

Health and Wellbeing Hot Focus Session – Looked After Children

The Hot Focus Session for Looked After Children took place on 11th June 2015. The Session consisted of a presentation from Catherine Parry and Mac Heath (WBC - Children's Services) followed by group discussions on challenges facing LAC services and opportunities for partnership collaboration.

Group 1: decided to map the LAC System and highlight key issues (Ginny Garnett gave a brief overview of the LAC system from a BHFT perspective)

Mapping	Comments /Key Issues
<p>Each Child (LAC) must receive a Health Assessment within 28 days. This service is provided by a paediatrician from the Royal Berkshire Hospital.</p>	<p>Why can't this service be provided from West Berkshire Community Hospital? <i>This would be difficult because the service is provided for Berkshire West as a whole.</i></p>
<p>Under 5's</p> <ul style="list-style-type: none"> • Provided with service from a Health Visitor and other universal services. • Each child must receive a review every 6 months – this is a statutory requirement. This review is carried out by a Health Visitor. 	<p>Does it need to be a paediatrician who carries out the Healthcheck or could it be a GP? <i>When GPs have been responsible for this in the past, timescales were not met. GPs sometimes carry up the follow up review however, never the initial assessments.</i></p>
<p>Over 5's</p> <ul style="list-style-type: none"> • A paediatrician carries out the Health Check (within 28 days). • This Healthcheck takes about one hour. • The paediatrician provides one day per week for this service for LAC across Berkshire West. • The service is provided from the RBH. 	<p>Key Issue; location of services requires focus going forward with regards to making them as convenient as possible.</p> <p>Key Issue: beyond the 20 mile radius covered by the LAC nurses, health documentation often requires chasing and this can be particularly challenging.</p>
<p>5 – 16 (with no additional needs)</p> <ul style="list-style-type: none"> • Health Review is carried out annually by a school nurse. 	<p>Key Issue: There is an issue with the process regarding consent (Parents are not permitted to refuse access to a child's information if aged under 16). Enduring consent - can cause delays.</p>

- School Nurses are responsible for safeguarding, public health promotion and the school immunisation programme.
- There are 3.8 School Nurses in West Berkshire.
- Enduring Consent is required from the parent
- There are issues with the annual review process – this needs unpicking and reviewing.
- Schools Nurses/Health Visitors send assessment notes to the LAC nurse who then creates a Health Care Plan.
- There are 2.6 LAC Nurses across Berkshire West. One full time for West Berkshire; one full time for Reading and then the remaining 0.6 for Wokingham.
- LAC nurses are also responsible for those aged 16+ within a 20 mile radius.

Those with additional needs

- These children are now given priority to ensure they are placed at the top of a waiting list or at least maintain their position on a list if they move area.
- The aim is to return these children to universal services.

Those with Complex Health Needs

- Under 5's – are seen by Community Children Nurses from the RBH and they are responsible for carrying out Health Assessment.
- Over 5's are usually sent to one of the specialist schools in the area. There are usually paediatric nurses onsite at these schools and they are responsible for the Health Assessments.

Key Issue: Information is not shared between GPs and Community Nurses. This is a national problem due to negative publicity around sharing health records. There are plans to review this over the next five years.

Key Issue: artificial boundaries within the NHS.

Group 2

Challenges/Needs	Comments/Opportunities
<p>Could we do a Health Assessment before a child goes into care?</p> <p>Paediatrician – one day a week. Can do six appointments/week.</p> <p>These appointments are not being filled.</p> <p>Appointments take place in Reading.</p> <p>The child might still go into care without receiving a Health Assessment.</p> <p>There is an action plan in place with BHFT to make sure Health Assessments take place.</p> <p>Communication difficulties between health and social care around information sharing.</p> <p>Better contract management is required.</p> <p>Connected care – linking health and social care IT systems.</p> <p>Is the pathway absolutely clear and is there capacity to deliver it?</p> <p>If something goes wrong is it escalated?</p> <p>Consent for Health Assessment to take place – it might not be given. This can be taken forward if in the child's best interest.</p> <p>Health Care plans are reviewed twice per year for under</p>	<p>Parental information and Red Books</p> <p>Online booking System</p> <p>Communication issues need resolving.</p> <p>Further use of technology is required and similar conversations would be taking place in Wokingham and Reading.</p> <p>There is not a capacity issue in relation to paediatricians.</p> <p>Capacity issues are in relation to having enough LAC nurses to make the paediatrician appointments.</p> <p>Improve partner and children and young peoples understanding of medicals.</p> <p>Forster parents might be the most appropriate people to take child to appointments.</p>

5's and once per year for over 5's.
Independent Reviewing Officers have to be robust in addressing issues at review.
Serious case reviews – need to make sure enough information is shared to be useful.
Health Visitors and Schools Nurses are present at reviews. GPs are invited but do not always attend.
When a child comes into care many things need to be done. Health Assessments should be a main priority.
Is there a place for a VSP for Children's Services? What services are available?
Are the Health and Wellbeing Board sited and do they understand the issues regarding LAC?
Skill up family support workers in Children's Centres.
Challenge of Joint Commissioning – pooling budgets across schools, Local authority and health sector.
Those going out of area – is the NHS and LA in the area informed. Holding each other to account. e.g. virtual Head Teacher who will challenge where the child is place.
Can there be an interested professional who can address this and can there be a similar role in health e.g. Lead Nurse for LAC.
There is a designated nurse who covers West Berkshire, Reading and Wokingham.
Are Health Assessments being carried out for LAC coming to West Berkshire from other areas.
Detail needs to be broken down.
Better planning for assessments

Priority Status

Mapping exercise

Designated Nurse for LAC

Health Passports (LCT)

Outcomes and quality

Care Plan Pathway – sometimes about health issues but often not.

Health professional attends Care Plan meeting.

Social Workers – Should there be one for children and families (exceptions).

Child and family focus maintained.

Family resource service – holistic.

Prevent children coming into care.

Health Assessments – holistic. National template. Includes triangulation of data including physical and mental health (healthy lifestyle).

Health Assessment Review is multi disciplinary.

School involvement – V.H.T to make sure they are in right place.

Care Plans – are they fully enacted and children referred to appropriate services?

General discussion

- If the process is causing a problem, explore different ways of doing things.
- The business process needs streamlining.
- There are Health Passports available for LAC however, although the system has been implemented, at the time of the Ofsted Inspection only one LAC had a passport.
- Parents of LAC have been challenged by the courts. Theoretically this could happen to any parent who is not providing a high enough quality of care for their child.
- The LAC process needs rearticulating.
- Services need to be clear about what they are trying to achieve.
- The LA is a statutory authority – what are LAC being subjected to ensure the LA can demonstrate requirements are being met.
- GOLDEN NUGGET = Streamline Service

- The number of LAC is likely to rise and therefore there will be more initial assessments.
- The back log may require temporary additional resources.
- Realistic timeframes would have to be set.
- Trajectory plan for back log.
- Early help – FRS.
- Communicating impact
- Need to look at underlying reasons for children coming into care.
- What could the community do through community hubs, Children's Centres, engaging Health Visitors and GPs?
- Forum suggestions are welcome for where cohesion challenges can be taken for discussion.

Summary Issues

- **Planning needs of Council going forward**
- **Continuity and sustainability**
- **Accommodation needs**
- **Myths, legends and perceptions**
- **Are they our children?**
- **Values, culture and society**
- **VOICE OF THE CHILD**