

Looked After Children/Children in Care

ANNUAL REPORT

1 APRIL 2016 – 31 MARCH 2017

A summary of key achievements and future plans for Nottingham City CCG to fulfil its duty to safeguard and promote the welfare of looked after children

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Looked After Children/Children in Care Annual Report 2016/2017

Most children become looked after as a result of abuse and neglect. Although they have many of the same health issues as their peers, the extent of these is often greater because of their past experiences.

The number of LAC has continued to rise and as of 31 March 2016 there were 70,440 nationally a 5% increase since 2012. In Nottingham City this number was 595 a slight increase on 580 in 2015 (Local authority interactive tool) and a recent verbal update from the local authority stated a current number of over 600 highlighting the ongoing increase.

The NHS has a major role in ensuring the timely and effective delivery of health services to looked after children (and, by extension, to care leavers) by commissioning effective services, delivering through provider organisations, and through individual practitioners providing coordinated care for each child (Promoting the health and well-being of looked after children 2015).

(Throughout this report Looked after Children will be referred to as children in care - CIC).

1. Introduction

- 1.1. This report relates to Nottingham City CCG.
- 1.2. The CCG commissions health services for the population of Nottingham City. The purpose of this report is to provide assurance that Nottingham City CCG is fulfilling its responsibilities as a commissioner to work in partnership with the Local Authority and other agencies to promote the safety and welfare of children and adults in need of care and protection.
- 1.3. Key areas of priority for the CCG are identified in the Nottinghamshire County LAC Pathway review (2016), the recommendation for the CCG specifically are highlighted below.
- 1.4. This report will summarise achievements and activity undertaken in 2016-17 and highlights recommendations for 2017-18.

2. Background

- 2.1. This is the first separate CIC annual report and provides assurance that Nottingham City CCG is fulfilling its statutory responsibilities to children as outlined in the Children Act 1989 and Promoting the health and well-being of looked after children (2015).
- 2.2. The CCG works in partnership with health provider organisations, the Local Authority and other agencies including the Nottinghamshire Safeguarding Children and Adult Boards. The Designated Nurse role was removed from Nottinghamshire Healthcare Trust in September 2016 and is now situated within the CCG in line with statutory guidance. The role is now fully strategic with no clinical responsibilities. This role is also responsible for the South and Mid County CCGs.
- 2.3. There has also been a change in the Designated Doctor who also covers the County South CCGs. This post has a combined clinical and strategic role and sits within Provider.

3. LAC/CIC Governance and Accountability arrangements

The CCG governance arrangements for CIC are monitored through the City Safeguarding Steering group. The Steering group meets bi-monthly and monitors progress on national and local guidance and strategic priorities. The CCG LAC/CIC executive leadership is through the Chief Nurses who represent the CCG on Nottinghamshire Safeguarding Children and Adult Boards and are members of the CCG Governing Bodies.

The Designated Professionals also contribute to the local authority Corporate Parenting Board and are members of the regional NHS England Safeguarding network.

4. Commissioning arrangements

The CCG commissions the following providers to undertake statutory health assessments;

- **Nottingham University Hospitals NHS Trust** – provides medical input from Community Paediatricians for children who live in the City or are placed from out of the City. This includes initial health assessments and referrals to specialist services. This service is commissioned by the 3 southern County CCGs and Nottingham City CCG. This service also provides Medical Advisers for Adoption who fulfil the statutory duties for the local authority around Adoption Panels, reports on the health of prospective

adopters as well as contributing to the health assessments and statutory reports for children and young people with an adoption plan.

- **Nottinghamshire Healthcare NHS Foundation Trust (Local Services Division)** – provides the CIC Nursing team. This team coordinates the pathway once a looked after child enters the health system, both from in and out of the county, and undertakes most review health assessments. It is jointly commissioned with the Nottingham County CCGs. It also provides the Child and Adolescent Mental Health Service (CAMHS) LAC team which is co commissioned with the local authority.
- **Public Health & Nottingham City Local authority** - commission the 0 – 19 Programme which includes the delivery of the Department of Health “healthy child programme”. The service will work with the CIC health teams to ensure that the Universal and Public Health needs of CIC are met by the appropriately skilled and knowledgeable practitioners.
- **CAMHS LAC** - 2016/17 As part of the local transformation plan for children’s mental health, the CAMHS team for looked after children has been embedding the use of routine outcome measures as part of the implementation of CYP IAPT. In 2017/18, the service model will be reviewed in light of the recommendations from the SCIE working group into looked after children’s emotional and mental health and wellbeing. Consideration will also be given to the consistency of the support provided to looked after children placed out of area, as well as other area looked after children placed in Nottingham.

4.1 CIC placed out of area (OOA)

The Nottinghamshire County CIC Health Pathway Review identified that CCGs were only partially compliant with the Statutory Guidance in ensuring a continuity of high quality, timely healthcare for CIC that move OOA.

A task and finish group has been formed and includes the local authority CIC managers, local authority placement officers and health providers.

This group will review the pathways for children and young people placed out of area in relation to:

- The CIC medical teams
- The CIC nursing team
- LAC CAMHS

The outcomes of this task and finish group will feed into the CIC service improvement forum and the City Safeguarding Steering group.

The Designated Nurse CIC and Doctors CIC have reviewed processes and are devising a CCG OOA pathway that is in accordance with Statutory Guidance. This pathway will include

quality assurance processes, a robust escalation process and clear financial pathways. Health provider's own internal processes will align to this.

4.2 Other Local Authority Children (OLAC)

In line with the task & finish group for OOA placements the CCG is also reviewing the process for OLAC placed in Nottingham City, ensuring that all OLAC are offered primary and secondary care as any other child or young person would receive. For any statutory health assessment undertaken the CCG will invoice the originating authority as per the Responsible Commissioner guidance (2007).

5. Nottinghamshire CIC Service Improvement Forum

The Nottinghamshire CIC Service Improvement Forum was established in December 2016 to implement/continue the health pathway review work/suggestions. The recommendations made within the Nottinghamshire County CIC Health Pathway review have been converted into an action plan that is being overseen within this forum led by Commissioners. This is a County wide forum with agreement to commitment from both the City and County Local Authorities, CCGs and health providers.

6. Nottinghamshire CIC data collection and reporting project

Accurate and reliable data in relation to the health needs of Looked after children has been historically very difficult to obtain. It is complicated and involves collecting data that tries to capture timescales of interventions but with many variables. A lot of time and effort has been given previously to try to gather this information together but it has not been successful. It is difficult to ascertain whether the electronic systems being used to collect the data are appropriate or whether another method is needed or whether with adjustments these can be used successfully. In addition to this, going forward we need to collect data that supports caseload profiling and that evidences the outcomes of the health interventions.

Following a successful bid to NHS England for non-recurrent project funding (likely to run for over 1 year from March 2017), a working group has been established, led by a project lead with the support of the Designated Nurse. The aims of the project being:

- To ensure accurate data is collected in line with national statutory Key Performance Indicators requested by Commissioners and held within service specifications and contracts.
- To obtain additional health data that evidences outcomes of health interventions.
- To obtain additional health data within caseload profiling to support with health needs assessments and future service planning.

7. Care leavers

Within the CIC health Pathway Review one of the key findings identified was that care leavers were not always given sufficient information in regard to their own health; there was limited information about their family history (however this may be due to issues around consent and confidentiality should birth parents not agree to their health information being shared) and that one in three felt they needed more support accessing adult health services. Within the review a recommendation was made to commissioners to work with providers and the local authority to explore resource options to establish a joint leaving care health worker post to support transition to adult health services.

A workshop is planned for July 2017 to scope services currently commissioned, identify any gaps and/or consider alternative ways of improving support around health for this group of vulnerable young people.

8. Unaccompanied Asylum Seeking Children (UASC)

Since the implementation of the National Transfer scheme in July 2016 the following work has been completed;

- Links are now in place between the Designated Professionals and Nottingham City Local Authority in relation to planning for future placements.
- The Designated Professionals are now represented on a regional UASC group.
- Links are in place with the Nottingham City Local Authority in relation to wider issues including possible multi-agency training for agencies working with UASC.
- A health impact assessment was completed in July 2016 – the results of this being the majority of health services felt able to absorb any additional workload. However the CIC/LAC Medical and Nursing teams felt that although short term small numbers could be managed a rising number that will be sustained by 2020 may have an impact on the capacity of the teams. Further work is required by commissioners about the impact on LAC CAMHS and adult mental health services.
- Practice guidance to support completing Initial health assessments (IHA) has been written and shared to support Review Health Assessments (RHA).
- Documentation to support the local authority in arranging the IHAs has been produced and shared.
- Documentation explaining what an IHA is has been produced to be shared with the young person via an interpreter.
- Information about the National UASC website has been cascaded to health providers including all GPs via the CCG newsletter.
- Improvements to data collection and reporting on health assessments for UASC are now being made in order to plan service delivery.

- A Commissioning health pathway has been completed and has been agreed by the CCG.

9. Voice of the child

Work continues to ensure the CCG ensures that the voice of children and young people in care contribute to service planning and delivery. This will include working with provider organisations to ensure the voice of the child is included in audits and reports.

10. Work undertaken for LAC/CIC in 2016/17:

- Transfer of Designated Nurse CIC post from Provider to the CCG.
- Implementation of contract review meetings with the Provider organisations.
- UASC processes and review of health needs.
- OOA pathway review.
- OLAC pathway review.
- Data collection and reporting project commenced.
- Service Improvement Forum established.
- Safeguarding Concerns pathway for looked after children completed.
- Improved links with NHS England and the Midlands LAC sub group.

11. Priorities Identified 2017/18

1. Data collection and reporting project.
2. OOA pathway to be agreed and embedded.
3. OLAC pathway to be agreed and embedded.
4. Care leavers support to be reviewed.
5. Quality Assurance processes to be reviewed and strengthened.
6. Review the CCGs responsibilities in the commissioning of the medical adoption service.
7. Further priorities to be identified from the NHS England Safeguarding Assurance Tool.
8. Consideration and planning to be given on the implementation of any additional priorities that emerge from the NHS England Looked after Children Working group.

12. Summary

The CCG has made important changes to children in care commissioning in 2016/17, in particular through the transfer of the Designated Nurse post from health provider to the CCG to enable the Designated Nurse to undertake its role and functions.

This report demonstrates how this has strengthened leadership across the health economy for CIC alongside grasping the priorities for improving the quality of the services, both CCG commissioned and commissioned with partners.

Health Provider Annual Reports were not available this year, the plan going forward for these to support the CCG report as the information they provide may influence CCG priorities.

13. References

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1. Appendix 1

List of Strategic Partnership Meetings and Sub Groups attended by the CCG Designated Professionals for looked after children.

- CCG Safeguarding Steering group – representation by the Designated Dr and Nurse for looked after children.
- City CIC Outcomes group – representation by the Designated Dr and Nurse for looked after children.
- City Corporate Parenting Board – representation by the Designated Dr and Nurse for looked after children.
- Derbyshire and Nottinghamshire NHS England Safeguarding Forum – representation by the Designated Dr and Nurse for looked after children.
- Links to the NHS England National network (LAC subgroup) – both Designated Dr and nurse for looked after children.

Additional relevant strategic meetings.

- Domestic Violence Strategic Steering Group - representation by the Designated Nurse Safeguarding.
- Joint NSCB Child Sexual Exploitation Strategic Steering Group – represented by the Designated Nurse Safeguarding.
- MARAC Strategic Steering Group – represented by the Designated Nurse Safeguarding.
- Nottingham City Safeguarding Children Board (NCSCB) – representation by the Designated Nurse Safeguarding.
- NCSCB Audit Sub-Committee – representation by the Designated Nurse Safeguarding.
- NCSCB Executive – representation by the Designated Nurse Safeguarding.
- NSCB Policy and Procedure Sub-Committee – representation by the Designated Nurse Safeguarding
- NSCB Quality Assurance/Audit Sub-Committee – representation by the Designated Nurse Safeguarding