CHAPTER 4
GOOD PRACTICE PRINCIPLES IN WORKING WITH YOUNG PEOPLE WHO OFFEND

Contents

I ROLES AND RESPONSIBILITIES:
- Joint Working
- Being The Lead Professional

II ASSESSMENT:
- Principles of Assessment
- GIRFEC and Assessing Young People Who Offend
- Specialist Tools That Assess Risk Of Re-Offending
- Use Of Chronologies
- Analysis In Assessments Of Young People Who Offend
- Presenting Recommendations
- Sharing Information
- Assessment Formats

III PLANNING

IV YOUNG PEOPLE IN THE ADULT SYSTEM

V INTERVENTION:
- Direct Work With Young People Who
- Intensity, Sequencing, Duration
- Intervention Programmes To Reduce Offending
- Promoting Protective Factors
- Family Work

VI REVIEWS

VII APPENDICES:
- The Integrated Assessment Framework And Youth Offending
- Structured Assessment Tools: Asset And YLS/CMI
- Action Plan Example
- Programmes Directory

VIII BIBLIOGRAPHY
I ROLES AND RESPONSIBILITIES

i. Joint Working

a) “Social work services alone cannot solve society’s problems. We need to harness all our resources and expertise to design services around the needs of people, delivering the right outcomes for the people who use them. That means finding new ways of working that position social work services alongside the work of their partners in the public, voluntary and private sectors.” Changing Lives: The Report of the 21st Century Review

b) Working with children and young people who are involved with offending behaviour is rarely possible through the work of one agency in isolation: all relevant services need to play their part.

c) Partnership working is reinforced by the GIRFEC approach. GIRFEC requires that all services for children and young people – social work, health, education, police, housing and third sector services – adapt and streamline their systems and practices to work together better to support children and young people through information sharing and co-ordination. The GIRFEC model particularly emphasises the importance of assessment based on a common language and a shared approach to conceptualising risk and need.

d) The benefits of partnership working include the following:
   - avoiding unnecessary duplication, confusion and waste of resources;
   - pooling resources promotes effectiveness;
   - providing opportunities for sharing expertise and learning from others;
   - allowing services to play to their strengths: no single agency can have expertise in every area of work that the partnership is involved in.

e) Some of the ingredients of a successful multi-agency relationship include:
   - defining roles and responsibilities clearly;
   - sharing aims and objectives;
   - identifying clear leadership;
   - managing resources effectively;
   - training and team building;
   - recognising different values and culture;
   - resolving conflict in constructive ways;
   - monitoring and evaluating outcomes.

f) Ineffective multi-agency relationships are ones where:
   - a single agency agenda dominates;
   - there is unresolved conflict;
   - the focus is short term;
   - there is no clear accountability;
   - partners do not trust each other.

g) Under GIRFEC, when two or more agencies work together to provide help to a child and family, a Lead Professional will be nominated who has a responsibility to co-ordinate and to hold to account those who are identified as providing necessary interventions. This involves
good communication and interpersonal skills as well as a clear understanding of both the lead professional role and the roles of others. In youth justice settings the lead professional has traditionally been referred to as the ‘case manager’.

ii. Being The Lead Professional

a) Although the lead professional can come from any of the agencies involved, practitioners with specialist knowledge concerning young people who offend will usually take on the role of lead professional when offending is a significant issue. When compulsory measures of care are necessary, the lead professional will usually be a local authority qualified social worker.

b) The lead professional has an overview of the case and takes responsibility for co-ordinating assessments and the Child’s Single Plan. When offending behaviour is a significant issue, the single plan should flow from an analysis of the needs that underpin this behaviour. It should also clearly outline any interventions or risk management processes necessary. Being a lead professional also involves taking responsibility for reviewing and adapting this plan as necessary. Although this may be delegated, or elements of work in relation to a particular child commissioned, the lead professional remains responsible for the implementation of the overall plan.

c) There are situations involving young people who offend when a practitioner with specialist skills in work with young people who offend would not have lead professional responsibilities. These include:

- When the role involves a discrete piece of work as part of the child’s wider support plan (e.g. group work or risk assessment); or
- In complex cases where offending behaviour occurs alongside significant and current issues concerning the young person’s care and protection which are being managed by a children and families social worker; or
- When an early and effective response to problematic behaviour is assessed as necessary and this can be best achieved by the co-ordination of non-specialist services.

d) Effective work with young people who offend depends upon the elements of assessment, planning, intervention and review being integrated seamlessly into the single plan.

e) Being the lead professional to a young person involved with offending behaviour requires staff to possess the following skills:

- Assessment:
  - The ability to engage with children and their families;
  - Competence in the gathering of information;
  - Being able to use standardised assessment tools, specialist assessment tools and chronologies;
  - Using information to evaluate needs and risk;
  - Understanding child development and being able to share assessments with key stakeholders.
Planning:
- Understanding and communicating the demands and benefits of appropriate programmes and services;
- Having knowledge of local resources;
- Being able to develop outcome orientated plans to promote change and reduce risk;
- Co-ordinating and sequencing of programmes of work;
- Negotiating plans with the young person;
- Working in partnership within and outside their own organisation; and
- Contingency planning.

Intervention:
- Managing contact, attendance and enforcement as part of supervision;
- Motivating; modelling in a pro-social way and reinforcing progress in learning and change;
- Contributing to the child’s positive development and assisting the child to stop offending.

Review:
- Being a reliable and consistent point of contact for child, family and other practitioners;
- Making sure that the help provided is consistent with the Single Plan and that services are not duplicated;
- Using baseline data to assess progress;
- Monitoring how well the plan is working and whether it is improving the child’s situation;
- Amending the plan as necessary; working with the child and family to ensure views and wishes are heard and taken into account;
- Arranging independent advocacy where necessary;
- Adhering to local and national performance standards and assessing and using data to assess and adapt practice and contribute to the management of resources and services where necessary.
II ASSESSMENT

i. Principles Of Assessment
   a) The assessment process is crucial if young people and their families are to access appropriate services.

   b) A ‘one size fits all approach’ to assessment is impossible. How an assessment is undertaken and the length of time it will take is contingent on the circumstances of the case, your specific role and the requirements of your organisation. The depth and comprehensiveness of assessment should be proportionate to the characteristics of the case. Similarly the means of assessment should match the level of need and risk presented. Practitioners should understand their role and boundaries as well as their competencies and limitations to help ensure that the means of assessment is appropriate. (Risk Management Authority 2011)

c) Before embarking upon any form of assessment practitioners need to clarify:
   - Sources and reasons for referral;
   - The purpose, scope and limits of the assessment;
   - The data likely to be relevant;
   - Who to see;
   - The tools and approach necessary;
   - The timescale for the task; and
   - What support needed to carry out the work.

d) Assessments of children and young people need to recognise that offending behaviour is often a response to unmet need and should take place within the context of a detailed assessment of social, developmental and psychological needs as set out in the GIRFEC approach and Child and Adult Protection guidance.

e) The key elements of all assessments in relation to young people who offend are the following:
   - Collecting information:
     i. From the young person: Detailed information will need to be gathered from the young person. Facts and feelings will need to be explored, and the assessment should be supported by an understanding of the young person’s needs and strengths. Practitioners may need to use a range of methods, strategies and skills to interview and engage the young person in order to understand their internal world and draw out their individual story. Appropriate assessment tools may help structure the gathering of initial information about historical and current factors in relation to the young person, their circumstances and their behaviour.
     ii. From the family: Engaging with the young person’s family will help ascertain what supports might be available from family members. The family will also be able to assist in completing a chronology (see below) when gathering a full developmental history of the child which should help build a greater understanding of the young person’s needs, risks and strengths. Evaluating the family’s attitude towards their child’s offending behaviour (and empathy in
relation to the victim) will help the practitioner understand how they can support their child to shift away from offending. An understanding of family functioning and dynamics will also be an essential part of the assessment. If parenting capacity is an issue, meetings with extended family members may help the practitioner understand what resources the family can draw on. The inclusion of fathers/male carers whenever possible is important, especially when parents are separated but both play a part in the child’s life. Observing the child in the context of their family as well as meeting the child on their own can be invaluable in gathering a holistic picture of the child. It is preferable that this work is done through home visits which will give a sense of the child’s living environment

iii. From other sources: What the practitioner learns from meeting with the child and family needs to be placed next to what is learned from secondary sources of information. In comprehensive assessments the practitioner will need to draw up a detailed chronology of the child’s history and development taken from background reports and information. From this a history of behavioural issues including patterns of offending and the nature and seriousness of previous and current offences can be prepared. Information should be gathered from a wide range of sources: previous reports from relevant agencies such as health or education will be important, information about any previous contact the family has had with social work may be relevant and the current views of the agencies involved in the young person’s life are vital. Contact with the child’s guidance teacher will assist in understanding the child’s educational situation. Having an account of the offence from the police is extremely important to balance the young person’s version of events.

f) Analysing information: Assessment must go beyond merely describing facts in order to move towards an understanding of a young person’s situation and the reasons for his/her offending behaviour. This will be grounded in an understanding of the child’s developmental history and experience of being parented. With respect to the behaviour itself, questions such as

- ‘is this a problem’,
- ‘how serious is it for whom’
- ‘is it likely to require external assistance’
- ‘are the problems getting worse or improving over time’ and
- ‘on what basis do we need to intervene – voluntary or compulsory’

may be useful. Practitioners will also need to understand the offending behaviour within the social context of ‘the diverse array of economic and cultural realities’ which shape both attitudes and opportunities (Muncie 2004). The use of risk assessment tools appropriate to the case can provide a sound empirical basis for the identification of relevant risks, needs and protective factors. Application of a structured offence analysis – or risk formulation - in order to explore how, why and when offending occurs and begin to identify relevant risk and protective factors may be helpful. This formulation should involve descriptions of possible future behaviour in terms of what, when, who, why, impact, imminence etc.

g) Presenting conclusions: The results of assessment often need to be formally presented in reports to formal bodies such as courts or the children’s panel. Although it is important that the practitioner understands who is receiving the report and presents the report in a way that is meaningful to that forum, the practitioner should be careful to ensure the report reflects the
outcome of the assessment and does not try to predict what the person receiving the report is looking for. The practitioner should use their analysis to formulate a view on the best way forward. The report should detail limitations relating to methodologies used or information available. The report should evaluate the quality of information available and comment on any possible bias or limit in the information on which the assessment is based (especially if the assessment is primarily based on self-reported information). Assessments should not be open-ended but draw clear conclusions, with the reasons for the conclusions detailed. There should be a reference to when – or in what circumstances - re-assessment is necessary. The report should contain a clear plan of action linked to the conclusions.

h) **Sharing information**: The assessment should be shared with the young person, their parents/carers and, where appropriate, with other professionals in the child’s life. Thought should be given to how to ensure that the child fully understands the content and recommendations of the report. The views of the child and parents/carers should be included in the report whenever possible.

ii. **Getting it right for every child and Assessing Young People Who Offend**

a) Young people who offend are first and foremost children. Specialist provisions for young people who offend needs to be seen within the wider context of supporting families and meeting children’s needs through the GIRFEC approach. Each of these four elements of assessment outlined above

- collecting information,
- analysing information,
- presenting conclusions and
- sharing information

should be informed by the national practice model.

b) **Getting it right for every child** has an integrated, common approach to gathering information about a child’s well-being. It uses three tools: the **Well-Being Indicators**, the **My World Triangle** and the **Resilience Matrix** to help organise and make sense of information gathered in assessments. These tools have considerable strengths when used with young people who offend as they help us accommodate the multiple needs of young people while retaining a focus on offending behaviour.

c) The construct of well-being is central to understanding how children develop. The My World Triangle helps practitioners gather relevant information into a mental map of the strengths and pressures affecting a child and family. The triangle is deliberately presented from the child’s perspective to reinforce the **Getting it right for every child** principle that children are at the centre of any of the activities of practitioners. The construct of resilience is embedded in the language of GIRFEC and is linked with understanding how risks may be overcome or managed. The ecological approach in these three tools is well-grounded in child development theory about the interactions and transactions that take place within and between different parts of a child’s world (Wassell and Gilligan, 1999; Rose and Aldgate, 2000; Aldgate, Rose and Jeffrey, 2006).

d) The GIRFEC approach provides a holistic assessment of the young person’s needs and strengths but on its own it does not focus in depth on anti-social or offending behaviour. It also does not provide the level of detailed analysis using the principles of risk, need and responsivity (covered in Chapter 3) that is required for the planning of appropriate programmes for intervention to
reduce the likelihood of such behaviour continuing. It also does not provide the level of behavioural analysis required to develop defendable risk management plans. GIRFEC needs to be integrated with the specialist approaches commonly used by practitioners who work with young people who offend.

e) The challenge then is to accommodate the multiple needs of young people while retaining a focus on offending behaviour. More detailed guidance can be found in Appendix 1 relating to how Well-being Indicators, the My World Triangle, and the Resilience Matrix can be used in the assessment of needs and risks for any child about whom there are concerns relating to offending behaviour.

iii. Specialist Tools For Assessing Risk Of Re-Offending

a) All assessments of young people involved with offending should be informed by a structured risk assessment tool. The most commonly used tools for assessing risk of offending in Scotland are currently YLS-CMI and ASSET. Further information on ASSET and YLS-CMI can be found in Appendix 2.

b) ASSET and YLS-CMI identify factors that are statistically linked to re-offending. These risk factors can be divided into two groups: those that are static and relate to historical events which cannot be changed or reversed (e.g. offence history) and those that are dynamic and have the potential to change over time (e.g. misuse of alcohol). ASSET and YLS-CMI identify both static and dynamic risk factors. One of the key assessment tasks is to understand whether these dynamic risk factors identified in the scoring of a tool are relevant for this young person in this particular set of circumstances and to then develop a plan to reduce these dynamic risk factors. In using the tools practitioners should consider how change in these risk factors would be measured over time to evidence risk reduction. This can be achieved in part by reviewing assessments at regular intervals. The frequency of reviews should be linked to level of risk and need of the individual.

c) Structured assessment tools such as ASSET and YLS-CMI have been demonstrated to have a number of benefits. These include facilitating consistent assessment of offending related and other needs, assisting with evidence based action planning and contributing to the review of offender progress and to outcome evaluation.

d) However caution should be applied in using these tools. None of these tools alone gives a full picture of the risk posed by a young person. When used in the context of an understanding of the individual’s background and recent circumstances, they help guide overall risk assessment. It is important that practitioners understand the limitations of any risk assessment tool or method that they use, and that they interpret the results critically and contextualise the results within a comprehensive understanding of the child and their environment. Assessment is not the application of a ‘tick box’ approach but the application of professional judgement supported by the use of assessment tools. Although the recidivism literature helps us identify risk factors that may predispose some young people to further offend, understanding of how risk factors apply to specific individual situations is extremely limited. The use of evidence from research can support understanding of the child and their behaviour, but vigilance is needed about how far these can be generalised to individual situations. Little is known about why these particular factors predict risk, and knowledge about how they interact with each other and how they interact with protective factors - and with other contextual and situational influences - is very limited to date.
With this in mind, it is important that practitioners when completing assessments using tools such as ASSET and YLS-CMI develop a robust risk formulation by repeatedly asking themselves the question ‘how would this particular risk factor contribute to this young person’s offending behaviour’. In addition to this, some authors have suggested that the use of risk assessment tools limits the worker’s task to managing the clusters of risk factors that offenders present. This, they suggest, is likely to be counterproductive, because it can undermine offender’s motivation to change and the development of the critical ‘therapeutic alliance’ between the worker and the offender (Ward and Maruna, 2007). This alliance introduces a human element which contributes to the change process and practitioners need to ensure that the ways tools are used are not a barrier to developing this relationship. This includes considering how we communicate with young people and their families avoiding jargon and obscure language about, for instance, ‘risk factors’ and ‘dynamic change’.

e) Generic tools have limitations with certain kinds of offending, particularly harmful behaviours of a serious nature. YLS-CMI is designed to assess recidivism, not risk of harm. Although ASSET has a risk of serious harm component, this has significant limitations with some forms of offending (e.g. sexual offending). Further information on assessment in relation harmful behaviours of a serious nature can be found later in this manual in Chapter 8.

iii Use of Chronologies

a) A comprehensive youth justice assessment is not simply a snapshot of the child’s current behaviour and its immediate context. It must also understand how the child has got to where they are now, and where they may go in the future. A chronology which covers the significant positive and negative events that have occurred in a child’s life is an invaluable tool for understanding the child and formulating interventions that are sensitive to child’s developmental needs.

b) The absence of chronologies in work with young people who offend has been explicitly noted in recent public inquiries. For instance the follow up inspection into the management arrangements of Colyn Evans concluded that: ‘SWIA did not find comprehensive and up-to-date chronologies in any of the files in the sample. Good risk assessment requires detailed and accurate information. For example, the young person referred to in the previous paragraph had assaulted staff in a residential unit on several occasions, and had a long history of abusive behaviour which could have been identified by an accurate chronology’

c) Chronologies are therefore essential in assisting with risk assessment and management as well being a useful way of gaining an overview of events in a child or a young person’s life.

d) Chronologies should ideally be multi-agency e.g. not just listing offences or the involvement of your service, but also noting key events and involvement of universal services such as health and education, any statutory social work involvement and the involvement of voluntary organisations and specialist agencies. They should ideally involve the young person and their family and take account of their perspective on the significance of events for them.

e) Most local areas have produced guidance on chronology and where available practitioners should use this guidance. If not available, SWIA has also produced a helpful introduction to
chronologies which can be found at: http://www.scotland.gov.uk/Publications/2010/01/22134612 and further guidance can be found as part of the National Risk Framework to Support the Assessment of Children and Young People.

f) Although local guidance will have variations on what should be included in a chronology, in broad terms there is core agreement that they should include:
   - Key dates of birth. With complex families a genogram can be invaluable;
   - Significant facts e.g. child’s name placed on the child protection register, father charged with a schedule 1 offence etc;
   - A very brief note of any significant events and their consequences / outcomes - e.g. coming to school with a bruise followed by a child protection investigation. Many chronologies list events and dates but do not have a column which allows actions taken (or not taken) to be recorded;
   - Offences;
   - Transitions, life changes, moves in accommodation and education, notes of positive achievements;
   - Key professional interventions e.g. reviews, hearings, tribunals, periods in secure care. (Social Work Inspection Agency 2010)

g) A chronology lists in date order all the major changes and events in a child or young person's life. The chronology should be used by practitioners as an analytical tool to help them to understand the impact, both immediate and cumulative, of events and changes on the child or young person's developmental progress: the chronology itself should not include analysis or interpretation.

iv. Analysis in Assessments of Young People Who Offend

a) During an assessment, it is common to gather a significant amount of information. Making sense of this information and using analysis to formulate a plan of action is an important part of securing the best possible outcomes for children.

b) Analysis is not a single skill. It can be an elusive concept, but involves the integration of reasoning, skills, emotional wisdom (in particular awareness of the emotional impact of the work and how this is used as a source of understanding of behaviour of children, families, self and other professionals), formal knowledge (from research and theory), values (e.g. how we balance rights and needs) and practice wisdom (Munro, 2002).

c) It is also important to recognise that analysis is not something done at the end of an assessment, but is rather an ongoing reflective process throughout the assessment period. The idea of actively building and testing hypotheses from the first contact onwards with families would be an example of an analytic approach that continues through the entirety of the assessment process (Dalzell and Sawyer 2007).

d) None the less, the assessor does reach a stage where information gathered during the assessment has to be used to attempt to develop balanced views and decisions in working with young people and their families. Although there is no single way to analyse a complex social situation when a child has committed an offence, analysis typically involve three stages:
- **Weighing the evidence**: Identifying persistent themes that have emerged in the assessment; ranking those themes in terms of priority; identifying gaps in data; examining all findings carefully to guard against selective use of information;

- **Analysing the data**: reaching tentative explanations of the situation, using theory and research for best possible ‘fit’; and

- **Utilising the analysis**: Listing outcomes one hopes to achieve and consequences one hopes to avoid; developing hypotheses around potential intervention approaches; ascertaining how outcomes can be measured; preparing a plan of intervention (Milner and O’Bryne 2009).

e) A key element of analysis when a young person has been involved with offending behaviour will be that of **risk formulation**. This is a form of behavioural analysis looking at the pattern, nature and seriousness of behaviours that cause harm to others as well as a consideration of the likelihood of such behaviours in the future. This brings together a number of key elements of the assessment such as the developmental chronology, information around the index offence and interviews with the young person, their family and other significant adults. It may also use scoring from a structured risk assessment tool, but the score will be used as one component in the analysis which will look beyond likelihood of re-offending to also consider who the individual may be a risk to (**potential victim selection**), in what circumstances that risk may transpire (**scenario planning**) and what people need to do to manage this (**risk management**).

f) The risk formulation should note all concerning incidents the child has been involved with, indicating whether there are periods where incidents have increased or decreased in persistence and/or seriousness and what was going on in the child’s life during these periods. The analysis should look at a range of different behaviours that cause harm to others, not just ‘offending’ per se (e.g. an analysis may look at instances of bullying at school as well as crimes such as car theft and fire raising). It is important to look at the similarities and differences between incidents; manifestly dissimilar behaviours may meet similar psychological needs, for instance; while identical behaviours may meet different needs at various stages in the child’s development. With respect to each incident the following factors could usefully be considered, and then similarities and differences plotted between incidents:

- level of seriousness;
- possible triggers, causal factors and situational factors;
- use of disinhibitors such as drugs or alcohol;
- use of aggression, force or coercion;
- attempts to disguise the offence or secure secrecy;
- level of responsibility/denial;
- understanding of the behaviour in a developmental context (is the behaviour developmentally typical or is it highly unusual);
- level of planning/impulsivity;
- involvement of other participants and the dynamics in relationships with other participants;
- victim selection and the relationship – if any – with victims; and
- victim’s view of the incident.

g) The following factors could also be considered if known:

- level of maturity and understanding of the child at time of each incident;
• young person’s view of the behaviour at the time and at present;
• thoughts and feelings that underpinned the behaviour;
• young person’s mood before and after incidents;
• evidence of pro-offending attitudes;
• understanding of consequences and impact of behaviour on others;
• family’s response to behaviour;
• family’s response to victims;
• family’s view of need for further interventions;
• motivation to address behaviours;
• needs met by the behaviour/motivation (e.g. material gain, excitement; a sense of power); and
• awareness of ongoing risk and possible future risk scenarios.

h) From this analysis some patterns in relation to behaviour should be charted and conclusions drawn about the kind of scenario where the young person may find it difficult to control behaviour in the immediate future. This should lead to recommendations about what will need to happen to manage and reduce risk in the future.

i) Although a solid risk analysis is critically important in analysing offending behaviour, the assessor needs to be mindful of the young person’s needs and vulnerabilities (including the risks they face in their life) from a child protection perspective. In addition to this, risk analysis that ignores strengths and evidence of positive change in learning and development since the time of the index offence will be unbalanced. The risk analysis therefore has to be placed in the context of the assessment of need concerning the child so that an action plan will be holistic rather than narrowly risk focussed and will fully use community and family strengths to help the child move forward.

j) All of this is challenging. Being analytic in assessment work involves checking against the biases and common errors of reasoning that occur in assessment with children and their families that lead to over-rating or under-rating risk. These include:
• not generating sufficient different possible explanations or hypotheses;
• failing to revise risk assessments after initial formulation;
• being sceptical about new evidence that challenges existing views;
• overlooking information, especially when it challenges the original hypotheses;
• being short term focussed and failing to identify patterns in behaviour;
• seeing parental responses during assessments as typical; and
• conformity with other professions rather than developing an independent view (Munro 1999).

k) The practitioner is likely to require support to develop an ability to critically think about their own presumptions and blind-spots in assessment. One consistent finding in the research on assessment is that reflective and critical approaches to analysis occur in situations where good supervision and regular opportunities to discuss cases with colleagues creates an atmosphere which allows professionals to tolerate uncertainty and anxiety and question their own assumptions in open and non-defensive ways (Helm 2009). Best practice involves thinking about our strengths and limitations as practitioners in an open way. This can only be done in an organisational context that allows this to happen.
v. Presenting Recommendations

a) Conclusions need to be as fair, balanced and accurate as possible. Disagreements in perspectives between practitioners and agencies should be presented in a way that is representative. Conclusions should be forward looking and solution focussed. The following checklist may be useful:

- Is the assessment a balanced view of risks and needs?
- Does the assessment look at the young person’s vulnerabilities as well as their behaviour?
- Have the views of relevant family members been established and integrated accurately and fairly?
- Does the view weigh up positive factors, strengths and resilience factors?
- Is it clear how the decision was made? Has the process been explicit?
- Is there anything about the language that is unnecessarily loaded or undermining? Are there stereotypes or pathologising language in evidence?
- To what extent does the ordering of points impact on the way the report is received and understood? Are family members tending to be portrayed at first negatively? (adapted from Dalzell and Sawyer 2007 pp 91)

vi. Sharing Information

a) It is important that children and their families are provided with an account of the decision-making process, explaining what was looked for during the assessment, what evidence was weighed up and how the conclusion was reached. One of the biggest challenges in all of this is sharing information about risk with children and families that is understandable and clear. Risk is a multi dimensional concept and so further complications and confusion may arise when attempting to use ‘catch all’ phrases to describe an individual’s situation, such as high, medium or low risk. Instead the nature, seriousness, pattern and likelihood of offending should be described in order to capture a meaningful understanding of the risk posed by an individual, in the context and time frame in question. This should be done in a manner that respects the dignity of the individual.

b) For instance, a 17 year old individual who engages in various forms of dishonest antisocial behaviour, has committed several alcohol related assault offences three years ago, and now has been charged with indecent exposure presents many challenges. There are a number of possible negative outcomes and the likelihood and seriousness of each need to be evaluated separately. These risks need to be communicated in a meaningful way and at an appropriate developmental level to discuss with him what needs to be done to reduce those risks (Risk Management Authority 2011).

c) In terms of sharing information practitioners need to consider carefully who needs to know what. For example, considering the case of a 15 year old charged with a sexual offence against a younger child, it may seem appropriate that the assessment report is shared with his school guidance teacher. However careful consideration in consultation with the line manager will be necessary before a disclosure at this level is made: the analysis in the report may include detailed information about the child’s background that is irrelevant to behavioural management of the
child in a school context (e.g. information about the child’s history of being sexually victimised). The sharing of information needs to be proportionate and balance rights – the right to confidentiality on the part of the child and family on one side and the rights of the adult to have access to information that will allow them to manage risk appropriately. Information from assessments should be shared at an appropriate level of detail to allow individuals to take appropriate courses of actions to reduce or manage risk in the immediate future.

vii. Assessment Formats

a) In working with young people who offend, practitioners are required to be familiar with a number of different assessment formats.

b) If a young person commits an offence and it is dealt within the Children’s Hearing System the reporter may request either an Initial Assessment or a Full Assessment. An initial assessment may be described as an Initial Assessment Report (IAR) while a full assessment is described as a Social Background Report (SBR). Some authorities have moved towards the Integrated Assessment Framework (IAF) as a format for full assessments. Practitioners need to know what formats their local authority uses for reports.

c) Every young person referred to the Children’s Reporter on offence grounds should have an initial assessment of their offending behaviour, carried out by or on behalf of the social work department. For a new case, reports should be submitted to SCRA within 20 days of the request date. Where a full assessment is requested as a result of a review, the timescale for completing the report will be indicated by the reporter. When there are issues that hinder a report being completed e.g. families refusing to cooperate or school holidays stopping access to educational information, a report should still be prepared in the timescale. The report should outline number of visits to the home attempted and as much information as can be gathered from other sources.

d) In the Adult Criminal Justice System the Court will request a Criminal Justice Social Work Report (CJSWR). This must be returned to the court by midday on the day prior to the Court date. The Criminal Justice Social Work Reports and Court Based Services Practice Guidance 2010 notes that when writing a CJSWR on a young person involved in offending (under the age of 18 years), their needs as well as risks require to be taken into account and the GIRFEC principles must be used.

e) Authors of CJSWRs should be aware of the power of the Sheriff Court under Summary procedures to remit any offender under the age of 17 years 6 months to a Children’s Hearing for advice and possible disposal as this may provide opportunities for diversion from the adult system for some young people.

f) Each assessment format requires a slightly different presentation but the process of gathering analysing and presenting information should be similar and follow the guidance above.
III PLANNING

i. The Single Plan is a comprehensive plan developed to meet the needs of the young person. This should be a single plan of action, managed and reviewed through a single meeting structure even if the child is involved in several processes, such as being looked after or having a co-ordinated support plan. The plan should also set out actions designed to improve the outcomes for the child. Where offending is a factor, part of the plan should be focussed on tackling this behaviour and managing risks in the community.

ii. The part of the Single Plan that concerns offending behaviour should relate directly to the assessment of specific and measurable risks and needs and should be developed in line with the principles of risks, needs, responsivity and desistence. Issues or areas of the young person's life identified as problematic for them or related to challenging behaviours should be identified in the plan with actions designed to address them e.g., alcohol use and alcohol related offending. Similarly aspects of the young person's life identified as supporting criminal behaviour - criminogenic needs - should be addressed through the plan.

iii. Research has suggested that a common failing of action plans in adult and youth justice settings is that they often do not identify objectives related to problems that were identified in the assessment as being ‘very offending-related’ (Merrington, 2001). It is essential that components of the Single Plan designed to challenge offending behaviour are clearly linked to assessed needs and risks.

iv. The young person and their family (where appropriate) should be involved in constructing the plan and this should be evident from the plan. The plan is the basis for monitoring and review. It should include:
   - Reasons for the plan;
   - Partners to the plan;
   - The views of the child or young person and their parents or carers;
   - Summary of the child or young person’s needs;
   - What is to be done to improve a child’s circumstances;
   - Details of action to be taken;
   - Resources to be provided;
   - Timescales for action and for change;
   - Contingency plans including risks;
   - Arrangements for reviewing the plan;
   - Lead professional arrangements where they are appropriate; and
   - Details of any compulsory measures, if required.

v. Plans or contracts should be understandable to the young person and relevant others, and produced collaboratively with the young person, their parents/carer and other relevant agencies. There should be clarity with the young person about what is expected of them and the consequences, including formal enforcement of not complying with those expectations.

vi. All actions detailed in a plan in relation to offending behaviour should be SMARTER:
• **Specific:** clear about what, where, when, and how the situation will be changed. It should also specify who will be responsible for delivering that intervention.

• **Measurable:** able to quantify the targets and benefits. This means agreeing objectives that can be reviewed in a way that makes clear whether they have been met or not, if the situation has improved or not.

• **Achievable:** able to attain the objectives. This may mean setting short and longer term objectives showing a staged approach to improvement. Planning in youth justice often involves negotiating care plans with individuals who have a great deal of uncertainty and disorganisation in their lives, and set outcomes for the plans need to be realistic.

• **Relevant:** linked to relevant identified needs or risks. These will be identified through assessment and it should be clear what risks are being addressed with what interventions.

• **Time bound:** stating the time period in which they will each be accomplished. Again this may be separated into short and longer term objectives but there should be clarity about what level should be achieved at what stage.

• **Evaluated:** the intervention should be evidence based. If this is not possible it should be based on defensible principles and be implemented as it is applied to similar young people and therefore can be evaluated (see Chapter 9)

• **Resourced:** Interventions have cost implications. Assessments should be needs based. If a suitable resource is not available or a particular need cannot be met in current budgets, this needs to be clearly recorded.

vii. SMARTER planning can be motivational for young people as it allows them to see in tangible ways the progress they are making. An example of a plan to reduce a young person’s offending behaviour can be found in Appendix 3.
IV  YOUNG PEOPLE IN THE ADULT CRIMINAL JUSTICE SYSTEM

i. If the child or young person has received a disposal in the adult system they will have a probation action plan or a case management plan as part of a community payback order. Such plans should follow the GIRFEC principles and ideally be considered part of the Single Plan if the individual is under 18.

ii. A case management plan should cover how a young person’s needs can best be met. On the occasions that a Criminal Justice Social Work Report (CJSWR) is requested, the plan should be identified at the CJSWR stage and contained within that report. Where a Community Payback Order containing an offender supervision requirement is imposed, the appointed case manager should arrange to meet the individual within 5 working days of the date of imposition of the order. The case management plan should be considered and expanded upon during the initial stages of the offender supervision requirement. This fuller assessment, informed by an agreed method or tool, should be undertaken within 20 working days of the requirement being imposed, taking into account the assessments of the likelihood of further offending along with a consideration of the pattern, nature and seriousness of the offending to date. This will determine the main elements of the case management plan, including the level of supervision intensity necessary to support rehabilitation.

iii. Individuals working with young people in the adult criminal justice system need to refer to Guidance on Community Payback Orders and Chapter 5 of the National Outcomes and Standards for the Social Work Services in the Criminal Justice System (NOS) which covers case management.

V  INTERVENTION

i. DIRECT WORK WITH YOUNG PEOPLE WHO OFFEND
   a) Assessment directs and enables the process of planning intervention work. As such assessment itself is the beginning of any intervention and the Lead Professional’s approach to this must begin the process of building the supportive relationships required to sustain change. This approach should ensure clarity of roles and responsibilities and embrace the pro-social principles outlined in Chapter 3 (Theory and Method).

   b) For those children and young people who have progressed through the Children’s Hearing or Court Systems as a result of their offending behaviour, research indicates that the most effective interventions are those that address both their social and criminogenic needs. Successful interventions tend to be:
      • **Community based**, allowing for the application of learning to real, current difficulties, the opportunity to practice what has been learned and access to resources, activities and relationships which can support positive change (Lipsey & Wilson, 1998, Maruna, 2000).
      • **Structured**, using methods which are based upon a model of change and are appropriate to the attitudes or behaviour which is the focus of intervention.
      • **Multi-modal**, that is, employing a variety of methods to address a range of criminogenic needs, such as: cognitive behavioural approaches (Kurtz, 2002, Lipsey 1995, McGuire, 2000), education programmes, restorative justice (White, 2003), family work (Kurtz, 2002, McGuire et al. 2002)
• **Skills-oriented**, including cognitive skills such as consequential thinking, problem solving and critical reasoning; interpersonal skills such as self-control, conflict resolution, empathy and communication; literacy and numeracy skills; vocational skills; and creative or physical skills.

• Able to model **pro-social behaviour** with staff demonstrating respect for individuals by being punctual, reliable, courteous, friendly, honest and open (Trotter, 1999).

• Exhibit a high degree of **programme integrity** that is, are theoretically informed, rigorously managed and delivered as designed. However, programmes should be flexible enough to meet the responsivity needs of the child or young person (McGuire & Priestley, 1995).

• **Employment related**, Farrall (2002) indicated that deistance is linked to the ability to make changes and acquiring employment encourages young person to re-evaluate their own situation.

• Only by continually **monitoring and evaluating** programmes can workers offer evidence based interventions (McGuire, 2000).

  
c) Effective packages of intervention may involve group, individual and family work or a combination of any or all of these. The appropriateness of each will be determined by the factors which are identified as being related to the offending, the young person’s circumstances and the objectives of the Single Plan.

  
d) **Group work** is appropriate for:

  - role play and rehearsal of appropriate behaviour;
  - peer education;
  - peer challenge and support;
  - cognitive and interpersonal skills training;
  - reflection on common difficulties.

  
e) **Individual work** is appropriate for:

  - building motivation;
  - young people requiring high levels of intervention and surveillance to protect others from the risk of serious harm;
  - reflection on some personal disclosure, including disclosure in relation to offences;
  - self-monitoring and self-instructional training;
  - tutoring or applying learning outcomes from group work to personal circumstances;
  - managing personal obstacles to programme participation.

  
f) **Family work** is appropriate:

  - When offending behaviour has some origins in family relationships or difficulties or when the family could be actively engaged in efforts to prevent further offending.

  
g) Interventions provided by services which work with young people who offend can only have a partial effect on future behaviour. Issues such as housing, benefits, training, education and employment and general social factors in the community will also influence re-offending. Effective intervention must therefore take into account these factors and strive to co-ordinate and organise other agencies, community organisations and families so as to reduce the risk of re-offending. The importance of linking individuals to local resources and more mainstream services is borne out by evidence that states:
• Behaviour change achieved by effective programme delivery must be actively maintained for some time after completion of the programme;
• effective plans must be in place to prevent relapses from undermining progress already made; and
• desistance from offending is often promoted by maturity and engagement in pro-social activities and relationships.

ii. **INTENSITY, SEQUENCING AND DURATION**
   a) In line with the **risk, need and responsivity principle**, the purpose of the intervention will differ according to the risk of re-offending that the young person is assessed as presenting as well as the other needs identified. Programmes for low risk young people are likely to focus on accessing more mainstream services and supports and are covered in the Early and Effective Intervention chapter.

b) Intervention work with **young people at moderate risk of offending** should be designed to:
   • increase motivation to change;
   • reduce participants' dependence upon anti-social associates;
   • challenge and change values, beliefs and attitudes which produce anti-social motives, definitions of situations and rationalisations;
   • develop the cognitive skills and inter-personal skills necessary to sustain pro-social personal and working relationships;
   • enable participants to widen their awareness of and put into practice more pro-social roles; and
   • be perceived by participants as empowering.

c) Intervention work with **young people at high risk of offending** will do the above but is more likely to also:
   • explore offending behaviour;
   • support families/partners and other significant relationships;
   • include a wraparound component for support and monitoring;
   • gain access to resources in the community;
   • be multi-modal in nature;
   • include risk management processes where necessary.

d) As a general rule, more intensive structured programmes for high risk young people tend to be multi-modal involving combinations of individual work, community based interventions, family work and close co-ordination of professionals in the young person’s life. The areas of assessed risk contributing to offending behaviour should be addressed through a combination of approaches and methods to allow reinforcement of learning and not by one approach in isolation.

e) Linking young people to the right intensity and duration of intervention is essential, as is sequencing the order of components of the intervention. The over-arching principle of reserving the highest intensity for those at high need or risk reflects both the practical concern of using scarce resources efficiently but also heeding research findings that inappropriately intensive intervention can be counter-productive. Findings from meta-analysis have indicated that a
median duration of 23 weeks for a structured programme is positively associated with reduction while the number of hours per week below the median of 5-10 hours is negatively associated with reducing re-offending (Lipsey, 1999). Other commentators suggest that intensive programmes should ‘occupy 40%-70% of the offender’s time over a period of 3-9 months’ (Gendreau et al, 1994) if they are to be effective. These conclusions are drawn from aggregate findings and caution is needed in applying them in any routine way. Nonetheless, they stress that interventions have to be long enough to achieve the intended outcomes that may be related to acquisition of knowledge, skills, attitude changes and their application to real world situations (Whyte 2008).

iii.  **INTERVENTION PROGRAMMES TO REDUCE OFFENDING**

a) A number of specific programmes for individual or group work have been developed to target young people who offend. In choosing a specific intervention programme, the practitioner may wish to consider the following questions:

- Is it proportionate to the seriousness of the offending behaviour and the assessed risk of re-offending?
- Will it help reduce the risk that this young person will re-offend?
- Will it help to manage any risk of harm posed by the young person to other people?
- Will it contribute to reducing risks faced by the young person (or promoting resilience that will help the individual manage these risks more effectively)?
- Does the young person have a reasonable chance of being able to complete it?
- How will it address the concerns of any victims involved? (Youth Justice Board 2003)

b) Research has begun to deliver lessons on the type of elements that any intervention should involve for maximum effectiveness. There is no single approach that is guaranteed to reduce offending but there is promising evidence for cognitive behavioural and skills oriented approaches. The location of these programmes in the community rather than in institutions also enhances their effectiveness as does the delivery of programmes by well trained and supported staff. While fully structured programmes tend to be designed for group work, plans should include structured individual work where appropriate or where group work is not practicable.

c) Across a number of studies a consensus has been reached with regards to establishing a core set of characteristics for programmes which can be broadly defined as follows:

- the programme is derived from a theoretical model or a robust evidence-base regarding ‘what works’ in reducing youth offending;
- the programme is delivered in close proximity to the young person’s normal home environment in order to facilitate learning that is easily transferable;
- the programme is delivered with appropriate intensity, based on a comprehensive risk and needs assessment of the young person;
- the programme **directly addresses criminogenic needs** as identified through the assessment process, for example negative peer associations, substance misuse etc. and is multi-modal (i.e. addresses several risk factors);
- the programme incorporates some form of **behavioural and interpersonal skills training**, for example cognitive behavioural therapy (CBT);
- facilitators can adapt their approach to a range of learning styles, understanding the process of change as a highly individualised one;
the treatment programme maintains ‘programme integrity’ i.e. the programme design is adhered to, staff receive appropriate levels of training and supervision, the programme is adequately resourced and the efficacy of the programme is regularly monitored and evaluated; and

- Sufficient aftercare and relapse prevention training is provided (for example, booster sessions, training of significant others to provide reinforcement).

d) In assessing whether a particular programme would be beneficial for a young person the practitioner should apply the above criteria.
A summary of some of programmes currently in use in Scotland can be found in Appendix 4.

iv. PROMOTING PROTECTIVE FACTORS

a) Although structured programmes have their place in working with young people who offend, consideration needs to be given to promoting protective factors outwith the context of programme work. Effective practice involves increasing protective factors against offending as well as reducing risk factors for offending. Protective factors, such as social support, play a crucial role in developing successful coping skills which increase the young person’s resilience in the face of risk factors (Pinkerton & Dolan, 2007).

b) Protective factors include:
- personal factors (e.g. a resilient temperament; positive social orientation; emotional and cognitive skills; and pro-social gender definitions);
- family cohesion and warmth;
- relationships which reinforce individual competence and commitments and which support and enhance pro-social attitudes and beliefs;
- the influence of authority figures who lead by example, have high expectations of achievement and offer recognition and praise;
- healthy lifestyles;
- opportunities for involvement and participation in pro-social activities and relationships; and
- employment/education to promote a sense of belonging, responsibility, decrease negative use of leisure time and encourage positive social relationships. (Farrall, 2002, Maruna, 2000, Pinkerton & Dolan, 2007, Trotter, 2000)

c) These must be identified and supported or developed through the process of assessment and intervention. The emotional and cognitive skills which help to develop resilience should form the substance of any cognitive and interpersonal skills programme. They include:
- social competence (empathy, flexibility, communication skills and a sense of humour)
- problem-solving skills (planning, critical thinking and resourcefulness)
- autonomy (sense of identity, self efficacy, achievement, self awareness and independence)
- a sense of purpose and a bright future (goals, motivation to achieve, persistence, optimism and meaning)
v. FAMILY WORK

a) In most cases engagement with the family at some level will be essential. Minimum standards in engaging with families where a child has offended include the following effective strategies for engaging families in planning and supervision:

- putting families at ease and taking care not to overwhelm them;
- making sure they get all the information they need to be informed partners with a meaningful role;
- taking time to explain technical data, complicated situations, or the political environment in which a decision has to be made;
- orienting family members to their roles and responsibilities;
- presenting written materials to family members in advance (when possible), in their primary language, without jargon;
- identifying shared goals and focusing on these while recognising that agreement on everything is not likely or even desirable;
- evaluating progress together;
- keeping communication open, honest and consistent;
- sharing decision making and working to find win-win resolutions to problems encountered during the process;
- recruiting a diverse team of family members, training and supporting those who are willing to become engaged (Osher and Huff, 2006).

b) However more structured approaches to work with families may be necessary when family functioning is a significant contributory factor in the child’s behaviour. Research suggests that two broad categories of family-based interventions are associated with effective outcomes with young people involved with offending: parent training and structured family work (Whyte 2008).

c) Parent training courses aim to help parents respond more constructively to young people, to use discipline less harshly and more consistently and to manage conflict situations better than with control groups. By the time a child reaches adolescence, both the child and the parents are following well-established patterns and are more resistant to long-term change (Patterson et al, 1992). The most promising parent and family-based interventions combine training in parenting skills, education about adolescent development and the factors that predispose young people to criminal behaviour with other approaches such as social and problem-solving skills for young people, proactive classroom management and peer-related programmes (O'Donnell et al, 1995). Effective programmes typically include exercises to help parents develop skills for communicating with their children and for resolving conflict in non-violent ways. The **Triple P Parent programme** is an example of this approach.

d) A number of structured approaches to family work are available. Solution-focused work is strengths based and explores knowledge and resources within the family and young person. Practice focuses on the present and future to explore what the individual wants to achieve rather than simply on problems. The intention is to help construct a concrete vision of a ‘preferred future’, identifying aspects of current life that are closer to this future, bringing small successes to awareness in order to reinforce them. The approach requires regular commitment of time by all family members and attempts to achieve change by opening lines of communication, challenging scapegoating, reducing blame and guilt, increasing empathy and acceptance of differences and making new agreements for being together and resolving problems. Well-
structured family work of this nature has shown a positive impact in reversing negative behaviours among troubled youth, particularly those with substance abuse problems (Schmidt et al, 1996).

e) **Functional family therapy** (FFT) focuses on the multiple domains and systems within which young people and their families live. It attempts to target both the family and the individual behaviour of the young people by employing intensive and research-driven techniques aimed at identifying and reversing negative family dynamics that produce problem behaviours. FFT has been shown to reduce the re-offending rates of youth by 25% to 80% in repeated trials, carried out mainly in the US. In one trial FFT with serious and persistent offenders showed that participants were almost six times as likely to avoid arrest (40% versus 7%) than the control group (Barton et al, 1985).

f) **Multi-Systemic Therapy** (MST) targets young people (aged 12-17yrs) who are displaying challenging behaviours at home, school and/or in the community and are at risk of being placed out of the family home. It is an intensive intervention that targets the multiple causes of serious anti-social behaviour in young people. MST works with the individual, family and other systems such as peers, school and community during the assessment and treatment process. It is aimed at preventing out of home placements and reducing the occurrence of anti-social and offending behaviour. The practitioner is responsible for removing barriers to service access and practitioners are available to families 24 hours a day, seven days a week. Work with families is intensive (up to 15 hours a week) and length of treatment is typically 3-5 months. To achieve sustainable outcomes, evidence based interventions are individually designed and delivered, and a positive strengths based approached adopted. Further information on MST can be found in Chapter 7 of this guidance.

g) Foster care for young people aged 12-18, involved in serious and persistent offending, is likely to provide a more effective alternative to secure or institutional care. Evaluations have shown fewer arrests, less time spent in custody and more time at home over the subsequent two years than controls (Chamberlain, 1998). Evidence from UK schemes suggest that foster families looking after ‘high-risk’ children experience significant relationship difficulties and may require extra support to handle the challenges presented by young people at high risk of offending (Chamberlain et al, 2007). Nonetheless, a high proportion of young people involved in serious or repeat offending placed with foster parents succeed in staying out of trouble during their placement (Utting and Vennard, 2000). Forensic foster care schemes such as **Multi-dimensional treatment foster care** have shown some success in providing a community based alternative to secure care or custody.
VI Review

i. Reviews identify:
   - Whether an intervention has achieved what it set out to do;
   - Assesses progress and to identifies any further work that needs to take place.
   - Provides an opportunity for the young person to give feedback on how the intervention programme is going for them.
   - Identifies any key challenges or issues and to make any changes necessary to the plan.

ii. If cases are not reviewed an intervention may be inappropriate, ineffectual or even damaging to the young person.

iii. It is worth considering the scope of reviews. As noted above under the section on ‘Analysis in Assessment’ there are a number of ‘common errors or reasoning’ that have been identified in work with children (and specifically child protection work) that impact on effectiveness of interventions and have relevance for practice in youth justice settings. A major problem is that professionals tend to be slow to revise their judgements despite a mounting body of evidence against them. Obvious techniques for challenging this natural bias would include ensuring that reviews are independently chaired, and supervision is used to critically review assessments against emerging information on a regular basis. Reviews should be opportunities to re-think what is known in a case, as well as assessing whether a young person has progressed against agreed outcomes, reviews should also be used to also explore whether the outcomes were right in the first place.

iv. The form reviews should take will differ according to individual need and should be based on the assessed risk level and level of intervention required. In line with the principle of GIRFEC, review structures should be in place so that a young person’s situation is not being reviewed in a variety of different formats.

v. Individual local authorities will have clear guidance in place for reviews. Reviews are dependent on risk and need but in the children’s hearing system should not be less than 6 monthly.

vi. Every review must result in the production of an updated plan. This update plan should contain an assessment of how well the previous objectives were met and whether these objectives are still relevant. It should also link any new objectives to the updated risk assessment.

vii. Reviews should establish progress made towards objectives and any changes to these. For children and young people involved in the adult criminal justice system, review requirements should comply with National Outcomes and Standards for Social Work Services in the Criminal Justice System.
Appendix 1

The Integrated Assessment Framework and Youth Offending

The following provides guidance on how youth justice assessments in Scotland could use the GIRFEC approach:
David is a qualified social worker who is currently working in a youth justice team. He receives a request from the reporter for an SBR in relation to Kyle a 14 year old young man.

Kyle lives with his mother. He has two siblings; a 9 year old sister and a 17 year old brother who is serving a sentence for car theft. There has been intermittent involvement with children and families social work in the past because of issues around neglect at home and his mother’s use of alcohol.

Kyle has been recently charged with a racially aggravated assault of a shopkeeper. This occurred after he had been accused by the shopkeeper of stealing from his shop.

David goes out to meet Kyle and his mother. He explains that he has been asked to prepare a report for the children’s panel to look at whether Kyle needs help in keeping out of trouble in the future. David asks about the incident with the shopkeeper: Kyle comes across as remorseful about what happened but unreflective about why it took place. His mother is very worried that he is starting down a road of offending that his older brother has followed.

David asks about Kyle’s day to day life. He says he’s bored much of the time, has a limited social circle and has started to miss some school on a fairly regular basis.

David acknowledges that there has been social work involvement with the family in the past; Kyle’s mum notes that her drinking got out of hand two years ago when she lost her job and this had a real effect on the family. She however has managed to get some help from her GP about this and she thinks that this is under control. At the end of the meeting David agrees to meet with Kyle on a further 4 occasions at his office as well as arranging a further meeting with Kyle’s mother.

After the meeting David thinks about the GIRFEC well being indicators and how they apply to Kyle. Kyle seems safe at home, but his day to day life seems to lack activity or achievement. David speaks to the school and Kyle’s guidance teacher says that she is worried about Kyle’s non-attendance during parts of the week. It’s agreed that some support will be put in place to attempt to get Kyle to school each day while David undertakes a fuller assessment. David agrees to attend a professionals meeting about Kyle’s difficulties at school the following week.

David does work with Kyle in sessions, building a relationship, finding out his likes and dislikes and putting together a family tree. They do a detailed storyboard in relation to thoughts and feelings around the time of the offence; do some exercises about the impact of the offence and some questionnaires in relation to racist attitudes. David also puts together a detailed chronology from information from Kyle’s mother supplemented by information in the social work files.

After 3 sessions with Kyle, David scores Kyle on ASSET and considers Kyle with respect to the My World Triangle. This helps inform the content of the last session where David does some work with Kyle about how he feels about himself and how he sees himself in the world.

David then looks at the Resilience Matrix which helps him structure all the information gathered, plotting the risks and positive factors to assess the need risks. Taking account of all this information, a plan of action based around the well-being indicators with specific outcomes for David is devised). This combines some restorative work with the shopkeeper alongside a programme that links Kyle in with some community activities he will find interesting and challenging and builds on the school’s plans to help Kyle get back on track educationally. David shares the plan with Kyle and his mother who feel that it is appropriate. David writes his report, outlining his plan and recommending that he works with Kyle on a voluntary basis over the next 3 months to help achieve these outcomes.
COLLECTING INFORMATION:

There are eight indicators of well-being. These are being:

- Healthy;
- Achieving;
- Nurtured;
- Active
- Respected;
- Responsible; and
- Safe.

These *Well-being Indicators* are the basic requirements for all children and young people to grow and develop and reach their full potential. The first stage of an assessment where a young person has been involved with anti-social or offending behaviour involves using the well being indicators to collect and share information about the child that may indicate need or concern. When undertaking an assessment a practitioner will need to ask the following questions:

- What are the areas of a child’s well-being that are causing concern?
- Why do I think, on initial contact with child and family, this child is at risk? The term risk here applies to both the risk the child is currently exposed to and the risks they may present to other individuals through their actions and behaviour.
- What have I observed, heard or identified from the child’s history that causes concern? A concern can be an event itself, or a series of events, or attributes, which affect the well-being or potential of a child. A concern might be an attribute or characteristic of someone associated with the child or a fact about someone associated with the child
- Are there factors that indicate this child is at immediate risk and, in my view, are those factors severe enough to warrant immediate action?

These questions should guide initial decision making in assessment work and ensure that we promote safety when working directly with children and their families.

All practitioners who have identified a concern then need to ask themselves the following five questions:

- What is getting in the way of this child or young person’s well-being?
- Do I have all the information I need to help this child or young person?
- What can I do now to help this child or young person?
- What can my agency do to help this child or young person?
- What additional help, if any, may be needed from others?

If the practitioner has sufficient information, help can be put in place without delay either by a single agency or more than one agency co-ordinated by a lead professional.

These questions will often involve looking in more detail at what is happening to the whole child by using the *My World Triangle* alongside the use of specialist assessment tools in relation to offending behaviour.

The *My World Triangle* promotes a model of practice that considers children’s needs and risks. Strengths and pressures are given equal consideration and can be plotted around the triangle. Information gathered should be proportionate and relevant to the issues in hand. In many cases, it will not be necessary to explore every area of the triangle in detail but only look in depth at those relevant to the
risks and needs. However, it is still important to get an overview of the child’s whole world and assess the impact of risks on other areas of a child’s life.

My World Triangle:

Using the My World Triangle allows systematic consideration of:

how the child or young person is growing and developing
what the child or young person needs from the people who look after him or her, including the strengths and risks involved
the impact of the child or young person’s wider world of family, friends and community.

Gathering information using the My World Triangle will highlight where more specialist information should be gathered from different sources. This may include information about children’s health or learning or information about issues affecting parenting. This is the point at which structured tools such as ASSET or YLS may be used to identify particular aspects of risk. A detailed understanding of the offending behaviour and its context will also be necessary. A more detailed risk assessment involving relevant tools should be used at the stage with respect to sexually harmful or violent behaviour.
ANALYSING INFORMATION:

A major advantage of the *Getting it right for every child* practice model is that it not only identifies risks but also looks at protective factors that may ameliorate these risks. While many factors will influence children’s development, it is sometimes important to weigh the evidence in helping to decide how much good experiences offset bad experiences. This approach is concerned as much with management of risk as with assessing the factors that may cause harm. Such an approach incorporates the identification of protective factors that can build resilience in children.

The concept of resilience is fundamental to children’s well-being and is used in assessments by practitioners from many agencies. Resilience in children occurs when, given their circumstances, a child is doing better than one might expect. The following diagram developed by Daniel and Wassell (2002) illustrates how assessment of protective factors can be assessed alongside factors of adversity on one axis. This then enables the practitioner to weigh the factors which will promote resilience against those which would endorse vulnerability. This tool provides a practical way of applying evidence and knowledge about strengths and risks within the context of professional judgement.

**The Resilience Matrix**

<table>
<thead>
<tr>
<th>Resilience</th>
<th>Protective environment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Characteristics that enhance normal development under difficult conditions</td>
<td>Factors in the child’s environment acting as buffers to the negative effects of adverse experience</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Adversity</th>
<th>Vulnerability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life events or circumstances posing a threat to healthy development</td>
<td>Characteristics of the child, the family circle and wider community which might threaten or challenge healthy development</td>
</tr>
</tbody>
</table>

Practitioners can use the *Resilience Matrix* to make sense of the strengths and pressures from the *My World Triangle* along with any specialist information, and to identify the areas where help should be focused. They can group the information within the four headings of *resilience, vulnerability, protective environment and adversity*. By grouping the information, the risks that are causing gaps in the child’s
well-being and indications of what needs to change will become clear. Then they need to use professional judgement to weigh the balance of risks and positive factors and decide on the priorities for action.

In a youth justice context using the resilience matrix has a number of merits. Firstly it links to the desistance paradigm in youth justice work (hyperlink to chapter 3) and the importance of helping young people end or reduce re-offending by development of those own skills and resources. Secondly, by moving from a preoccupation with risk and by identifying and developing positive aspects of an individual’s life the practitioner may be contributing to:

- the promotion of self esteem and self-efficacy;
- an increased ability to resist offending choices and the influence of others;
- increasing potential alternative sources of protection such as improved parental supervision;
- reduced negative and increased positive interactions: and / or
- the possibility of changing a negative, distorted mindset associated with offending choices to a more positive, change orientated one (Farrow, Kelly and Wilkinson, 2007)

The resilience matrix does not ignore risk. It is the start of a process that unpacks the individual child’s circumstances and considers the impact of those circumstances on the particular child. This analysis will assist the practitioner to see clusters of vulnerabilities and strengths, sitting within the four quadrants and identify if there are clusters of risks in the areas of individual vulnerability and adversity. The child’s circumstances can be plotted on each of the two continuums, which will allow the practitioner to see where the impact of these circumstances places them within the Matrix:

- Resilience within a protective environment (low risk);
- Resilience within a context of adverse circumstances (medium risk);
- Vulnerable within a protective environment (medium risk); and
- Vulnerable within a context of adverse circumstances (high risk).

PRESENTING CONCLUSIONS

The risk assessment should then map the risks from the Matrix against the eight Well-being Indicators to identify where action needs to be taken. This can be used as a risk assessment tool to help construct the child’s plan. Well-being Indicators can be used as a tool to focus the risks to prioritise, to construct a description of what needs to change, and to detail actions to be taken to improve the child’s well-being and the expected outcomes. This can then be used as the basis for reviewing progress and, if necessary, revising the plan.

SHARING INFORMATION

Getting it right for every child sees the involvement and partnership with children and families being integral to successful risk assessment and management. Without families’ perspectives on the risks to their children’s difficulties, practitioners’ information is incomplete and they cannot reach a good understanding of the risks of harm and needs of children. If this inclusive approach is to be adopted, it has to be recognised that there may be some tensions and differences between the perspectives of service users, carers and professionals. Research evidence suggests that in some cases, service users may be less likely to identify risks than either carers or professionals (Stalker 2003). In others, they may see risks to themselves where professionals do not. These potential tensions are, however, no excuse for not involving service users in risk assessment.
If users are really to be empowered, they must be allowed to identify the factors that present them with risks, as well as the risks they are prepared to take. Users’ views of risk will also vary according to how much choice and control they think they have.
Appendix 2

Structured Assessment Tools

I ASSET

Background: ASSET was developed in 1999 by the Centre for Criminology Research at Oxford University in partnership with the Youth Justice Board for England and Wales. It is a structured assessment tool which looks at the young person’s offence or offences and identifies a multitude of factors or circumstances – ranging from lack of educational attainment to mental health problems – which may have contributed to such behaviour.

Suitability: The tool can be used with young people aged between 10 and 17 who are involved in or at risk of being involved in offending behaviour. ASSET is complimented by the assessment tool ONSET which is designed for assessment for early intervention with respect to youth offending.

Description: The tool consists of 13 sections that encompass a wide variety of criminogenic needs including: family and personal relationships; substance use, attitudes to offending, statutory education and lifestyle. Individual questions require a ‘yes’, ‘no’ or ‘don’t know’ response, and the practitioner is also required to assess each section’s probability of contributing to future offending behaviour, on a scale of 0 to 4 (where 0 is ‘not associated at all’ and 4 is ‘very strongly associated’). Factor scores can then be combined into a global or ‘current’ score out of 48, with a higher score signifying greater assessed risk.

The information gathered from ASSET can be used to inform Hearing and Court reports so that appropriate intervention programmes can be drawn up. It will also highlight any particular needs or difficulties the young person has, so that these may also be addressed. Asset also helps to measure changes in needs and risk of re-offending over time.

Triggers: ASSET includes an ‘indicators of harm’ section. Answering yes to any of the questions in this section means that a separate ‘Risk of Serious Harm’ (ROSH) ASSET needs to be completed. ASSET guidance suggests that an analysis of the core asset profile along with additional information is needed to ‘make a comprehensive assessment of risk of serious harm to others’

An individual scoring of 2 or more on section 9 of ASSET would suggest that a screening process for mental health needs should be undertaken.

Evaluation: 67% accuracy in predicting reconviction was recorded in a study of 1081 cases of young people who had received a final warning from the authorities. The study was conducted across gender, ethnic minority and younger age groups (Baker, Jones, Roberts and Merrington, 2002).

A further study, using 24-month reconviction data, has shown 69.4% predictive accuracy for reconviction (sample of 2,233 cases) (Baker, Jones, Roberts and Merrington 2005). It has also shown that predictive accuracy of the frequency of reconviction and the seriousness of offence was maintained at 24 months, as was the predictive accuracy for population subgroups (female, ethnic minority and younger offenders). This study also reported an acceptable level of inter-rater consistency.
The comparable figures for predictive accuracy were 62% for ACE, 65% for LSI-R and 67% for OGRS (Raynor, Kynch, Roberts and Merrington 2000). This means that the current version of ASSET at 67% is comparable to the most accurate reconviction predictors currently in use for adult offenders.

**Training:** An ASSET Users Group meets in Scotland meets on a regular basis and can signpost professionals to further training in relation to this tool. Further information can be obtained from the CJSW development centre: [http://www.cjsw.ac.uk/](http://www.cjsw.ac.uk/)

**Further Information:** Full guidance on ASSET is available at


## II The Youth Level of Service/Case Management Inventory (YLS/CMI).

**Background:** YLS/CMI is the youth version of Level of Service Inventory – Revised (LSI-R) and is quite widely used in the USA, Canada and Australia. (Hoge and Andrews, 2002) The YLS/CMI is a checklist that produces a detailed survey of the risk and need factors of young people.

**Suitability:** The tool can be used with young people between 12 years and 18 years of age who are involved or at risk of being involved in offending behaviour

**Description:** The YLS-CMI measures risk and need across eight factors:

- prior and current offences/dispositions
- education/employment
- substance abuse
- personality/behaviour
- family circumstances/parenting
- peer relations
- leisure/recreation
- attitudes/orientation

It is also a case management tool as it provides a direct link between assessed needs and the preparation of an action plan and determining the level of contact a young person should receive.

Each factor should be scored individually with comments to qualify scoring where necessary and sources of information clearly identified. Additional family and individual considerations not covered elsewhere can be highlighted in Part 3. Part 4 provides for a professional override of the scored risk level and the professional assessment of contact required. The professional override should only be used infrequently and the reasons for doing so recorded clearly. Instances where a practitioner might consider the use of the professional override include when there are a number of responsivity factors present (Part 3) or if a score is borderline.

This tool should help inform the narrative of the assessment report and action plan. Where needs/risks are identified in the assessment the action plan should explicitly state how these are to be addressed.
**Triggers** The YLS should be used as a general assessment tool that indicates either what work should be undertaken to address the identified needs or where further in-depth or specialist assessment might be needed.

If the **Offending factor** is scored as **High** a referral to specialist offending input might be considered.

If the **Education factor** is scored as **High** discussions with school regarding relevant supports should take place. If (g) is scored, contact careers/employment services.

If the **Substance Abuse factor** is scored **High**, consider a referral to specialist services or carrying out a more in-depth adolescent screen which looks at the impact of substances on the young person’s life. The results of this screen can then inform a referral to specialist services if required.

If all, or the majority, of the following items have been checked, this suggests a possible need for further psychological assessment: items a, e, f in the **Personality/Behaviour factor** plus items a, d, e in the **Attitudes/Orientation** factor.

If there are concerns about violence, for instance if in Part III Section 2 (Youth) ‘History of Physical Assault’, ‘History of Assault on Authority Figures’ and/or ‘History of Weapon use’ has been checked or if ‘b’ to ‘f’ in the **Personality/Behaviour factor** alongside the majority of items in **Attitudes/Orientation** have been checked plus there is a history of violence then consider an additional assessment such to explore the issue in more detail, or refer to specialist services.

If, in **Part III Section 2 (Youth)**, ‘**Self Harm**’ and/or ‘**Suicide Attempts**’ have been checked then a referral should be made directly to specialist services.

**Evaluations**: The YLS has not been normed on a sample of young people from the UK. However there has been a small Scottish evaluation of 94 adolescents comparing PCL:YV and YLS/CMI. The study indicated high internal reliability and good predictive validity for recidivism. (Marshall, Egan and Jones, 2006).

There have been several international studies of YLS/CMI. In order to test the validity of the YLS researchers examined a sample of 250 young offenders at a 6-month follow-up, for whom the YLS/CMI had already been completed. Significant differences in overall risk scores were observed between those who recidivated (mean = 15.74) and those that did not (mean = 9.22) signifying that the YLS is accurate at predicting future offence-related behaviour. Additionally all eight risk domains were also significantly affected by recidivism, suggesting that the content of the assessment tool is appropriate and that each of these risk factors are strongly associated with offending behaviour. (Jung and Rawana, 1999)

In a study of 1321 male and 358 female offenders it was found that the different recidivism measures used in YLS/CMI were significantly related to re-arrest (Flores, Travis and Latess, 2003).

**Training**: YLS training is delivered by the Cognitive Centre Foundation: [http://www.cognitivecentre.com](http://www.cognitivecentre.com)

In some areas training is delivered in-house by appropriately trained staff. There is a YLS Users Group which can signpost practitioners to local training. The group can be contacted via the CJSW development centre. [http://www.cjsw.ac.uk](http://www.cjsw.ac.uk)
**APPENDIX THREE**

**ACTION PLANS**

Example

Objectives and Summary Action Plan

**Priorities:** reducing risk to others /self
reducing re-offending

<table>
<thead>
<tr>
<th>Relevant ASSET domain</th>
<th>SMART Objective</th>
<th>How will you measure any progress</th>
<th>What work will be done to achieve the objectives</th>
<th>What are the gaps</th>
<th>Who will do the work</th>
<th>What is the timescale for the work and for review</th>
<th>What evidence required for the review</th>
</tr>
</thead>
<tbody>
<tr>
<td>Offence Violence</td>
<td>Improve thinking reasoning problem solving Improve impulse control Increase awareness of impact of offence</td>
<td>Behaviour check list Pre-post programme assess scores</td>
<td>Cognitive skills programme Assertiveness Training Programme.</td>
<td>n/a no programme places</td>
<td>Programme staff Super-visor Young person</td>
<td>Refer within 2 weeks 6 month follow up</td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td>Increase</td>
<td>Levels of Education</td>
<td>Education</td>
<td>Education</td>
<td>6 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drug misuse</td>
<td>Reduce levels of use towards abstinence</td>
<td>Self report No further referrals</td>
<td>1:1 by supervisor</td>
<td>Supervisor</td>
<td>Review progress 3 months</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX 4

PROGRAMMES CURRENTLY AVAILABLE

i. The following is not intended as a comprehensive list of available programmes, but rather provides examples of some of the programmes that are currently being used by some youth offending teams in Scotland. (n.b. Inclusion in this manual does not necessarily involve endorsement in any way.).

ii. OINTOC is a 23-session programme which includes a core groupwork programme with the capacity to be used in individual and family sessions. It makes use of IT, in particular CD-ROM. Key aims are to reduce the chances of associating with others who support anti-social activity and to reduce the chances of the young person committing new offences. It is aimed at young people aged 12 –16 at moderate to high risk of re-offending. The programme focuses on the following:

- family support
- communication
- problem solving, including clearing obstacles, alternative thinking and options, selective information gathering and consequential thinking
- operant behaviour - how people learn
- cognitive restructuring, where they learn to apply skills in real situations.
- socio-moral reasoning - relating behaviour to reasons and values
- offence reconstruction
- victim awareness.

Further information around training and use of the programme is available from: http://www.cognitivecentre.com/

iii. The Ross Programme (R&R2) is a focused 12 session group work programme teaching basic problem solving, emotional management, social skills and values that underlie pro-social competence. It is aimed at young people aged 13 to 16 at low or moderate risk of re-offending. Further information around training and use of the programme is available from http://www.cognitivecentre.com/

iv. Evaluation of the use of Ointoc and the Ross Programme in Glasgow can be found at: http://www.glasgow.gov.uk/CHttpHandler.ashx?id=7340&p=0

v. SNAP stands for STOP NOW AND PLAN. It is a cognitive-behavioural strategy that helps children and parents regulate angry feelings by getting them to stop, think, and plan positive alternatives before they act impulsively. It is a manualised treatment programme that is being piloted in Scotland. Further information on SNAP can be found at http://www.stopnowandplan.com/

vi. Time to Grow is a comprehensive programme for people working with young offenders and young people at risk. It was developed by Tim Chapman and uses research into effectiveness in youth offending to develop modules and practical sessions that help promote a sense of respect and self-worth with young people.
vii. **Safer Lives** is a programme developed by G-Map for working with young people aged 12 and above with sexually harmful or sexual offending behaviour. Further information is available from the National Development team which keep a list of accredited trainers in this model. The programme is based on Tony Ward’s ‘Good Lives model’ (see chapter 3) and, although unevaluated with other client groups, contains material that may be transferable in working with young people involved with non-sexual offending.
Bibliography


Youth Justice Board (2003) Assessment, planning and supervision; A reader for the professional certificate in effective practice. London: Youth Justice Board