

TITLE OF REPORT: Gateshead Looked After Children and Young People's Health Team – Annual Report 2015-16

REPORT OF: Interim Strategic Director, Care, Wellbeing and Learning

EXECUTIVE SUMMARY

This report provides a summary of the work and outcomes for the Looked After Children and Young People Health Team in Gateshead 2015-16. Themes from the team's annual report are presented. There is brief information regarding the work undertaken by colleagues in sexual health and drug and alcohol services. Priorities for the future year are also included.

Background

1. 2015-16 has been a busy and productive year for the Looked After Children's Health Team in Gateshead.
2. This document aims to give an overview of the work and achievements of the Looked After Children's Health Team for Gateshead 2015-16.
3. The implications for the team of the new documents and the challenges, and aspiration of the team moving ahead will be described.
4. The Looked After Children's Health Team is commissioned by Newcastle Gateshead Clinical Commissioning Group. The team consists of a Designated Doctor LAC- 6 sessions-including the role of medical advisor adoption, who is employed by Gateshead Health NHS Foundation Trust. A Designated Nurse LAC – Full Time, Medical Secretary – Full Time , LAC Administrator- Full Time, who are all employed by South Tyneside NHS Foundation Trust
5. Since March 2015 the Designated Doctor has been actively assessing children in Gateshead who have evidence of Foetal Alcohol Spectrum Disorder (FASD) in the absence of any other specialist diagnostic service. This has involved personal training and close working alongside public health and other professionals championing the needs of these children with an invisible disability in the region. Research evidence suggests that between 60-80% of LAC&YP may be affected and that early diagnosis can prevent secondary disabilities developing which result in such poor outcomes for LAC&YP. A draft Pathway for diagnosis and management of Foetal Alcohol Spectrum Disorder (FASD) in Gateshead has been developed which is currently being considered by other districts within the region.

Activity

Initial Health Assessments

6. The team recorded a total of 180 notifications of children and young people becoming looked after in 2015-2016 of which 172 had Initial Health Assessment's completed. The remaining 8 left care prior to their assessment. For most the administrative activity of preparation for the health assessment had been commenced, in 6 cases to the point of appointments being arranged.
7. Our overall compliance for Medical Practitioners to complete the Initial Health Assessments (DH/DfE 2015) was **97.1%**
8. There is on-going monitoring of timeframes for completion of Initial Health Assessments within 28 days (20 working days) (DH/DfE 2015).
9. In 2015-2016 we have achieved 47% compliance; this is a drop from 51.2% for the previous year.
10. The LAC Health Team were able to offer Initial Health Assessment appointments to 81.7% of children within 20 working days of consents being received, a decrease on the previous year (95.6%). The key challenge meeting the overall time frame was delay in obtaining parental consent from social workers (59.34%) which is an increase from 35.8% the previous year. This is reported to and reviewed by the Local Authorities' Performance and Monitoring Group. Other contributing delays: Late consents together with late appointments 21.97 % (an increase from 2.5% from the previous year). Late appointment 16.48% (an increase from 3.7% the previous year). Appointments not attended or cancelled by carers 2.19% (a decrease from 6.8% the previous year).

Review Health Assessments

11. A total of **313** Review Health Assessment's were completed in 2015-2016
85.9% of these were completed within 28 days of their due date.

Leaving Care

12. The LAC Health Team are commissioned to provide services for Looked after Children up to their 18th birthday. A leaving care health consultation is usually undertaken by the Designated Nurse LAC, during the final year (age 17-18).
13. Leaving Care Health Passports were provided to 22 of the 32 (68.7%) young people recorded as leaving care, most missed opportunities were with those who turned 18 earlier in the year when the new format was being developed with a lack of capacity to follow up with this new resource.

Statistical Returns

14. The team have achieved good returns as reported by the Local Authority in their SSDA 903 returns To Central Government. The Performance Indicators for health, were maintained at a level that exceeds the national average.

	31/03/16	31/03/15	31/03/2014	31/03/13
Health Assessments	99.1%	96.6%	95.7%	96.98%
Dental Appointments	90.7%	94.4%	87.9%	92.08%
Immunisations	96.9%	94.8%	96.1%	92.83%

Children and Young Peoples Service (CYPS)

15. Service delivery is now provided by Northumberland, Tyne and Wear NHS Foundation Trust, Children and Young People's Services (CYPS). John Sands, Consultant Clinical Psychologist is a lead for Looked after Children. The LAC Health team have limited data from the service and would expect that this will be available within the Children and Young People's Services (CYPS) own Annual Report.
16. The task of distributing the Strength & Difficulties Questionnaire (SDQ) has continued as part of the initial health assessment process but in a change of process for review health assessments the task is undertaken by the Local Authority who have continued scoring all Strength & Difficulties Questionnaire's and providing that score to the LAC health team. As recommended by CQC the scores, when available, have been added to the BAAF health assessment forms.

Foetal Alcohol Spectrum Disorder (FASD)

17. The Designated Professionals are now both recognising the impact upon the LAC & YP of alcohol exposure pre-birth and in the absence of a regional service are undertaking assessment and diagnosis.
18. There is a two way referral between the LAC health team and Children and Young People's Service (CYPS) to address the emotional, physical and behavioural needs of the children and the support needs of the carers. Children of all ages present with complex emotional, behavioural and learning problems for which there is no specific service provided by Paediatrics or CYPS.
19. It is now recognised that FASD has been responsible for the few but significant adoption disruptions that have occurred in Gateshead in recent years and it is a key cause of placement instability and school disruption.
20. Not all children with FASD require referral to a specialist service e.g. CYPS but they do require a workforce which is knowledgeable and fully

trained and foster carers require additional support and respite. There is evidence that with training both foster carers and education staff can make a huge difference to the long term prognosis of these children.

21. By April 2016 over 100 LAC &YP had been diagnosed with FASD (representing almost 1\3 and many are awaiting assessment). A diagnostic pathway in health is being used and developed and this is the first in the region.

Drug & Alcohol Services

22. Drug and Alcohol Services for children and young people in Gateshead is provided by the PLATFORM service. Statistics provided from Platform Gateshead was for all LAC / young people in the service and therefore some may be from other areas but have placements in Gateshead. The statistics include young people who may have been referred in more than once.
23. There were 42 referrals were received between 1st April 2015 to 31st March 2016. The referral sources were: Hospital-4, Relative-2, CLA/ social services- 15, YOT- 13, Schools-6, GP-1, Self-1.
24. The first substance of choice was Nicotine-11, Cannabis-20, NPS-3, Alcohol- 5, MDMA-1, Amphetamines-2

Sexual Health Services

25. Young people are encouraged to access generic sexual health services in their placement area as required. Those young people identified as in need of specialist intervention are assessed on an individual basis and professionals work together to ensure that their identified needs are met.
26. Information provided by Sexual Health Service indicates that there were 59 LAC contacts. These contacts included contraception, Options, pregnancy testing and STI screening.

Adoption

27. The Designated Doctor is a member of the adoption panel as an advisor and as an independent panel member. 52 adoption medicals (including reviews) were undertaken during the year and advice was prepared for the agency decision maker on 28 children where a plan for adoption was considered.
28. The Adoption Panel considered 27 matches of children with prospective adopters during 2015/16 which represents a significant increase on the previous year. In each case the Medical Advisor met the adopters to share all available health information and a detailed health report was prepared for the adopters to share with the new primary health care worker for the child.
29. During 2015 / 2016, 24 children were adopted.

30. The Medical Advisor attended a number of preparation groups to discuss the complex health needs of children placed for adoption.
31. The Medical Advisor reviewed a total of 30 adult medicals with advice being provided to the agency and the panel.
32. 12 out of 13 Adoption Panels were attended by the Medical Advisor. Written comprehensive health advice was provided for the remaining panel. A positive panel member review was undertaken by the panel chair and the adoption agency adviser during the year.

Fostering

33. The Designated Doctor LAC attended 10 foster Panels and supplied advice to two.
34. There has been a fall in the number of adult medicals requiring medical advice in 2015/16 (146 – compared to 244 in 2014\15). There is an increase in placements with family members under Special Guardianship Orders and these often take up a considerable amount of time as the medical needs of the adults are often complex. Three have resulted in court reports prepared by the Medical Advisor and attendance in court in one case.
35. The Designated Nurse LAC attended 10 out of 12 Foster Panels.

Training

36. The team have continued to offer a variety of training to foster carers including Healthy Care Refresher for foster carers. Specific training on caring for children with Foetal Alcohol Spectrum Disorder was delivered by the Designated Doctor together with a foster carer
37. The Designated Nurse LAC delivered training to 133 staff and carers.
38. Looked after children's health needs & issues are included in safeguarding training to GPs, A&E obstetric and paediatric staff and safeguarding training delivered in Gateshead NHS Foundation Trust staff.
39. Level 3 Safeguarding training 'Looked After Children – Health Professionals Role' continues to be delivered to community health staff and doctors who have or may have involvement with this client group by the Designated Nurse LAC
40. The training on Quality Health Assessments for LAC & YP has been updated and is now delivered as a Level 3 Safeguarding Course.
41. The Designated Doctor LAC presents on the Local Safeguarding Children Board Safeguarding Babies course.
42. The Designated Doctor provides training to targeted audiences on Foetal Alcohol Spectrum Disorder (FASD) including Paediatricians, Midwives, Nurses, GPs, CYPS, Community Health Workers, Preschool Early

Intervention Workers, Special Educational Need education staff, whole schools training, Probation, Social Workers, Barnados, Local Safeguarding Children Board and other agency staff. As it is estimated that up to 80% of LAC are affected by FASD (compared to 5% of the non-looked after population) considerable attention is paid to the needs of LAC&YP

43. The Designated Doctor delivers FASD training as part of the LSCB training programme.

Team Developments

44. The commitment from the Clinical Commissioning Group (CCG) to fund additional resources in the team has been progressed. A full time Specialist Nurse Looked After Children and part time LAC administrator has been appointed.
45. The Designated Nurse LAC in the team, secured the position of Designated Nurse LAC in Newcastle Gateshead Clinical Commissioning Group and will have a strategic role covering both areas. The position in the team has been replaced with a full time Named Nurse Looked After Children.
46. The change in structure and roles will be supported by the guidance in the 'Looked After Children, Knowledge, skills and competence of health care staff. Intercollegiate Role Framework' (RCN & RCPCH 2015)
47. A Young Persons User Strategy was developed by the Clinical Commissioning Group (CCG) and accepted and available to South Tyneside NHS Foundation Trust staff.
48. The programme of audit and development will be influenced by the Designated Nurse LAC in the CCG.
49. To develop RAG rating for young people age 15 –17 years in relation to health needs to support their transition to leaving care. It is hoped to develop an area of work supporting the more vulnerable care leavers 18+ including health involvement at Health Transitions Meeting.
50. A data base is required to record and analyse the health needs of looked after children.
51. The regional pathway for the diagnosis and management of children with Foetal Alcohol Spectrum Disorder (FASD) will be finalised after consultation and Gateshead LAC Health Team will continue to take a key role in this. The database of children affected by FASD will be analysed on a 6 monthly basis by the Senior Trainee who is supervised by the Designated Doctor and who is currently doing a 6 month module with Public Health considering the health and social needs assessment and prevention strategies. To further develop training and support for colleagues in Education, Health and

Social Services to ensure a knowledgeable workforce able to identify and support children with FASD and their carers with the specific intent to reduce secondary disabilities e.g. placement breakdowns, psychiatric problems, school exclusions, and involvement with the criminal justice system.

52. A closer working relationship with CYPS will be rebuilt with the intention of preventing multiple diagnoses and to avoid conflicting and duplicated work.
53. Develop a new young people's leaflet with LAC & YP involvement to include contact details for the LAC team
54. Further development required with the strength & difficulties questionnaire process.
55. To increase the coverage of Leaving Care Health Passports.
56. Work closely with the Local Authority to improve the overall timeframes for Initial Health Assessments and improve on the number of birth parents attending these assessments.
57. Strengthen processes for ensuring health issues identified in health plans are actioned in a timely manner.
58. Contingency planning is underway to manage the planned retirement of the Designated Doctor at the end of 2016.
59. The Gateshead LAC Health Team are due to transfer to Gateshead Health Foundation Trust from South Tyneside Health Care Trust in October 2016.

References

Dept. Children School & Families (DH / DfE) 2015 Statutory Guidance –Promoting the Health & Emotional Well-being of Looked After Children

Department of Health (DOH) 2013 Responsible Commissioner: Payment by results Guidance 2013-14; Health assessments for LAC

Gateshead Metropolitan Borough Council (GMBC) 2012 Tell us what you think –Analysis of data collected

National institute for Health & Clinical Excellence (NICE) 2013 Promoting the Quality of Life for Looked After Children & Young People- public health guidance 28-(recommendation 48)

Royal College of Nurses & Royal College of Paediatrics & Child Health (RCN & RCPCH) 2015 Looked After Children, Knowledge, skills and competence of health care staff. Intercollegiate Role Framework.

Recommendation

It is requested that the Corporate Parenting Overview and Scrutiny Committee consider and comment on the content of this report.

Contact

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