Youth Justice Best Practice Case Studies
Supporting children and young people with speech, language and communication needs in the youth justice system

Milton Keynes Youth Offending Team, Milton Keynes

About our setting
Milton Keynes Youth Offending Team (MKYOT) works with young people primarily aged 10-18, who are on Court Orders or who have received Pre-Court Disposals. The YOT has access to speech and language therapists two days a week and takes a proactive approach to speech language and communication needs (SLCN).

Identifying SLCN
MKYOTs policies take into account the national evidence on prevalence, which state that the majority of children and young people (CYP) in the youth justice system have some form of SLCN. The team therefore work on the presumption that most of the young people who they come into contact with have a need. All young people are thereby fully assessed, rather than screened. Since this policy was introduced in 2008, an average of 65% of young people assessed at MKYOT have identified SLCN.

“If you’re not finding more than 60% of children with SLCN, I’m confident from experience that you are missing children’s needs.”
Diz Minnitt, Operational Manager

The team use a variety of strategies to help CYP to understand and communicate, whether or not they have an identified SLCN. An example of this would be checking the CYP has understood instructions during their first meetings with the YOT by getting them to repeat back what was said in their own words, and revisiting what they were told later in the session to compensate for any short-term memory problems. The team try to avoid jargon where possible, but where specialist terms cannot be avoided, they look to explain the terms explicitly and support the CYP to understand them.

When the YOT meet a child who they have not worked with previously and who is going through the court process, their assessment is prioritised so that the team can provide evidence of any needs. The information from this assessment can make a real difference in terms of a child’s likelihood of going into custody and can also benefit the child’s rehabilitation.

A systemic approach
All staff seek to raise awareness of speech, language and communication across the youth justice service to ensure staff working with CYP understand the impact of SLCN. This has involved working with the crown prosecution service, legal advisers, magistrates, district judges, social care colleagues and staff working in schools, Pupil Referral Units (PRUs) and SEND (special educational needs and disability).

MKYOT recently ran a joint training course about SLCN with SEN case officers, a PRU SENCo and key social workers from adult, mental health and learning disabilities teams. The course covered the prevalence of special education needs in the youth justice system and the legal requirements for meeting the needs of the children and young people. The session provided opportunities for multi-agency professionals to network, reflect on
their own practices and identify areas that, if reviewed and improved, would positively impact on outcomes for the CYP they work with. As a result of the training, the local PRU are now seeking to employ a speech and language therapist.

In terms of intervention the MKYOT take a personalised approach, identifying what each CYP needs and designing individualised interventions. Although they have used standardised programmes of intervention in the past, staff have had to adapt the programmes heavily to meet the needs and wishes of the CYP. Following this, the team have decided that their current bespoke approach is more appropriate.

Profile: ‘H’

‘H’ first came to the attention of Milton Keynes YOT when he was 11 years old following a Youth conditional caution. H was recently excluded from a mainstream secondary school and placed into a PRU. Following an SLT assessment, the YOT recommended that the PRU apply for an Education, Health and Care Plan (EHCP).

The YOT saw H two years later after he was arrested for further offences. The team learnt that an EHCP application had not been made and, as they feared, H’s behaviour had escalated resulting in the regular use of restraints in the PRU. H’s record of the original SLT assessment, from two years earlier, prompted his solicitor to instigate further assessments into possible SLCN. This assessment resulted in diagnoses of Autism Spectrum Disorder and Oppositional Defiant Disorder. H was subsequently placed on an EHCP. The YOT was also able to advise the police on communication strategies that took into consideration H’s diagnoses. These approaches, which included a positive reward system, improved H’s behaviour and allowed fewer restraints and police attention. The 13-year-old avoided going into custody and instead was given community service. He was later sent to a specialist provision school that was able to better meet his needs.

Using data

MKYOT constantly reflect and refine how they work in response to new findings. In addition to monitoring recent data and outcomes, such as the number of CYP identified with SLCN and the success-rate of their interventions, the team actively monitor young people for two years following their support. This exercise enables the YOT to examine what went well and question what they could have done differently (for those who reoffend).

MKYOT’s reoffending rates are among the lowest in the country. Diz attributes this, in part, to their approach to service provision, particularly in terms of SEND. When asked what advice he would give to other YOTs, Diz stressed the importance of using the basis of research and evidence to think about the way a service is built:

“It is illogical to see work on speech, language and communication as an add-on; it has to be fundamental to your structure. You can use the same methodology across other areas too. For example, look at co-occurring needs that are likely to be present. Rather than only using an individualistic approach, use the actuarial knowledge, which enables you to anticipate a need rather than waiting for it to be there.”

MKYOT have found that the more they expand these practices, the lower the reoffending rate. Recent reoffending rates (for young people who worked with the team between April 2015 and March 2016) placed MKOT as second lowest in the country.