



## **Looked After Children Annual Report**

**April 2010 to March 2011**

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## **1. Introduction**

This is the first Annual Looked After Children (LAC) report by NHS Bedfordshire). The Department of Health Statutory Guidance *Promoting the Health of Looked After Children (2009)* requires a report on the delivery of service and the progress achieved for the health and wellbeing of children in care.

This report covers the period 1 April 2010 to 31 March 2011, and will be used by partner agencies to assess their response to improving health outcomes for Looked After Children in Bedfordshire in line with the statutory guidance, Challenges facing the service for Looked After Children will also be explored.

## 2. Policy

### 2.1 National policy and legislation

Meeting the health needs of children in care in Bedfordshire is directed by key policy frameworks that inform Local Authorities, Strategic Health Authorities (SHAs) and Primary Care Trusts (PCTs) to ensure shared responsibility for good outcomes:

- § Every Child Matters (DCFS 2003)
- § Common Assessment Framework (2006)
- § The Child Health Strategy (DH 2009)
- § Every Child Matters – Transforming the Lives of Children and Young People in Care (DfES 2006)
- § Promoting the Health Looked After Children (DH 2009)
- § The NHS Operating Framework – Vital Signs (NHS 2008)
- § Our Health, Our Care, Our Say (DH 2006)
- § Every Parent Matters (DCFS 2007)
- § Working Together to Safeguard Children (DCSF 2010)
- § A Guide to the Development of Children’s Palliative Care Services (DH 2005)
- § Better Care, Better Lives (DH 2008)
- § Care Matters: Time for Change (DCFS 2007)
- § Statutory Guidance on promoting the Health and Wellbeing of Looked After Children (DCFS 2009)
- § Promoting the quality of life for looked-after children and young people (NICE public health guidance, 2010)

The legislative and regulatory framework includes:

- § The Care Standards Act (2000)
- § The Children Act (1989, 2004)
- § The Mental Health Act (2007)
- § The Children and Young Persons Act (2008)

### 2.2 Local context

NHS Bedfordshire has a major role in ensuring the timely and effective delivery of health services to Looked After Children and young people. Under the Children Act (1989) SHAs and PCTs have a duty to comply with requests from local authorities to help them provide support and services to children in need.

Since April 2009, NHS Bedfordshire has been co-terminous with Bedford Borough Council and Central Bedfordshire Council. Both local authorities produced their Children and Young People’s Plan in 2009, and highlighted the need to focus on vulnerable children, including LAC, their care planning, placement choice and stability, and educational outcomes. The current Local

Area Agreements for Bedford Borough and Central Bedfordshire (which end in March 2011) have targeted childhood obesity, emotional health of children, and educational attainment. These are all areas pertinent to LAC due to their increased vulnerability.

Strategic planning for LAC is directed through the Children’s Trusts for both Central Bedfordshire and Bedford Borough and accountability for the services provided to LAC from both the local authorities and NHS Bedfordshire is directed through Corporate Parenting Panels. Multiagency strategic planning and operational oversight is directed through the multiagency LAC Health Group, which contributes to strategic planning via the Children and Young Peoples’ Plans, and the Children and Adolescent Mental Health Services (CAMHS) partnership

### 2.3 Profile of the Bedfordshire LAC population

Looked After Children and young people share many of the same health risks and problems as their peers, but often to a greater degree. They often enter care with a worse level of health than their peers in part due to the impact of poverty and neglect.

Table 1 shows the placement of Looked After Children in Central Bedfordshire and Bedford Borough from March 2010 to January/February 2011:

	March 2010	February 2011
Central Bedfordshire LAC*	160	171
CB LAC placed in Central Bedfordshire	64	64
CB LAC placed out of area	26	75
Adoption placement and other placements	3	1
In foster care	117	120
In children’s homes, hostels, secure units	15	26
For adoption, with parents, other residential settings	11	11

\* Central Bedfordshire also has a number of Looked After Children living semi-independently

	March 2010	January 2011
Bedford Borough LAC	163	166
BB LAC placed in Bedford Borough	57	59
BB LAC placed out of area	99	102
Adoption placement and other placements	7	5

In foster care	110	119
In children's homes, hostels, secure units	17	21
For adoption, with parents, other residential settings	36	26

## 2.4 Health Service Structure for LAC in Bedfordshire.

Bedfordshire Community Health Services is the current provider of Looked After Children's services. The LAC team works with the two local authorities in co-ordinating health assessments and reviews for Looked After Children in Bedfordshire. There is also a specialist Mental Health Team for LAC (CLAS) provided by South Essex Partnership Trust (SEPT).

There is a designated LAC Nurse who provides advice on quality of planning and strategy in relation to health services for Looked After Children. Although funding has been identified for designated doctor input, no appropriate clinician to undertake this role has been identified to date. Work is being undertaken to identify a Designated Doctor who will support the PCT in its statutory functions.. The Designated Nurse will support the Head of Child Health Commissioning who leads on commissioning of services for LAC and chairs the multi agency LAC health group.

### 2.4.1. The LAC Health Team

Bedfordshire Community Health Services (BCHS) has been commissioned by NHS Bedfordshire, Bedford Borough and Central Bedfordshire to provide a pathway to access statutory health assessments for Looked after Children since April 2009. The purpose of the health assessments are to:

- § Ensure that holistic health needs are identified and plans in place to support/manage needs, including opportunities to for routine health checks & screening, preventative measures and health promotion.
- § Facilitate optimum health during childhood and into adult life.

The LAC Health Team is incorporated within the Safeguarding Teams within BCHS. This service is provided by a small designated team with support from 0-19 Team who lead on the universal and progressive elements of the Healthy Child Programme. BCHS's designated LAC Health Team is comprised of the following professionals:

- § Community Paediatrician is currently providing two half day sessions, equating to 3 Initial Health Assessments for each session
- § LAC Nurse (1.0 WTE)
- § LAC Administrator (1.0).

A Community Paediatrician undertakes the Initial Health Assessments. Currently all assessments are undertaken in Bedford. An alternative location for Initial Health Assessments will be identified at a local health centre to ensure easy accessibility for children and young people resident in that area.

The LAC Nurse is responsible for quality assuring all of the statutory LAC Health Assessments for Children and Young People who are Looked After by Central Bedfordshire Council and Bedford Borough, both for children placed within the local authority areas and placements out of county. The LAC Nurse is responsible for undertaking the health assessments for Looked after Children in residential care settings and those children not in education. Health Visitors and School Nurses from the 0-19 Team undertake the majority of Review Health Assessments and support the child/young person via the universal and progressive Healthy Child Programme. The LAC Nurse also undertakes review assessments in more complex cases

The LAC Nurse and 0-19 professionals access regular supervision from the Professional Leads for Safeguarding Children and Young People within BCHS.

The administration for Looked After Children is provided by a specific LAC Administrator based with the LAC Nurse. General administration is also supported by administration staff within the community teams and Child Health Department.

#### **2.4.2 Child and Adolescent Mental Health Services (CAMHS)**

CAMHS services relevant to LAC are commissioned by NHS Bedfordshire from South East Essex Partnership Trust (SEPT). Bedfordshire has a dedicated CAMH Looked After Children Team, jointly funded by NHS Bedfordshire, Bedford Borough and Central Bedfordshire which provides the following services:

- § Support for mental health issues using long term psychotherapeutic approaches including systemic family work, play therapy, art therapy, intensive counselling, as well as cognitive therapy approaches.
- § Assessments of mental health issues
- § Narrative approach, solution focussed approach
- § Outreach into the Children's' Homes offering consultations on individual cases, and general consultations on individual cases regarding mental health issues and dynamics within the children's homes
- § Support and training for foster carers
- § Group therapies
- § Assessing need and interventions in relation to issues arising from the Strength and Difficulties Questionnaires (SDQ's)
- § Regular Professionals' meetings

There are 64 service users currently on the caseload. Of these 36 are Bedford Children and 28 are Central Bedfordshire.

All service users on the team's caseload are complex cases and considered to be at significant risk and requiring the intensive support offered by the Looked After Children Service (CLAS) team. All service users on the caseload have a history of abuse or neglect from an early age and all have some of the following long term difficulties:

- History of abuse or neglect from an early age (all service users)
- Significant attachment disorder
- Violence / aggression towards carers
- Sexualised behaviour
- Involvement with the Youth Offending Service
- Severe acting out behaviour

The team treats the mental health issues using long term psychotherapeutic approaches including systemic family work, play therapy, art therapy, intensive counselling, as well as cognitive therapy approaches.

In addition to individual work the team undertakes the following:

- Supports the 3 St. Christopher's children's care homes in Kempston, Clophill and Flitwick. Members of the team outreach into the Children's Homes offering consultations on individual cases. They attend school meetings, staff meetings and assist the homes to develop and think through management approaches to emotional and behavioural issues. Informal feedback from the homes is that the support of the CLAS team is invaluable in helping them create successful placements.
- Provides intensive support for foster carers. In most cases CLAS has one worker focusing on working with the child, and a separate CLAS worker focusing on working with the foster carer and the network around the child.
- Supports LAC Social Workers to consider cases going through the court system. The team assists the Social Workers to consider and plan for the emotional wellbeing of the child.
- Supports the Social Workers for the child and the Social Workers for the foster carers.
- Attends school meetings and supports the virtual school.
- Works with groups of siblings. Within the caseload there are 7 groups of siblings – ranging from 2-6 siblings in each group. The added value here is



that the team has an overview of all the cases and treatment in a sibling group and can help make links between the plans.

- Weekly Art Therapy and Theraplay® Groups. These groups help those Looked After Children who struggle to engage in individual therapy to engage with the service and gain some peer support.

There are often 2 CLAS workers on one case – one working with the child, the other working with the system and its complexities. This enables the therapist to remain separate from the complexities of the wider system and its decision-making processes, and from any disputes in the system. This has important therapeutic benefits.

Of the current caseload 12 (19%) service users are 7 years or under and able to participate in Theraplay®. This helps the team take an early intervention approach to addressing deep seated issues, and prevent more severe mental health issues occurring later in childhood and adolescence.

## 2.5 Training

During 2010-11 the following training was provided:

### **SEPT - CAMHS for LAC:**

- Provided training for foster carers on the 'Mental Health Needs of Looked After Children', on 'Surviving as a Foster Carer', and on 'Working with Self-Harm'. Both training courses are extremely well received by foster carers as demonstrated by training evaluation forms. The team provides 3 training days per year, each one attended by approximately 8 foster carers.

### **BCHS:**

- § LAC Nurse delivered two sessions of training to social work teams
- § LAC Nurse planning training event for 0-19 team professionals with respect to undertaking health assessments

## 3. Partnership

A multi agency LAC Health group meets every six weeks to address a range of issues. The membership of the LAC Health Group comprises the following:

- § NHS Bedfordshire Children's Commissioning (Chair)
- § Bedfordshire Community Health Services
- § Central Bedfordshire Council
- § Bedford Borough Council
- § South Essex Partnership Trust
- § Voluntary Organisations for Children, Young People and Families
- § NHS Bedfordshire Public Health
- § NHS Bedfordshire Designated office

With input when required from:-  
Sexual Health services  
Teenage Pregnancy Coordinator  
Drugs and Alcohol services  
Immunisations and Vaccinations Coordinator

In 2010-11 the LAC Health Group has focussed on the Initial health assessment and review process, and work to ensure that statutory guidance is met in relation to health and wellbeing of Looked After Children. This group will be required to report into the Central Bedfordshire Acting Early, Reducing Poverty & Improving Health Strategy Group (Central Bedfordshire only), and to the Countywide Child Health & Wellbeing Board (Bedford Borough and Central Bedfordshire).

A LAC Health Improvement Group has been set up to look at the development of health improvement needs for Looked After Children, and to identify and communicate opportunities for meaningful health improvement messages. The group comprises representatives from NHS Bedfordshire Public Health and BCHS, but will be extending its membership in 2011 to incorporate representatives from both local authorities, SEPT, and Drugs and Alcohol providers. The identified priority health improvement areas are:

- § Sexual health
- § Mental health
- § Drugs and Alcohol

## **4. Practice**

### **4.1 Performance**

#### **4.1.1 LAC Health services baseline review**

A baseline review of health services for Looked After Children was carried out in December 2010 as a result of an inspection by the Intensive Support Team to NHS Bedfordshire in April 2010. The inspection report recommended that:

“... the arrangements for LAC be reviewed by NHS Bedfordshire and the Children’s Trust as a matter of urgency, as it would appear that they are not compliant with Statutory Guidance on Promoting the Health and Wellbeing of Looked After Children 2009, and this group of particularly vulnerable children are not receiving an adequate service”.

The findings of the baseline review were as follows:

a) It is clear that in both local authorities a significant proportion of Looked After Children are not receiving initial or review health assessments within the statutory timeframes.

Under the performance assessment framework, local authorities in England and Wales are measured on uptake on annual health checks. The out turn

figures for LAC health assessments carried out within the statutory timeframe for 2010 were 86% for Bedford Borough, and 83% for Central Bedfordshire.

Statutory guidance (2009) is clear that an initial health assessment should be completed within 20 working days of a child becoming Looked After, and that reviews should be completed every 6 months for a child under the age of 5, and annually for those aged 5 and over.

b) There are no routine/agreed monitoring of the numbers who have had an initial assessment (or the timing of this) and those due a review. As a result of the Statutory Guidance, there has been a need to develop local performance measures across health and social care.

c) There are no clear agreed failsafe and escalation procedures (both within and out of county).

d) Opportunities for health promotion should be maximised and services provided in a more efficient and accessible way.

Both local authorities and BCHS will develop an action plan which will be monitored via the LAC Health Group

There are several themes which affect outcomes on performance indicators, and these include:

- § Problems arranging health assessments for children placed out of county – levers to force action are limited.
- § Timely notification re. LAC from the local authorities to BCHS
- § Gaining parental consent and completing paperwork
- § The limited number and location of consultant paediatric sessions
- § Data collection
- § Older Looked After Children declining to have a health assessment

#### **4.1.2 Compliance with statutory guidance**

A second review carried out by NHS Bedfordshire in March 2011 compared NHS provision for Looked After Children with statutory guidance. The following areas were highlighted as needing attention:

- § No Designated Doctor and Nurse for LAC in Bedfordshire
- § Underdeveloped health promotion and prevent services for LAC
- § Incomplete JSNA for LAC
- § Focus on LAC not a priority for some services
- § Arrangements for LAC placed outside Bedfordshire not robust
- § Public Health lead not in place

#### **4.2 Immunisations**

In 2010-11, Bedford Borough's uptake of immunisations by Looked After Children who have been looked after continuously for at least 12 months was 68.8%, just above the regional average, but below the national average.

In Central Bedfordshire in 2010-11 the uptake of immunisations by Looked After Children looked after continuously for at least 12 months was 77.78%, higher than the regional average, and similar to the national average.

<b>Immunisations/vaccinations of children who have been looked after continuously for at least 12 months</b>			
	Year	Number of children	Immunisations to date
Central Bedfordshire	2009	95	75 (81%)
Bedford Borough	2009	105	80(76%)
Central Bedfordshire	2010	90	70(77%)
Bedford Borough	2010	110	75 (68%)

Work is currently under way to gather accurate data and increase rates of immunisations in 2011-12. The LAC Health Improvement Group is currently addressing the general issues of Looked After Children not engaging with health checks, including immunisations, A small Task and Finish Group will be set up to identify those Looked After Children who have not had their full schedule of immunisations, and will work with them to bring these up to date.

### **4.3 Dental**

In 2010, dental checks for Looked After Children in Bedford Borough and Central Bedfordshire were 81.8% and 88.89% respectively, and in line with the national average of 81.8%. No specific dental access issues have been identified for Looked After Children. However, NHS Bedfordshire is part of the pilot for Advanced Mandatory dental services, and additional capacity will be made available in the new Health Centre Dental Wing in Shefford for Looked After Children from Summer 2011.

<b>Dental checks of children who have been looked after continuously for at least 12 months</b>			
	Year	Number of children	Dental checks up to date

Central Bedfordshire	2009	95	80 (86%)
Bedford Borough	2009	105	90 (85%)
Central Bedfordshire	2010	90	80 (89%)
Bedford Borough	2010	110	90 (81%)

#### 4.4 Sexual Health and Teenage Pregnancy

- Teenage Pregnancy is a complex issue influenced by a range of factors and there are a number of negative outcomes associated with teenage pregnancy that make it a key concern for public health.
- In Bedfordshire resources are targeted through strong partnership working to tackle higher rate areas and amongst vulnerable groups who are at an increased risk of teenage pregnancy.
- All LAC have access to the Brook Sexual Health Outreach Nurse. Brook, NHS Bedfordshire and the LAC team leaders in both local Authorities have developed sexual health packs which are given to all LAC aged 13 plus
- Sexual Health training for social workers has been delivered and future training requirements are currently being considered. Basic awareness training to assist foster carers support those in their care to delay early sexual activity and to increase their confidence in discussing these sensitive issues is being delivered in March 2012.
- An information leaflet is being developed by NHS Bedfordshire to assist social workers in signposting young people to sexual health services across Bedfordshire .
- The Chlamydia screening outreach team have targeted children's homes, children in care councils and hostels in an attempt to reach LAC and those leaving care
- The Brook Education Outreach Worker provides sex and relationships programmes to vulnerable young people in areas of high teenage pregnancy, including LAC
- § LAC mothers to be are supported through the under 20 support pathway which begins when they book in with a midwife. They are then linked to a lead professional who will support them with accessing local services such as housing, children centres, parenting programmes and education, employment and training. The young person is also contacted by the Brook outreach nurse in the antenatal period to discuss contraception after birth and then again when they have had their baby
- § The Sexual Health Team have consulted with the Young People in Care Council about accessing services. The feedback will be collated and used as recommendations for improving services in the future.

#### **4.5. Drugs and Alcohol**

Referrals to Drug treatment services are low.

In CBC in 2009/10, 6 Looked After Children (6.45%) were identified with substance misuse issues, 100% of these were offered an intervention but all refused to engage in treatment. This highlights a potential issue in terms of this groups' readiness or motivation to accept treatment.

In BBC, 4 Looked After children (3.4%) were identified as having a substance misuse problem, all were offered an intervention and the majority (75%) accepted this support.

There is now an identified LAC lead worker within Drug and Alcohol Services.

### **5. Next steps**

5.1 Partner agencies are committed to ensuring positive outcomes for these vulnerable children and young people and are making considerable progress in addressing outstanding issues around improving timescales for initial and review health assessments.

Looked after Children Health Group have developed an action plan to ensure compliance with statutory guidance is addressed. This includes children on the edge of care.

A progress report will be made available in Autumn 2011. The Looked After Children Annual Health Report will be made available to the Corporate Parenting Panel by June of every municipal year.