

CORPORATE PARENTING COMMITTEE	AGENDA ITEM No. 11
21 MARCH 2018	PUBLIC REPORT

Report of:	Executive Director People and Communities Cambridgeshire and Peterborough Councils	
Cabinet Member(s) responsible:	Councillor, June Bull, Health Champion Councillor Sam Smith, Cabinet Member for Children's Services	
Contact Officer(s):	Nicola Curley, Assistant Director Children's Social Care Deborah Spencer, Designated Nurse Looked after Children	Tel. 864065

HEALTH REPORT

R E C O M M E N D A T I O N S	
FROM: Assistant Director Children's Social Care	Deadline date: N/A
<p>It is recommended that the Corporate Parenting Committee:</p> <ol style="list-style-type: none"> 1. Notes the content of the report; and 2. Raise any queries with the Lead Officers. 	

1. ORIGIN OF REPORT

1.1 This report is submitted to each formal Corporate Parenting Committee

2. PURPOSE AND REASON FOR REPORT

2.1 The purpose of this report is to provide an overview of the Clinical Commissioning Group's (CCG) activities to ensure robust monitoring and quality assurance systems are in place to meet the health needs of the Looked after Children population in Peterborough

2.2 This report is for the Corporate Parenting panel to consider under its terms of reference no: 2.4.3.6 (c) Promote the development of participation and ensure that the view of children and young people are regularly heard through the Corporate Parenting Committee to improve educational, health and social outcomes to raise aspiration and attainments.

2.3 This links to priority 4 of the Children in Care Pledge and Care Leavers Charter. Health issues of children and young people in care.

3.

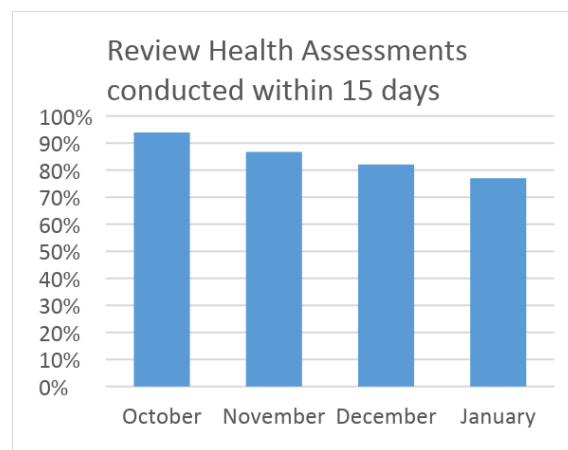
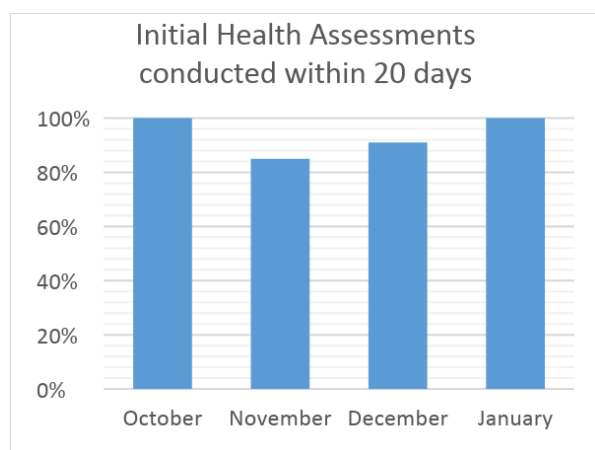
Is this a Major Policy Item/Statutory Plan?	NO	If yes, date for Cabinet meeting	N/A
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4. BACKGROUND AND KEY ISSUES

4.1 Initial Health Assessments

The Children in Care (CIC) health team continue to strive to meet the 20 day working target for initial health assessments. The reasons for not reaching 100% in November was one young person was placed in a Youth Offending Institute and there was one where there was an age dispute. In December one young person was placed out of area.

CAMBRIDGESHIRE & PETERBOROUGH FOUNDATION TRUST		October 2017	November 2017	December 2017	January 2018
No. Children Entered Care	No. Placed in area	6	13	11	17
	No. Placed out of area OOA	0	0	1	0
IHA Completed with 20 days	No. In area completed within 20 days	6	11	10	17
	% in area completed within 20 days	100%	85%	91%	100%
	No. OOA completed within 20 days	0	0	0	0
	% OOA completed within 20 days			0%	
	% All IHA completed in 20 days	100%	85%	91%	100%
Annual Health Review Assessments	No. In area Annual Review Assessments required	30	29	25	23
	No. OOA Annual Review Assessments required	3	1	3	3
	No. In area completed within 15 days	29	26	23	20
	% in area completed within 15 days	97%	90%	92%	87%
	No. OOA area completed within 15 days	2	0	0	0
	% OOA completed within 15 days	67%	0%	0%	0%
	% All AHR completed within 15 days	93.90%	86.70%	82.10%	77.00%



4.2 Review Health Assessments

The major challenges with review health assessments is children placed out of area and those who do not attend appointments. In **October** one young person did not attend and one of the out of areas was delayed. In **November** three children in area did not attend and one was placed out of county, in **December** two in area assessments were late and there were three placed out of county. In **January** three young people did not attend and three were placed out of area.

4.3 Health Assessment Quality Audit

The Designated professionals conducted a health assessment quality audit in November 2017. A selection of health assessments from quarter 1 (April – June 2017) were selected and assessed

using the quality audit tool.

This audit demonstrates that consistently high quality health assessments are being conducted by both Paediatricians and Nurses within Cambridgeshire and Peterborough Foundation Trust. There have been significant improvements since the previous audit in 2016 / 17 and the Designated professionals would like to compliment the Children in Care Health Team on addressing areas highlighted in the last audit.

4.4 Significant improvements noted were:

1. Assessments conducted by both the nurses and the doctors are now producing SMART (Specific, Achievable, Measured, Realistic, Timely) action plans as they have a timeframe included. Percentage improvement from 37.5% to 100% ;
2. All assessments audited had a height, weight and BMI recorded. Percentage improvement from 0% to 100% ;
3. The question regarding lifestyle in those over 10 years old now encompasses specific questions regarding Child Sexual Exploitation (CSE);
4. The recording of vision and hearing dates by the nurses has improved from 0% to 100% ; and
5. Recording of neonatal blood spot testing, neonatal hearing and birth history has improved significantly.

4.5 Closing the Gap – Children with behavioural and attachment difficulties

A further paper was taken to the Joint Commissioning Unit in February 2018. Services currently available to all young people have now been mapped including 'Keep you Head', Kooth, CHUMS (Mental Health & Emotional Wellbeing Service for Children and Young People) and the work of the LAC Psychologist. Positive discussions have taken place with the newly implemented roles of Emotional Health and Well-being practitioners regarding their input with Looked After Children. There is a review being undertaken to look at provision across Cambridgeshire and Peterborough to provide a more equitable service and any uplift in the emotional / mental health budget will prioritise Looked After Children. The group continues to meet whilst this work is ongoing. Further updates will be provided at future meetings of Corporate Parenting Committee.

5. CONSULTATION

N/A

6. ANTICIPATED OUTCOMES OR IMPACT

- 6.1 To improve health and well-being for Looked after Children by ensuring adequate assessment of health and addressing areas where there may be a lack of provision.

7. REASON FOR THE RECOMMENDATION

- 7.1 Corporate Parenting Committee have requested a health update at all formal committees.

8. ALTERNATIVE OPTIONS CONSIDERED

- 8.1 N/A

9. IMPLICATIONS

Financial Implications

- 9.1 N/A

Legal Implications

- 9.2 N/A

Equalities Implications

9.3 N/A

10. BACKGROUND DOCUMENTS

None

11. APPENDICES

None