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Bwrdd Iechyd Prifysgol
Caerdydd a'r Fro
Cardiff and Vale
University Health Board

CYPF
Children, Young People
& Family Health Services



PPIT
Gwasanaethau Plant, Pobl
Ifanc ac Iechyd Teuluol

CHILDREN LOOKED AFTER UPDATE ON STATUTORY HEALTH AND INFORMATION FOR LOOKED AFTER CHILDREN

INTRODUCTION

The purpose of this report is to provide the Corporate Parenting Advisory Committee an update regarding Health Assessments for Looked after Children (LAC).

BACKGROUND

The Children Looked After team are an integral part of the Children, Young People and Family Health Directorate and deliver an area of work where there are statutory health requirements. It is well known that children in care have adverse health outcomes so the assessments are aimed at improving health outcomes and reducing health inequalities, as well as ensuring identified health needs are actioned and monitored.

The service is provided by a small staffing team of Consultant Paediatricians and Specialist Nurses.

It is widely acknowledged that there has been a growth in the number of children looked after with a direct impact on the number of health assessments the team need to deliver. Until recently the team has not grown in line with the growth in demand.

REGULATIONS

The regulations stipulate that within 28 days of a child being accommodated by the local authority they should have a holistic health assessment.

In addition to the initial health assessment, for children under the age of 5 years a review health assessment should be undertaken every 6 months, for those aged 5+ years this should be completed annually.

Meeting these regulations has been challenging due to the increased demand without any expansion in the workforce. Delays in manual notification from the local authority also have an impact on the ability to undertake an assessment within 28 days of being taken into care.

ASSESSMENT AND ACTIONS

There has been a consistent increase in children in care in across Cardiff and the Vale of Glamorgan. This increase in numbers of children looked after have a significant impact on the number of initial & review health assessments required each year. However, capacity has remained the same, resulting in a backlog of both new and review health assessments.

Health assessments are currently delivered by both Medical and Nursing staff. Nurse led clinics were historically undertaking assessments on over 10s. All other assessments are undertaken by Medical Staff, including fostering & adoption, and associated adult health assessments.

Based on this model and workforce, demand for Health Assessment exceeds capacity. Recognising these pressures the Health Board has taken a number of actions;

- Increase in nursing resource – the nursing resource has increased by 67% from 4.2 whole time equivalent posts to 7. This has significantly increased the number of Health Assessments that can be completed.
- Modernisation and change of delivery models – nursing teams will now undertake assessments for over 5s which has significantly reduced the burden on a very small medical workforce.
- Increase in Medical session to focus on adult health assessments, and statutory assessments for adoption.

There has already been an improvement in performance with a reduction in the backlog of children awaiting an initial assessment.

In addition to the increasing backlog of assessments this increase in demand has resulted in nurses carrying significant numbers of children on their caseload. The Royal College of Paediatrics and Child Health recommend caseloads of 100 within the competencies of healthcare staff intercollegiate document. Based on current numbers of nursing staff caseload remain in excess of these levels.

Further consideration & developments

- Further nurse recruitment to consider Health Visiting roles.
- Review of completion of under 5s. These children require 2 health assessments per annum, currently undertaken by Medics. Consideration is being given to the nurse / health visiting completing one of the two annual assessments.
- Develop patient Information system and data capture for the service in order to support ongoing monitoring.
- Review of outcomes from Audit of quality of Health Assessments and information sharing.
- Development of Health passport for children leaving care.

To note health assessment targets are only a small aspect of the work undertaken by this workforce. Other responsibilities are identified in Appendix 1.

SUMMARY

There has been a consistent growth on the number of children looked after. This has a direct impact on health, with an increase in the needs for Health Assessments and other associated work.

The Health Board has responded with an agreement to increase the nursing workforce and expand the age range. This will reduce the demand on the very small medical workforce. The demand and capacity is under continual review, with further consideration being given to expand the workforce.

Duties of the medical advisors for adoption and fostering

Adoption

- Adoption clinic
- Clinical Administration
- ADM packs
- Adult health forms
- Meeting with prospective adopters
- PART C updates (either because new information has been shared, the child is placed out of area, the initial medical was completed when the child was LAC and not under adoption regulations, the health visitor has completed the review medical)
- Adoption panel
- Adoption panel preparative reading
- Parental Health forms
- Adult health records released from legal during care proceedings
- Information sharing and reports for adoption placements
- Letters and referrals or/from children placed out of area
- Queries from medical advisors out of area
- Post adoption queries/issues
- Access to records
- Emergency department safeguarding notifications
- Quarterly meetings – RAC management board meetings, LAC steering group, Safeguarding steering group, RAC medical advisors' meetings, Welsh Medical Group business meeting and peer review, Cardiff and Vale LAC team meetings
- Team management and support of Looked After nurse specialists

Fostering

- Adult health forms for fostering
- LAC clinics
- Foster panel
- Foster panel preparatory reading
- Review Part C's
- Health care needs forms for those children out of area
- Review health assessments completed by the specialist nurses, health visitors and other doctors

Duties of the Looked After Children Nurse Specialist

- Initial and review health assessments
- LAC review meetings
- Strategy meetings
- Case conferences
- CSE strategy meetings
- Hospital discharge meetings
- MDTs
- Placement panel
- Unaccompanied asylum seeker clinics
- Referrals to other health boards and health professionals
- Taking children to health appointments (e.g. sexual health, CAMHS, dentist)
- Working groups meetings – e.g. asylum seekers
- LAC Cymru meetings
- All Wales LAC steering group
- Psychology supervision
- Safeguarding supervision
- ED safeguarding meetings
- Team Meetings
- Teaching e.g. Health Visitors
- Training foster carers, residential staff etc
- Access to records