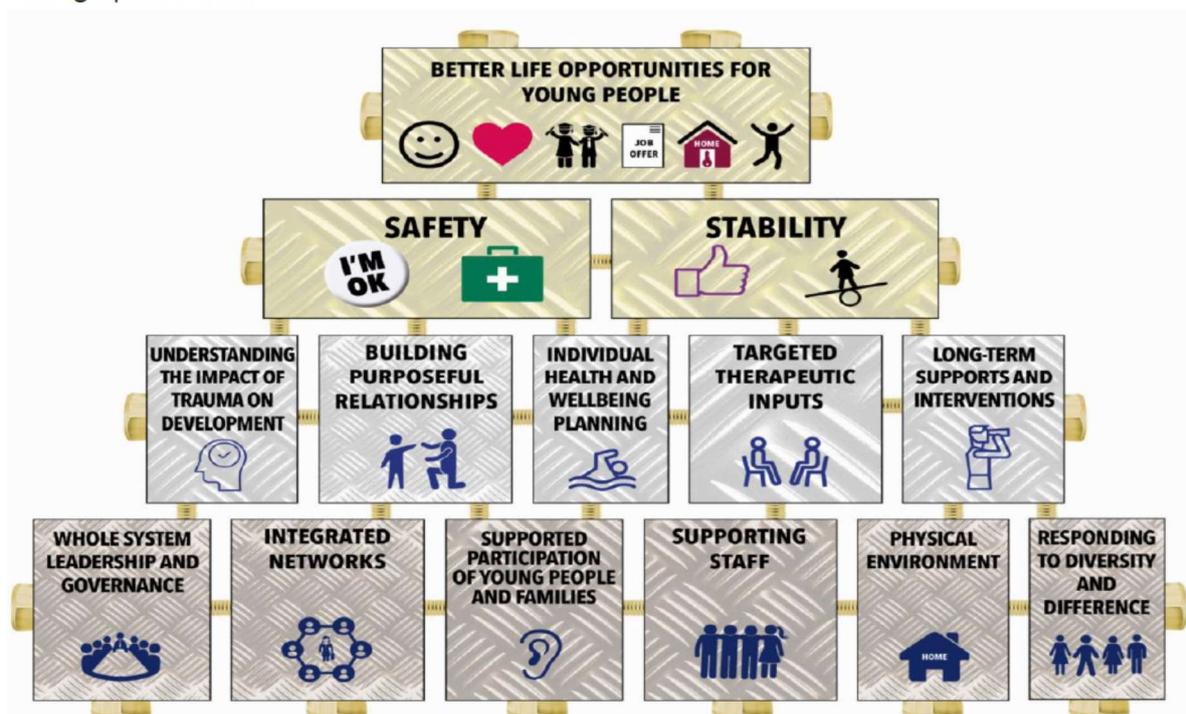
The Framework for Integrated Therapeutic Care for looked after children in Northern Ireland is grounded in the understanding that all experiences impact upon a child's physical, emotional and social development.

It begins with the question often associated with trauma-informed approaches: 'What happened to you?'

The Framework aims to support a child's development and recovery by avoiding an individualising, backward-facing perspective and focusses on the child's rights, while recognising that children develop within relational and cultural spaces, when they encounter people and things.

The Framework emphasises each child's intrinsic right to be supported to reach his or her best health and wellbeing potential. This approach poses the question 'What's happening for you now?' and places responsibility on the caring systems around the child to work in real partnership with each other and with young people and families.

The Framework is comprised of systems or organisational commitments and specific practice delivery approaches. By delivering all of the component parts of the Framework, the aim is to develop a sense of understanding, mutual trust and empowerment. Young people and their carers will engage in a wide range of activities that support healthy development, community integration and trauma recovery. The component parts of the Framework are summarised in the graphic below.



## OUTCOMES FOR CHILDREN AND YOUNG PEOPLE

The Framework aims to deliver the following outcomes:

### SAFETY AND STABILITY

- Placement stability – living in a settled, long-term home
- Relational stability – a developed network of sustained, reliable and positive relationships with family/carers, friends and social groups
  - Young person’s subjective sense of safety, stability and permanence.
  - The relative absence of behaviour which reflects emotional dysregulation and increases risks to a young person’s safety and wellbeing and/or compromises participation in family and community life.

LEADING TO

### BETTER LIFE OPPORTUNITIES FOR YOUNG PEOPLE

- Age-appropriate skills and competencies including capacity to regulate behaviour and emotions
- Positive relational functioning and a positive sense of self and belonging.
  - Educational or vocational attainment.
  - Full integration into the mainstream of family, community and working life, including constructive engagement with leisure and cultural activities.

- **SYSTEMS/ORGANISATIONAL COMMITMENTS**

- The Framework identifies the following component parts which form the foundation of a trauma responsive organisation. All of these parts are required to be in place to help to meet the wide array of therapeutic care needs looked after children may experience:

- **WHOLE SYSTEM LEADERSHIP AND GOVERNANCE**

- Policies and procedures for delivering Integrated Therapeutic Care, reflecting whole-organisation responsibilities, which are regularly audited, evaluated and improved.

- **INTEGRATED NETWORKS**

- Regionally consistent processes, with role and interface clarity, to support a One Child/One Plan, and a virtual team approach to multidisciplinary and multiagency working.

- **SUPPORTED PARTICIPATION OF YOUNG PEOPLE AND FAMILIES**

- Building upon any existing processes to involve young people and families in all aspects of decision-making, including collaborative approaches to therapeutic planning and care delivery.

- **SUPPORTING STAFF**

- Regular assessment of the needs of staff who provide care and a collaborative and imaginative approach to identifying supports which sustain their ability to continue to care effectively.

- **PHYSICAL ENVIRONMENT**

- Recognising the impact of the physical environment on traumatised young people and a commitment to trauma-informed estates planning and design.

- **RESPONDING TO DIVERSITY AND DIFFERENCE**

- Recognising the importance of cultural connections for identity development and trauma recovery; policies and training for supporting diverse identities and avoiding cultural stereotyping and bias.

- **PRACTICE DELIVERY REQUIREMENTS**

- The Framework identifies the following essential aspects of caring practices, which support the aim of creating safety and stability and provide the opportunity for better life chances for young people:

### **UNDERSTANDING THE IMPACT OF TRAUMA ON DEVELOPMENT**

- Staff and carers at all levels, including senior managers within organisations, receive training on the impacts of trauma on young people’s development and what constitutes therapeutic care. Supervision processes are put in place to assess staff and carers’ knowledge and usage of appropriate practice methods.

### **BUILDING PURPOSEFUL RELATIONSHIPS**

- Highly skilled, trauma-informed relationship building by committed, confident carers, social workers, education and therapeutic staff which is designed to encourage a child’s emotional regulation, trust, and positive change.

### **INDIVIDUAL HEALTH AND WELLBEING PLANNING**

- A consistent process is established to ensure collaborative, individual assessment and planning of holistic interventions. The process will support a child’s personal development and produce an Individual Therapeutic Plan to include educational and vocational supports, community based activity, sports, arts and cultural experiences. Its aim is to help to build relationship and competency development, with opportunities being matched to assessed capacity and need.

### **TARGETED THERAPEUTIC INPUTS**

- Looked after children, especially those in residential care, will have an individual plan which guides all therapeutic care inputs. The therapeutic interventions may include: sensory (OT) interventions; speech and language therapy; psychoeducation, narrative and lifestory work; attachment-focussed and family therapies; specific therapies for a range of psychological presentations (eg anxiety, low mood); interventions to support competency development (eg social-skills, problem-solving) including sports and arts-based activity, adventure therapies and trauma integration therapies.

### **LONG TERM SUPPORTS AND INTERVENTIONS**

- Therapeutic and social care supports should be in place for looked after young people beyond 18years of age. Therapeutic supports may include TLAAC services up to 21 yrs of age and dedicated Primary Mental Health support for young people up to 25 yrs of age who require emotional support and assistance to engage with specialist Adult Mental Health Services.

