

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

Report of:	Corporate Director People and Communities	
Cabinet Member(s) responsible:	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 UPDATE REPORT

RECOMMENDATIONS	
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 they have with the lead officers. 	

1. ORIGIN OF REPORT

1.1 A health report is submitted to each formal Corporate Parenting Committee.

2. PURPOSE AND REASON FOR REPORT

2.1 The purpose of the report is to provide an update to committee members on timescales of health assessments

2.2 This report is for Corporate Parenting Committee to consider under its Terms of Reference No.

2.4.4.6 (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. TIMESCALES *[If this is not a Major Policy item, answer NO and delete the second line of boxes.]*

Is this a Major Policy Item/Statutory Plan?	NO	If yes, date for Cabinet meeting	
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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 the target of 95% in some months are largely due to children placed out of county and children not attending the first appointment made for them.

4.1.1

CAMBRIDGESHIRE AND PETERBOROUGH FOUNDATION TRUST		July 2018	August 2018	September 2018
No. children entered care	No. placed in area	13	9	4
	No. placed out of area	9	3	1
IHAs completed within 20 days	No. in area completed in 20 days	11	8	4
	% in area completed in 20 days	85%	89%	100%
	No. out of area completed in 20 days	0	0	0
	% completed out of area in 20 days	0%	0%	0%
	% all IHAs completed within 20 days	50%	67%	80%

July 2018: 2 IHAs in area out of timescale; 1 absconded, returned to placement, 1 late referral.

4.2 August 2018: 1 IHA in area out of timescale, transferred out of area before assessment took place

September 2018: all in area IHAs completed within timescale

4.2.1

Review Health Assessments

The major challenges with review health assessments are children placed out of area and those who do not attend appointments.

Annual Review Health Assessments	No. in area RHAs required	22	22	18
	No. out of area RHAs required	7	6	4
	No. completed with 15 days	25	16	18
	% completed within 15 days	52%	78%	82%

July 2018: 8 in area did not attend; 7 out of area RHA out of timescale

August 2018: 6 in area did not attend; 6 out of area RHA out of timescales

September 2018: 18 in area RHAs completed within timescale; 4 out of area out of timescale

4.2.2 **Psychological Therapies**

The Standard Operating Procedure for funding for CAMH and psychological therapies for children placed out of county is now embedded into practice. The Designated Nurse is receiving requests for funding using the SOP. Individual case discussions have taken place to review therapies and placements with colleagues from Social Care.

The gap for children placed within county with attachment / behavioural issues has been reviewed by the Joint Commissioning Unit in September.

5. **CONSULTATION**

5.1 N/A

6. **ANTICIPATED OUTCOMES OR IMPACT**

6.1 To improve the health and well-being for LAC 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 None

Legal Implications

9.2 No legal implications arise, as the report provides statistical information to be noted by the Committee.

Equalities Implications

9.3 N/A

Other Implications

9.4 This report provides clear information on health services provided to children in care and care leavers and ensures that Committee members are informed, but can also challenge where necessary.

10. **BACKGROUND DOCUMENTS**

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

10.1 N/A

11. **APPENDICES**

11.1 None

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