Research recommendation

What is the effectiveness of interventions to promote placement stability among looked-after children and young people in residential care?

Why this is important

Placement break-down is associated with poor outcomes for looked-after children and young people. Interventions that support placement stability in looked-after children could help to improve a wide range of outcomes including educational, relational, and physical, mental, and emotional health and wellbeing. In this review, while evidence was identified for interventions to support looked after children and young people in placements in the community, there was a paucity of evidence found for interventions to support placement stability in residential care.

Rationale for research recommendation

Importance to 'patients' or the population	Placement break-down is associated with poor outcomes for looked-after children and young people. Interventions that support placement stability in looked-after children could help to improve a wide range of outcomes including educational, relational, and physical, mental, and emotional health and wellbeing.
Relevance to NICE guidance	In this review, evidence was identified for interventions to support looked after children and young people in placements in the community, however, there was a paucity of evidence found for interventions to support placement stability in residential care.
Relevance to the NHS, public health, social care and voluntary sectors	Aside from the benefits to the looked after person themselves, placement stability is beneficial to the NHS, public health, social care

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	sectors, as well as to youth justice departments for whom time and resources may be required to assist in the identification of alternative placements for those in whom placements have broken down.
National Priorities	High: this research question is relevant to national statutory policy documents such as Children's homes regulations, including quality standards: guide (2015) Department for Education from the Department of Education.
Current evidence base	None of the identified RCT evidence in this review considered interventions to improve placement stability in looked after children and young people in residential care specifically. However, some studies may have included some participants from residential care.
Equality considerations	Research should consider the differences in approaches required for looked after young children, and those who are older, adolescent, or care leavers. Research should include looked after young children, who have mental and emotional health problems, behavioural disorders. Research should consider the differences in approaches required for unaccompanied asylum seekers, those with a history of being trafficked, and high risk of exploitation or going missing. Research should consider the differences in approaches required for those with learning disabilities.

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Modified PICO table

Population	Looked after children and young people in long- term residential care.
Intervention	Interventions to promote placement stability, for example: carer training in responsiveness to attachment disorders, trauma, or emotional and behavioural problems; mentoring and relationship-building interventions; therapeutic interventions; other outings activities and skills building interventions.
Comparator	Usual residential care, a waiting list, or other commonly used interventions to support placement stability
Outcome	 Completion of care placement
	Adverse events such as prematurely dropping out of a care placement, transitioning from one care situation to another, absconding, or re- entering previous (more restrictive) care situation
	 Indicators of relational permanency and security in residential care
	Indicators of emotional and behavioural stability
Study design	Randomised controlled trial or controlled prospective experimental study.
Timeframe	Results should include moderate-term outcomes (e.g. 6-month) and long-term outcomes (1-2 year follow up).
Additional information	None

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