

Higher National Unit Specification

General information

Unit title: Caring for Young People in Secure Care Settings

(SCQF level 7)

Unit code: DM0F 34

Superclass: PM

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Source: Scottish Qualifications Authority

Version: 01

Unit purpose

To enable learners to understand the social, emotional and contextual factors required in order to work effectively with young people in secure care settings. It enables them to use theories and perspectives to explain why young people might come to be in secure settings, and how to work with them to achieve a positive Outcome.

Outcomes

On successful completion of the Unit the learner will be able to:

- 1 Understand the principles, values and legislative context of secure care.
- 2 Explain the social and psychological circumstances of young people entering secure care.
- 3 Explore the key practice skills required in secure care.

Credit points and level

1 Higher National Unit credit at SCQF level 7: (8 SCQF credit points at SCQF level 7)

Higher National Unit Specification: General information (cont)

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Recommended entry to the Unit

Learners should have good communication skills, both written and oral. These can be evidenced either by the achievement of nationally recognised qualifications for example Higher English or a qualification equivalent to SCQF level 5 or by the completion of a precourse interview part of which could take the form of a written assignment. The skills to undertake this Unit could also be demonstrated through an employer's reference or the process of application and interview. In addition to proven communication skills learners should have preferably undertaken some real work experience, paid or voluntary, in a care setting.

Core Skills

Opportunities to develop aspects of Core Skills are highlighted in the Support Notes for this Unit specification.

There is no automatic certification of Core Skills or Core Skill components in this Unit.

Context for delivery

If this Unit is delivered as part of a Group Award, it is recommended that it should be taught and assessed within the subject area of the Group Award to which it contributes.

The Assessment Support Pack (ASP) for this Unit provides assessment and marking guidelines that exemplify the national standard for achievement. It is a valid, reliable and practicable assessment. Centres wishing to develop their own assessments should refer to the ASP to ensure a comparable standard. A list of existing ASPs is available to download from SQA's website (http://www.sqa.org.uk/sqa/46233.2769.html).

Equality and inclusion

This Unit specification has been designed to ensure that there are no unnecessary barriers to learning or assessment. The individual needs of learners should be taken into account when planning learning experiences, selecting assessment methods or considering alternative evidence.

Further advice can be found on our website www.sqa.org.uk/assessmentarrangements.

Higher National Unit Specification: Statement of standards

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Acceptable performance in this Unit will be the satisfactory achievement of the standards set out in this part of the Unit specification. All sections of the statement of standards are mandatory and cannot be altered without reference to SQA.

Outcome 1

Understand the principles, values and legislative context of secure care.

Knowledge and/or Skills

- Historical and legislative context of secure care settings
- ♦ Debates about care v control, and punishment vs rehabilitation
- Application of children's rights to secure settings
- Role of gender and culture

Outcome 2

Explain the social and psychological circumstances of young people entering secure car.

Knowledge and/or Skills

- Psychological theories relevant to understanding young people in secure care
- Social factors
- Use of secure settings for care and protection
- Patterns of offending behaviour in society

Outcome 3

Explore the key practice skills required in secure care.

Knowledge and/or Skills

- Role of assessment and care planning
- Risk assessment
- Mobility planning and through care
- Collaboration with other professionals

Higher National Unit Specification: Statement of standards (cont)

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Evidence Requirements for this Unit

Learners will need to provide evidence to demonstrate their Knowledge and/or Skills across all Outcomes by showing that they can:

- describe the historical development of secure care from the Nineteenth Century until the present time.
- analyse the punishment vs rehabilitation debate and how this informed changes in policy direction.
- describe two main routes into secure care, making reference to at least one piece of legislation per route into security.
- identify one of the ethical conflicts that can arise in relation to debates around care and control, with particular reference to at least two of the articles in the *United Nations Convention on the Rights of the Child.*
- refer to one issue in relation to culture and gender and how this might be overcome in practice.
- identify two psychological perspectives and explain their relevance to young people in secure care settings.
- describe three social factors which are typically present in the history of young people in secure care settings.
- explain the difference between the use of secure settings for care and protection as opposed to their use for offending behaviour.
- describe four key patterns which are associated with offending behaviour.
- outline the importance of assessment and care planning in secure care settings, and to describe one difference between care planning in secure, as opposed to non-secure settings.
- explain the importance and process of risk assessment, with reference to mobility planning and through care.
- describe two sets of professionals with whom workers will collaborate.
- identify three barriers to collaboration and how these may be resolved.



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Unit Support Notes are offered as guidance and are not mandatory.

While the exact time allocated to this Unit is at the discretion of the centre, the notional design length is 40 hours.

Guidance on the content and context for this Unit

Outcome 1

In this Outcome, learners should examine the historical base of secure care from the 'ragged schools' of the nineteenth century through to the reformatory and remand schools of the earlier twentieth century, approved schools, List D schools and the emergence of the modern secure care settings.

The legislative routes into secure care, both through the Children's Hearings Scotland system and the criminal justice system, should be clearly understood, with particular reference to the specific sections of the Children (Scotland) Act, 1995 and the Criminal Procedure (Scotland) Act, 1995 and Children and Young People (Scotland) Act 2014.

Learners should examine the value base that underpins secure care, and look at the conflicts this can raise. Children's rights, drawn from the UNCRC, should be examined. The conflicts should be highlighted, especially in relation to the right to protection from harm and abuse, the right to fair and equal treatment, the right to respect, social justice and welfare, the right to be enabled to reach potential and to expect that those working with them will act professionally.

Learners should be, given the opportunity to examine the conflicts between care and control. Values are rarely absolute, and need to be continually examined, and negotiated. Consider what can be postulated as being a social care value, such as privacy or confidentiality. In secure accommodation these areas can become dilemmas; for example, there are times that privacy cannot be guaranteed and intrusive practices such as searching are required. There may be information that cannot be kept confidential, if it risks harming an individual. Learners should be encouraged to explore acceptable compromises, which as best as possible, preserve human rights and dignity.

Centres may wish to introduce the work of Joan Trontro. She suggests an ethic of care which is 'a practice rather than a set of rules and principles. It involves particular acts of caring and a 'general habit of mind' to care that should inform all aspects of moral life.' (Cited in Moss and Petrie 2002)

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An examination, using examples from practice (Community Care magazine is a good source of these) http://www.communitycare.co.uk/ should promote an awareness of how differences between cultures may influence an understanding of secure care. Learners should be aware of the complexity of the way in which cultural values, beliefs and practices influence how young people in secure care are viewed. This is true of learners' own cultures as well as of other cultures. Such awareness, is designed to be an aid to working sensitively with young people in secure settings.

Time, should be spent examining the experiences of young women in secure care. O'Neill's study on young women in secure care is particularly helpful here. In addition, given the disproportionate number of young men in secure care time, should also be spent, to examine how masculinities are constructed, and promoted, in our society. Smith's (2003) article *Boys to Men* and Bidulph's readable book called *Raising Boys* are good introductions to this area. For the full Outcome, the Scottish Executive Secure Care Practice Literature series, chapter one, is very helpful. This covers the historical, legal and policy development of secure care in Scotland.

Outcome 2

Some of the psychological perspectives pertinent to young people in secure care settings should be highlighted, those of particular relevance include attachment, (Howe) resilience (Gilligan, Wassell and Daniels) moral, social and cognitive development with particular emphasis on adolescence (Kohlberg, Piaget and Erikson are particularly relevant here.)

The social and demographic characteristics of young people who find themselves in secure care settings, should also be highlighted. Information on this is available from the Scottish Children's Reporters Administration (SCRA). Given the large number of young men who find their way into secure care settings, an exploration of the construction of maleness and masculinities would also be helpful. Smith's paper on this area is a good starting point.

The use of secure settings for care and protection should be explored; these would be occasions where the child or young person is referred to a secure setting for their own safety. This is usually connected to issues of absconding or self-harm. Society's attitude to children and the construction of childhood could be discussed here. It is interesting to analyse the difference between what is acceptable for adults to do, versus what is acceptable for children, and how these differences originated.

Learners, should be given an opportunity, to examine patterns in relation to offending behaviour. The work of McNeill and Batchelor (2004) is very helpful here. Their research demonstrates that young offenders show characteristic risk factors to a much greater degree. In particular persistent young offenders are more likely (than less frequent offenders) to be male and have started offending at a younger age. Young people who become involved in crime before the age of 14 tend to become the most persistent offenders with longer criminal careers. An understanding of the role of family factors is important in understanding why some young people offend and others do not. Family factors can be grouped into four categories: Parental neglect; Parental conflict and discipline; Deviant Parental Behaviour and Attitudes; Family Disruption, should be examined. In general, persistent young offenders tend to be well known by social work departments, and more often have been referred in the first instance on welfare grounds, and not offence grounds.

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Many young offenders have experienced neglect or physical, sexual or emotional abuse. Another feature that distinguishes persistent offenders is experience of local authority care all of these issues, should be explored.

For the full Outcome, the Scottish Executive Secure Care Practice Literature series will be very useful. The sections of particular relevance are Chapter 3 and Chapter 4, Section 4.07, 4.12, 4.16 and 4.20.

Outcome 3

The importance of skills in assessment, including risk assessment, and care planning are emphasised. Although the skills required for assessment are similar to those required in mainstream childcare, the assessment task for staff in secure accommodation is more focussed. The central purpose is to identify specific needs related to the criteria governing admission to secure accommodation. As such, it should take as a starting point the reasons given for placement in secure accommodation at the points of referral and admission. Whyte's article (2002) exploring what works with children and young people involved in offending examines this area of assessment and is a helpful starting point.

Care planning in secure accommodation should follow on from the initial assessment. The social worker is responsible for developing an overall care plan within which certain components are addressed by the specific secure Unit care plan. To avoid confusion, this specific care plan might better be called **the placement plan**. The placement plan is the 'road map' that outlines the journey that the child will take towards tackling the issues that led to him/her being admitted to secure accommodation.

Risk assessment in criminal justice, should be examined in some depth. The emphasis on risk in criminal justice services has changed. In the 1980s, attention was focussed on the risk of custody. To a lesser extent, suicides within young offender institutions in Scotland during the 1980s also focussed concern on the risk of self-harm. In both of these respects, offenders were considered to be subject to risks, rather than the source of risks (Stalker 2003). By the 1990s, risk of re-offending (or recidivism) and risk of serious harm (to potential victims) became an ever more significant concerns in youth justice. In this context, risk comes to be identified as an attribute of offenders. However, the above two risks differ in that risk of re-offending is essentially about the probability that an offence will occur, whereas risk of serious harm is about the impact or consequences of an offence, should it occur.

By definition, dealing with risk is central to work in secure care. Young people are admitted on account of risk to themselves or others. It is therefore an essential task of secure accommodation to try and minimise the risks that led to admission. Young people's exit strategies will be linked to the success with which these risks are addressed; hence, an exploration of risk assessment is important for learners.

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Learners should be made aware, that the initial assessment of a young person should identify particular risks, such as violent behaviour, self-harming, drug use, sexual aggression, propensity to need restraint and perhaps other factors such as a history of making allegations against staff. The identification of such behaviours should form the basis of informed strategies and responses to address them, thus matching identified needs with the resources required to meet these. Like any assessment, risk assessments need to be dynamic, and able to be adjusted, in the light of changing circumstances. This should be emphasised.

Mobility planning and throughcare should be discussed, in the light of risk assessment. The process of mobility planning should be described. Legislative requirements regarding throughcare should be identified, and the role of the residential child care worker in the throughcare process should be described.

The importance of collaboration needs to be highlighted and understood, given the nature of secure care settings. In particular, relationships with education, health and psychological services should be explored. Milligan and Steven's book on inter-professional collaboration explores all of the issues here.

For the full Outcome, the Scottish Executive Secure Care Practice Literature series will be very useful. Of particular interest will be Chapter 4, Sections 4.04, 4.18, 4.26 and 4.27.

Some Useful References:

A Secure Remedy: Report by the chief social work inspector (1996) SWSI Biddulph., S. (1998) Raising Boys: why boys are different and how to help them become happy and well balanced men Berkeley; Celestial Arts

Daniel. B., Wassel. S., and Gilligan. R. (1999) *Child Development for Child Care and Protection Workers London*; Jessica Kingsley

Furnivall, J. McQuarrie, A. and Smith, M. (2001) A Review of Residential Child Care in Scotland Glasgow: Scottish Institute for Residential Child Care

Hayes. N. and Orrell. S. (1997) *Psychology; An Introduction London*; Longman Milligan. I. And Stevens. I. (2005) *Interprofessional Collaboration in Residential Child Care*

London; Sage Moss, P. and Petrie, P. (2002) From Children's Services to Children's Spaces London:

Routledge

McNoill E and Retcholor S (2004) Pareistont Offending by Young Poople: Developin

McNeill. F. and Batchelor.S. (2004), *Persistent Offending by Young People: Developing Practice, Issues in Community and Criminal Justice Monograph Number 3, London*: National Association of Probation Officers

Scotland's Children: The Children (Scotland) Act 1995 Guidance, Volume 2, ch.6 SCRA (2004) Social Backgrounds of Children Referred to the Reporter: a pilot study Scottish Executive Practice Development Papers on Secure Care (2005)

Smith, M. (2003) Boys to men: exploring masculinity in child and youth care. Relational Child and Youth Care Practice 16(4) Winter 2003

Stalker, K (2003) Managing Risk and Uncertainty in Social Work: A Literature Review Journal of Social Work 3(2) 211–233

Whyte. W. (2002) What works with children and young people involved in crime? www.cjdc.ac.uk

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Guidance on approaches to delivery of this Unit

This Unit is likely to form part of a Group Award that is primarily designed to provide learners with professional knowledge, values and skills related to a specific occupational area. The Unit, should be delivered in a way that enables the learners to appreciate its relevance to the occupational area concerned. Throughout the Unit, the learners should be encouraged to apply what they are learning to the behaviour, experiences and life chances of the individuals with whom they work. Wherever possible materials should be used that enable the learner to make these links. Ideally, learners should be currently working, or undertaking a placement in a secure care setting.

Guidance on approaches to assessment of this Unit

Evidence can be generated using different types of instruments of assessment. The following are suggestions only. There may be other methods that would be more suitable to learners.

Centres are reminded that prior verification of centre devised assessments would help to ensure that the national standard is being met. Where learners experience a range of assessment methods, this helps them to develop different skills that should be transferable to work or further and higher education.

The Unit should be assessed by two Outcomes based assignments. For Outcome 1 the assessment should be a theory based essay, Outcomes 2 and 3 should be assessed by a hypothetical case study assessment outlining the circumstances of a young person in a secure care setting.

Opportunities for e-assessment

E-assessment may be appropriate for some assessments in this Unit. By e-assessment we mean assessment which is supported by Information and Communication Technology (ICT), such as e-testing or the use of e-portfolios or social software. Centres which wish to use e-assessment must ensure that the national standard is applied to all learner evidence and that conditions of assessment as specified in the Evidence Requirements are met, regardless of the mode of gathering evidence. The most up-to-date guidance on the use of e-assessment to support SQA's qualifications is available at www.sqa.org.uk/e-assessment.

Opportunities for developing Core and other essential skills

Core Skills: There may be opportunities to gather evidence towards Core Skills in this Unit, although there is no automatic certification of Core Skills or Core Skills components.

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Candidates will have the opportunity to develop the following Core Skills:

Communication (all Outcomes)

Convey complex ideas in well-structured and coherent form.

Use a range of forms of communication effectively in both familiar and new contexts.

Information and Communication Technology (ICT) (all Outcomes):

Use standard applications to process and obtain a variety of information and data.

Working with Others (Outcome 3):

Take account of own and others' responsibilities in carrying out and evaluating tasks.

History of changes to Unit

Version	Description of change	Date

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General information for learners

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This section will help you decide whether this is the Unit for you by explaining what the Unit is about, what you should know or be able to do before you start, what you will need to do during the Unit and opportunities for further learning and employment.

This Unit is designed to enable you to understand the social, emotional and contextual factors required in order to work effectively with young people in secure care settings. The Unit has three Outcomes.

These are:

- 1 Understand the principles, values and legislative context of secure care.
- 2 Explain the social and psychological circumstances of young people entering secure care
- 3 Explore the key practice skills required in secure care.

During the Unit, you will learn about the values and principles that underpin work in secure care. You will be given the opportunity to explore how these inform and have an impact on your work. You will reflect on the nature of secure care, its history and how it evolved to become the service that is offered today. You will examine the legislation around secure care, and how this may have an impact on practice.

You will have an opportunity to look at the circumstances of young people who come into secure care and this will help you to put their issues and behaviour in context. Finally, you will look at some of the key skills needed for secure care. You will have the opportunity to examine assessment and care planning as it applies to secure care, and you will have a particular focus on risk assessment, mobility planning and throughcare. You will learn about the importance of collaboration.

There will be two assessments associated with this Unit. Outcome 1 of this Unit will be assessed, by an essay, which explores the principles, values and legislative context of secure care. Outcomes 2 and 3, will be assessed using a hypothetical assessment. The assessment should describe a young person in a hypothetical secure setting. You would then be required to answer questions about the young person using extended responses.