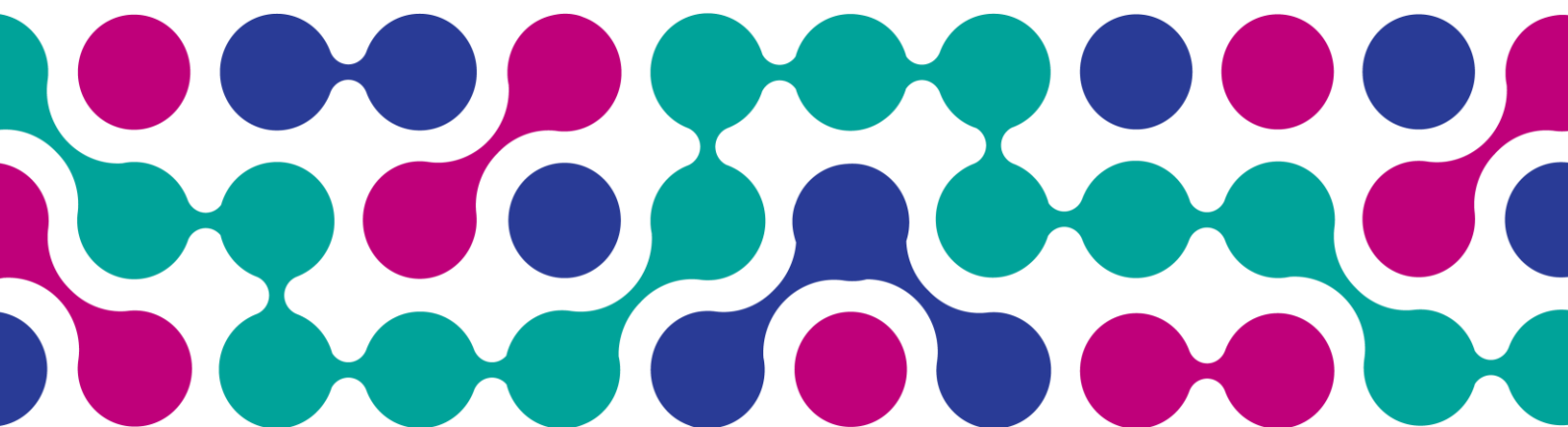


# Children Looked After and Care Experienced Young People Annual Report 2022-2023



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<b>Date: July 2023</b>	

# 1. Executive Summary

This Annual Report once again recognises the importance of the “Voice” of children and young people in all that the Designates do. Children and young people’s feedback and challenge have been influential in addressing areas of concern, service redesign and the recruitment process in this year. A valuable contribution to ensuring that their views and needs are considered at all levels of the organisation.

During this reporting year 2022-2023, the health body across Bath, North East Somerset, Swindon and Wiltshire (BSW) transitioned from a Clinical Commissioning Group (CCG) to an Integrated Care Board (ICB) now known as BSW ICB. Although many of the structures within the organisation identified areas of change and development, the statutory duty to support the three Local Authorities (LA) in delivering their Corporate Parenting responsibilities remained.

BSW ICB as a newly formed organisation has identified three strategic objectives for this new organisation: *Focus on prevention and early intervention; Fairer Health and Wellbeing Outcomes and Excellent Health and Care Services addressing health inequalities*. These are co-incidentally the fundamental tenants of the work being led by the Designated Professionals for Children Looked After (CLA) and Care Experienced Young People (CEYP). They are easily cross referenced within the 2022-2024 strategy for CLA and CEYP and the underpinning workplan.

The strategy for CLA and CEYP has become an integrated part of the implementation plan for BSW ICB as it matures and is currently referenced within the Children and Young People Transformation work. CLA and CEYP are also identified in the BSWs Inequality Strategy 2021-2024, showing the organisations commitment to addressing all areas that impact on CLA and CEYP.

The work plan is ambitious but no group is more deserving for CLA and CEYP.

Progress against the plan has had some early successes, and there continues to be a significant amount of ongoing work required to deliver the plan in its entirety going forward. Areas that have presented ongoing challenge is that of support for emotional wellbeing and mental health as well as dental access. It is acknowledged that emotional and mental support has shown a significant increase in demand in this year for all children and young people in the BSW ICB area and this too has been seen within the CLA and CEYP population. The organisation continues to seek ways of addressing this need and is supportive of proposed early interventions within the workplan to address some of these.

The Designated Team remain the organisations “*subject matter experts*” and champions both within BSW ICB and other partner organisations to raise awareness and address issues on behalf of CLA and CEYP as well as BSW ICB

Gill May

Chief Nurse

## 2. The Voice of Children Looked After and Care Experienced Young People

As highlighted in previous years annual reports the voice of children looked after (CLA) and care experienced young people (CEYP) is a fundamental tenant of all the work the Designated Professionals undertake on behalf of BSW ICB. It is the first theme in the health strategy for delivery of the health agenda to improve outcomes for CLA and CEYP. The new BSW ICB organisation has endorsed the importance of this work and this will continue through the next year of the strategy for 2023-2024.

During this reporting period four key pieces of work have been singled out to show how the voice of CLA and CEYP and their participation has been influential in underpinning the Designated professionals work against the strategy and workplan.

The Designated Nurses have been advocating that the BSW ICB annual report for CLA and CEYP is transformed into an easily accessible version for the children and young people themselves. Within the Swindon Integrated Care Alliance (ICA) also known as “place” the BSW ICB CLA annual report for 2021-22 had been modified by the Designated Nurse to a child and young person version. It was shared with the membership of the Children in Care Council (Raise Your Voice) in Swindon. Some of the young people’s comments are featured below.

“We will be asking for more resources in Speech and Language teams so we can check all children looked after communication needs when they come into care”-This is a good thing as children can understand them.

What you are doing to tackle stigma seems really positive.

Raise Your Voice members had all been to the dentist in the last year.

Sounds really positive and that they have definitely listened.

“We have asked the nurses who are completing health assessments with you to ask where you want your health assessment to be.” – This is a good change.

There are still delays – I’ve been waiting for psychotherapy

Really like seeing what we said last time and what has been done about it.

Really like the idea that there is going to be mental health first aid training – Emotional Wellbeing PA has been recruited. Think that is brilliant and will help a lot of CEYP.

We still require support to develop a report template that is CLA and CEYP friendly that could be used across the BSW ICB footprint going forward which we would be actively asking for it to be co-production with CLA and CEYP. This would also be a useful model template for all BSW ICB reports to be child and young person friendly for the organisation as a whole.

While in discussion with CEYP who were undertaking a presentation on “Stigma” it was shared with the Designated Nurse by a number of CEYP who were parents, that the maternity services often made them feel stigmatised because they had been in care. The Designates felt that this needed to be explored and a task and finish group was set up to explore this within the three maternity service providers across the BSW ICB footprint. Initial work was undertaken with the three safeguarding maternity nurse leads in the three acute provider trusts. An initial awareness session was developed to be shared with the maternity staff and for the BSW Designates team in partnership with the maternity safeguarding leads to fully understand and benchmark their understanding of CLA and CEYP.

The finding from these sessions showed that further training was required and will be taken forward during 2023-24 with the development of a “training package” that could be delivered across all commissioned services. The Designates are committed that CEYP who are parents co-design this training and it is hoped they would be willing to share their experience as part of the training either virtually or in person.

In the autumn of 2022, an opportunity to recruit in recognition of the need, BSW ICB invested in a new post of a Specialist Nurse for CLA and CEYP to work alongside the Designated Nurses across BSW ICB. CLA and CEYP were invited to be part of the recruitment process. They set up a virtual interview, designed their own questions based on reviewing the job descriptions. Wrote a written evaluation of the candidates and fed back into the overall interview process. A number of their observations were very insightful and supported the final selection of the appointee. This was both a learning experience for the individual young people as well as the Designates and will be a standard requirement within future CLA and CEYP commissioned services and personnel recruitment.

In a significant step to recognise the special characteristics of our CEYP, NHS England, during *Care Leavers Week* in October 2022, became a signatory to the Care Leavers Covenant. The [Care Leaver Covenant](#) which came into being in 2018 was designed to be a national inclusion programme through which organisations from the private, public and voluntary sectors pledge to provide support for care leavers aged 16-25 to help them to live independently.

This work is being progressed by the Associate Director -Children and Young People’s Programme for BSW ICB who is a member of the strategic CLA and CEYP group in the ICB and linked to the ICB workplan.

### 3. Introduction

This is the third CLA and CEYP annual report which outlines how, as a single statutory body, the BSW ICB, has discharged its statutory obligations in accordance with relevant statutory guidance and legal frameworks guidance under section 10 and 11 of the Children Act 2004; Promoting the Health and wellbeing of Looked after Children (2015: amended 2022); Health and Social Care Act 2012 and Children and Social Work Act 2017. This report for BSW ICB covers the period of 1 April 2022 – 31 March 2023 and was written by the Designated Professionals with support from Named Professionals within provider organisations.

During the reporting period BSW Clinical Commissioning Group (BSW CCG) was dissolved with the introduction of a new BSW Integrated Care Board (BSW ICB) being inaugurated. Although this is a new organisation, all statutory duties and functions relating to CLA and CEYP were transferred between the two organisations in July 2022. Over the year the future structure and model of health service delivery of the new organisation has been developed. The clear foundation is that this is an integrated partnership working with all statutory partners: LA and Police as well as other health providers and the Third sector. The ICB has recently ratified three strategic objectives: Focus on prevention and early intervention; Fairer Health and Wellbeing Outcomes and Excellent health and care services. All three objectives underpin the strategic work undertaken in partnership across the BSW ICB footprint by the Designated Professionals, their health, social care and third sector partners. The Designates have for a number of years modelled their practice and drive to reduce inequality, get early interventions to support CLA and CEYP, get fairer access to good quality services and improve outcomes. The BSW ICB three strategic objectives reflect the work of the Designates completely.

### 4. Purpose of the Report

This report intends to inform the Integrated Care Board on the progress of CLA and CEYP activity which has been undertaken during the reporting period.

It will include more detail on progress against the CLA and CEYP strategy and underpinning workplan, sharing initiatives and improvements to address the health and wellbeing of our vulnerable children and young people who are in or have been through the care process up to the age of 25 years. It will also share BSW ICB's response to local and national priorities, areas of challenge, good practice and collaborative working.

It is also the function of this report to update the Board on progress against activities identified in 2021-22 reports for completion during 2022-23 laid out in the workplan set against the strategy for CLA and CEYP.

In addition, with a collaborative and partnership approach, the BSW ICB should be assured that the BSW ICB is represented by their Designated Professionals for CLA on the Corporate Parenting Boards/Panels within the three LA areas. These panels are specifically convened within the LAs and chaired by Council members who as a body have the statutory duty of being a Corporate Parent. Health as a partner organisation, also aligns to holding this role. During the year all the Boards/Panels have had ICB representation on them.

The BSW ICB Accountable Officer has ultimate accountability for Safeguarding Children and CLA within the ICB health system. The Chief Nurse has Executive responsibility for Safeguarding and CLA in accordance with the statutory guidance (DH & DfE, 2015) and the Accountability and Assurance Framework (NHSE, 2022). As part of the BSW ICB safeguarding and CLA system the BSW ICB has Designated Professionals for CLA who provide the subject matter expertise and strategic oversight for the health economy. These Designated roles are a statutory requirement for BSW ICB.

## 5. Report Framework

This report has been framed around the CLA and CEYP strategy themes and workplan 2022-2024. The development of the Strategic Health Group for CLA and CEYP in November 2021 has gone from strength to strength. In September of this year the membership was extended to our partners in the LA to join us and recognition of co-opting other partners around specific topic areas as required also made.

The governance for this group is to directly link in with the Children and Young Peoples Programme Board which has all partner membership on this.

### 5.1 CLA and CEYP Strategy Themes

Listed below are the six themes identified in the strategy:

- Voice of CLA and CEYP and their Participation
- Health- Physical, Emotional Wellbeing and Mental Health
- Quality and Performance
- Partnership and Commissioning of Services
- Information Sharing
- Strong Leadership

#### 5.1.1 Voice of the CLA and CEYP and their participation

As reported earlier in this document the Designated Professionals continue to seek participation and co-production in all that they do. They actively listen to feedback and comment and look to address these through the Strategic Group by adding additional work streams to the workplan.

#### 5.1.2 Health

This section has been divided into three areas of focus for the strategic group:

##### **Physical Health**

- **Speech and Language Therapy (Salt) Pilot Project-**

The scope of this pilot project was to research and develop a screening process and appropriate tools to identify the speech, language and communication needs (SLCN) of



children and young people entering care. This has involved researching and developing appropriate screening tools for use with children and young people aged 5-18 years old (children under 5 will be screened via the early year's pathway). Following a period of research to explore available published tools and the pathways and tools being used in other services, a 'Swindon' pathway was developed for the pilot project and four schools selected to trial the pathway.

**Potential Outcomes:** Identifying and supporting the communication needs of Children Looked After has a range of benefits to the child/young person and those supporting them. Including;

- Enabling access to appropriately differentiated and supported education, potentially improving educational attainment and future life chances.
- Reducing the negative consequences of unidentified/unmet communication needs which lead to communication through 'behaviour'. These may include exclusion from school, social exclusion or placement breakdown.
- Improved social and emotional well-being, relationship building and mental health.
- A reduction in the incidence of children looked after becoming involved in the Criminal Justice system.
- An upskilled workforce with a clear understanding of speech, language and communication needs and the impact that speech, language and communication needs have on the range of factors discussed above.
- Practical tools, resources and training to identify and support the communication needs of children looked after. These tools and the knowledge acquired can then also be used to improve the offer for other vulnerable young people, particularly those who present with social, emotional and mental health needs (SEMH).

**Findings:** The pilot project has been very successful in highlighting the speech, language and communication needs of children looked after, with 76% of children who took part in the project demonstrating weakness in speech, language or communication skill to some degree. Of these children, 52% (previously unknown to SALT) were felt to be in need of a referral to speech and language therapy.

**What Next:** In Swindon, The Virtual School have agreed to fund a further 12 months of the Project and this will focus on measuring the outcomes of SALT intervention with a cohort of Children Looked After identified from the screening process as having SLCN.

A business case has been written for a specialist service which would fund additional SALT resources within each SALT Team in BSW. This additional resource would be ring-fenced for CLA. The Virtual Heads in each Local Authority have agreed that the schools would be responsible for the initial screening, and it would form part of the child's personal education plan.

- **Support for Free Prescriptions for CEYP as part of the Care Leavers Covenant Commitment**

In this year significant progress has been made to address this issue for CEYP and at the time of this report has reached its final stages of discussion within the BSWICB.

As corporate parents within BSW ICB, it is recognised and understood the additional struggles young people leaving care face around additional inequalities including financial constraints as they move into independent living. Around 10,000 young people leave care in England every year, they leave home at a younger age and have more abrupt transition into adulthood than their peers.

It is recognised that children entering local authority care have poorer levels of physical and mental health than their peers and their longer-term outcomes remain worse. Two thirds of Children Looked After (CLA) have at least one physical complaint and nearly over half have a mental health issue. It was reported that CLA and care experienced young people (CEYP) were 4-5 times more likely to self-harm in adulthood. CEYP are 4 times more likely to have a mental health issue and significantly more likely to have physical health problems.

In addition, falling rates of premature mortality in the general population are not mirrored in the CEYP population. Adults who spent time in care as children between 1971-2001 were 70% more likely to die prematurely than those who did not. The extra risk of premature death rose for care leavers from 40% in 1971 to 360% in 2011. Care leavers are also more likely to experience an unnatural death (suicide, violent death, accident): *Nuffield Foundation (2021)*<sup>1</sup>.

For young people aged 16-18 who are in full time education or receiving benefits under the age of 20, they are entitled to free prescriptions. Young people may also be exempt if they are on low income.

An additional burden on those CEYP who are accessing employment is the cost of prescription charges, they are **not** exempt from the cost if they have an annual income of over £15,276. Many CEYP do not have access to funds from extended family to support them with daily living costs and therefore prescription costs are an extra burden.

CEYP have told us:

- They may be less likely to go and see a doctor as they know they cannot afford the prescriptions
- They have had to make a choice between paying rent, bills and buying food or using the money they have to pay for prescriptions
- They have been in a position where they have had to choose which prescription items they are going to purchase as they cannot afford the full prescription

Benefits to supporting this:

- Addressing prescription poverty for CEYP
- Reduction in A&E and Unscheduled Care presentations
- Reduction in non-elective admissions for CEYP
- Supporting better management of mental health conditions

- Addressing health inequalities
- Improving mortality rates
- CEYP access a health approach from 18yrs to 25yrs
- Supporting the Care Leavers Covenant to which NHS is now a full signatory

A young person who is not a CEYP may have asked for help from their parents. As corporate parents, we should be asking “what would we do for our own child?”

When considering the cost of prescriptions, it is also important to recognise this cost against the cost of healthcare when appropriate medication is not obtainable when needed.

- **Ensuring CLA and CEYP are Recognised in Procurement of Health Services by BSWICB**

In 2022-2023 the Designated Professionals were included in the procurement process of two key service provisions. This included reviewing and commenting on the service specification and pathways for both services. These services were being commissioned on a BSW ICB system wide position. The services involved were:

- End of Life Care
- Sexual Assault Referral Centre (SARC).

### 5.1.3 Emotional Health and Wellbeing

- **SALT Project to help ensure early intervention and impact on emotional health.**

As highlighted before this work has benefits in helping children with their communication and in turn assist in being able to clearly articulate their needs and frustrations.

- **Youth Mental Health First Aid training for Personal Advisors and wider CLA health workforce.**

A proposal has been drawn up to bring into alignment the training across the BSW ICB which is currently available in the Wiltshire LA which has been supported by the then Clinical Commissioning Group and now ICB for the last 10 years. It is hoped that this training could support personal advisors for CEYP as well as health staff for CLA and CEYP in early understanding (so an early intervention) of emotional health and mental health in YP. This fits perfectly with the ICB strategic aim of a focus on early identification and early intervention that could prevent escalation of increase deterioration of emotional health and wellbeing and also reducing further escalation into a mental health crisis. It is hoped that this will be progressed further in 2023-24.

### 5.1.4 Mental Health

This is an area of concern which has been rising across all children and young people in the UK post the pandemic and for all CLA and CEYP this is no different. Recognition as to

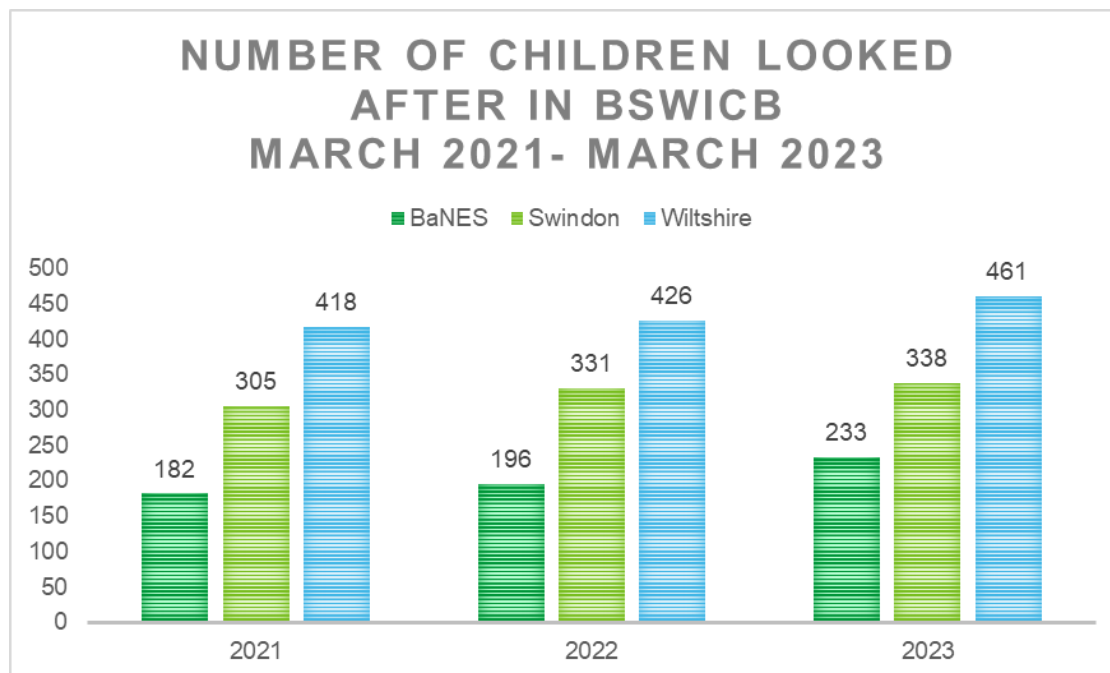
the increased needs for this group has been identified by the Child and Adolescent Mental Health Services (CAMHS) and a detailed report of the service provision and planned developments are contained in Appendix 1

In addition to the work being undertaken by CAMHS, from the workplan following areas are highlighted as areas of development:

- Improved data collection- during the autumn of 2022 the CAMHS provider experienced a national cyber-attack affecting their data in which their systems were compromised. They have worked hard to resolve this and in late 2022-early 2023 a new records system was adopted by the CAMHS service provider. The building up of accurate data going forward will be part of the new project post of a dedicated CLA CAMHS lead. Future annual reports will contain more specific detail on the numbers, interventions and more importantly outcomes for the CLA. So there will be no detailed CAMHS data in this year's annual report.
- The Proposed Youth Mental Health First Aid training for Personal Advisors and wider CLA health workforce. As highlighted before if approved and progressed in 2023-2024 will support the early intervention and prevention agenda for CLA and CEYP in the mental health arena.

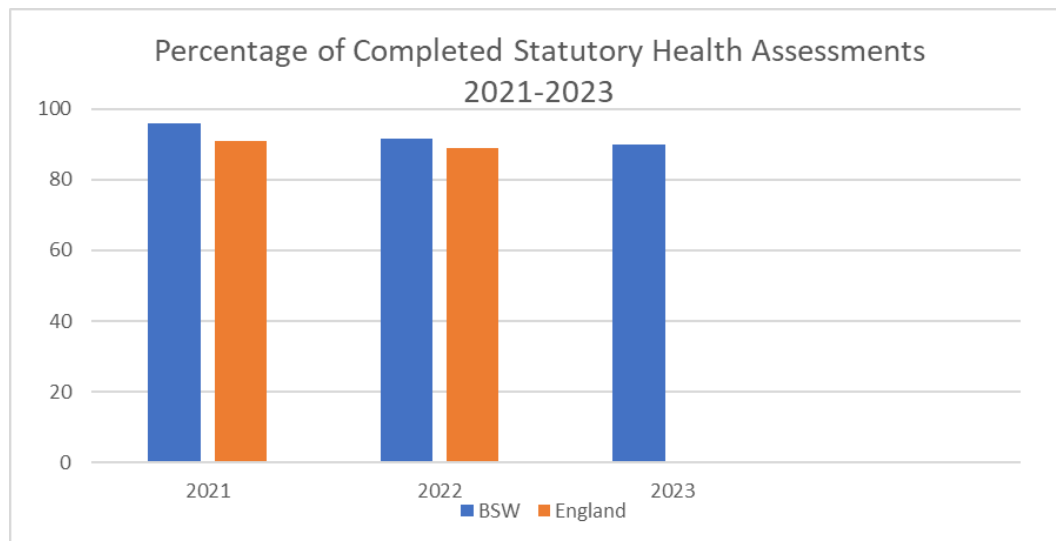
## 6. Children Looked After Data

Table 1.



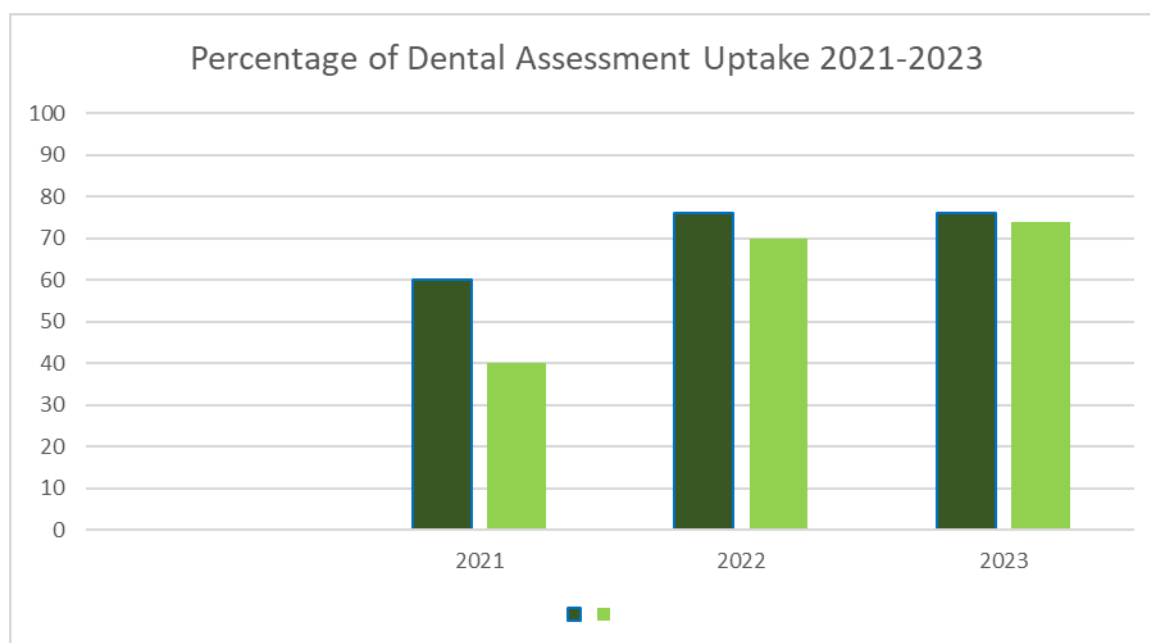
All three Local Authorities have seen an increase in the number of children looked after in the last 12 month (Table 1.). This increase has been significant in BaNES and Wiltshire, 19% and 8% increase respectively. The data shows that the increase in numbers correlates to the 13- 18year age group which aligns to the national picture over the last 3 years as being the highest number of children and young people in this cohort. This increase has put increased demands on the CLA health services commissioned by BSW ICB to deliver the statutory health assessments at times throughout the year. Although the number of completed health assessments remains above 90% (see Table 2) meeting statutory timeframes have in one locality been challenging. The large numbers of teenage young people in the care system also puts an increased demand on other services such as adolescent mental health services (CAMHS) and still reflects the national picture of young people still suffering from increased emotional health and mental health issues post the pandemic. This is recognised within the specific health services and are always considered in all aspects of interface with these young people.

Table 2



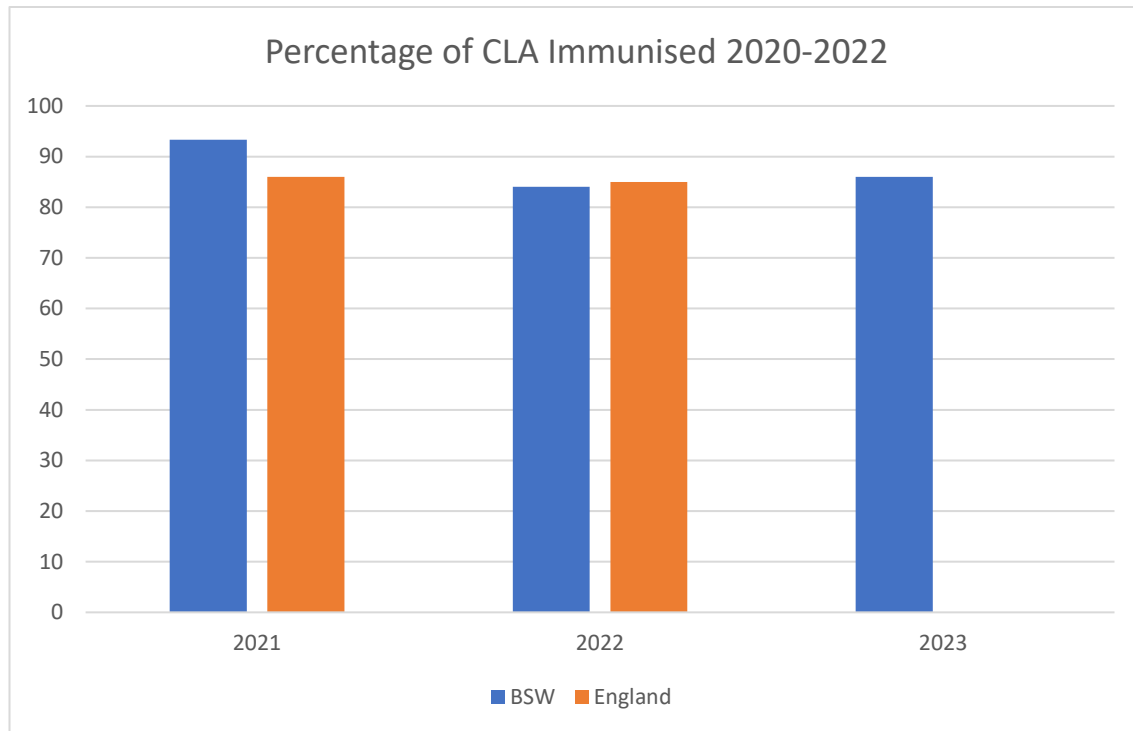
BSW continues to perform above the national average shown in Table 2. Although in 2022, the total number was down on previous years, the increase in numbers coming into care has increased and resulted in increased demand on the CLA health services. To remain at 90% across the system is testament to the CLA Health Teams working as effectively as possible within BSW ICB footprint. Delays in Statutory Health Assessments requested to be undertaken from other CLA health providers for those BSW ICB children and young people placed outside its boundary are also reflected in these figures. This is a nationally recognised problem which NHS England are looking to address in 2023-2024 and will have affected the total numbers that could have been completed.

Table 3 (BSW Dark Green / National Light Green)



BSW continues to perform above the national average (Table 3). We continue to see the impact on dental health services and the difficulties for CLA accessing dental services outstanding from the pandemic and lack of a national strategy to recruit and retain NHS dentists in the data. This has been raised by the Designated Nurses with NHS England who commission NHS Dentists and there are plans to have a dental access pathway for CLA for each ICB. Going forward the responsibility for commissioning dental services will transfer to BSW ICB and the Designates will continue to advocate on behalf of CLA and CEYP for access.

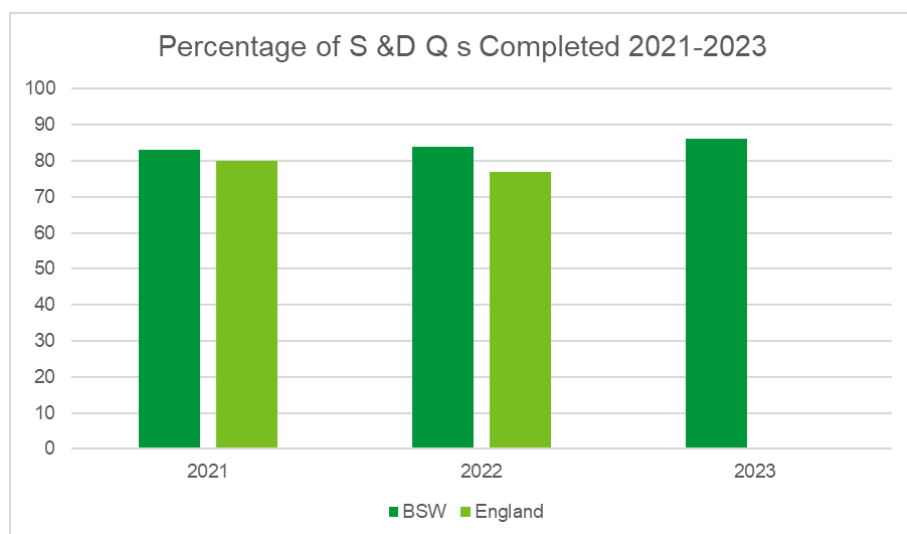
Table 4



BSW is performing above the national average set in 2022 but not yet able to be compared with national average as data for 2023 which is not release until October 2023, shown in Table 4. During this year the local immunisation provider, who had been impacted by the delivery of the service during and just past the pandemic for routine immunisations, refreshed their immunisation advice to Primary Care and Children Services about how CLA could catch up appropriate immunisations. It is hoped that this will improve steadily during 2023-24 once the refreshed advice is implemented.



Table 5



The position in relation to the Strength and Difficulties Questionnaire (SDQ) completed scoring across BSW ICB continues to improve year on year and has consistently performed better than the England comparison. Local Authorities are required to use the SDQ to assess the emotional wellbeing of individual CLA aged 4-16. Understanding the emotional and behavioural needs of CLA is important so that the relevant support can be put in place and children are given the opportunity to achieve their full potential. The SDQ is a brief behavioural screening questionnaire and is a nationally recognised tool, completed annually by carers or the young person managed through the LA's and informs the statutory health assessment as to their emotional health needs. The 2023 England data will be released in October 2023.

## 7. Issues and Risks

### 7.1 Risks

There is currently one CLA risk on BSW ICB Corporate Risk register. This is related to the lack of suitable placements for Children Looked After particularly for children with complex needs. These placements are Local Authority commissioned placements but this impacts on health hence the risk for BSW ICB. The current position often results in more children looked after placed beyond 20 miles from their homes. There is an increased use of unregulated placements. The available placements may not be able to address all the child's needs leading to risk of unmet needs or placement breakdown. It is acknowledged that this is not just a local issue but a national one and that all three LA actively endeavour to seek placements that meet the needs of these children at all times.

In addition, and influenced by placement sufficiency and suitability, children and young people are being admitted to acute hospitals following self-harm incidents and their care placements are then giving immediate notice. So, when the child is fit for discharge, there is no suitable care placement available, and the child remains in hospital, sometimes for weeks or even months

before a suitable care placement is found. This is a national issue but having a significant local impact.

ICB has an escalation process in place and the Chief Nurse and commissioners are kept aware of any cases where a child is fit for discharge, but no care placement is available. The ICB will facilitate a (LEAP) meeting and or Care, Education, Treatment Review (CETR) where appropriate. The three acute trusts in BSW ICB footprint have put in place escalation processes and will inform the ICB if they have a child looked after who is fit for discharge but cannot be discharged because of lack of a placement. We acknowledge that the hospital setting is not the correct place for a CLA fit for discharge and the impact on our acute providers paediatric wards with these children residing there.

## 7.2 Issues

Access to NHS Dentists- This continues to be raised by the Designated Nurses with NHS England who commission NHS Dentists. It remains a National problem getting NHS dentist for all children not just CLA and CEYP. A dental access pathway for CLA for each ICB has been developed to ensure that those children and young people requiring emergency dental treatment get immediate access but registering with an individual dentist remains problematic. From April 2023 Dental Commissioning is transferred to BSW ICB and the Designates will continue to lobby to address this situation going forward.

# 8. Safeguarding and CLA and CEYP

During the reporting period there were two child safeguarding practice reviews (CSPR) involving CLA or CEYP. The Designated Professionals had oversight and supported all the learning from the cases including cascading to Primary Care, wider safeguarding and CLA health networks.

## 8.1 The long term sexual abuse of children in care by their foster carer

This case is about the long-term sexual abuse of three siblings in foster care. The abuse was perpetrated by the male foster parent. Recommendations include: ensure professionals are thinking and talking about the risk of sexual abuse of children in care; learning from the review is shared with the local corporate parenting panel; training foster carers about intra-familial sexual abuse; and assurance of the local plan to include direct information from respite carers in child in care reviews.

The full report and learning can be accessed from the link below.

[Child safeguarding practice review: the long-term sexual abuse of children in care.](#)

(2022) <sup>9</sup>

Within BSW ICB the Designated Professionals reviewed the actions for health and to inform the Foster Panels of the learning from the case a presentation was developed and shared. Appendix 2

## **CSPR Involving Baby M and parent who is a CEYP (published 7<sup>th</sup> July 2023)**

This case analysed a ten-month timeframe from July 2021 (Baby M's 7-week booking in appointment with midwifery services) until May 2022 (presentation at hospital). This covers a 7-month period pre-birth and 3 months following birth. There has been a critical eye on what historical contextual factors were known by agencies about Baby M's parents prior to this time period and what attention they were given. The aim being to better understand how decisions were reached and why certain actions were or were not taken. Some of the contextual factors that were considered in the report was that of a parent who was a CEYP.

Review of the published report on the case will take place during 2023-2024 and an appropriate action plan will be developed and progressed during this period.

<http://sites.southglos.gov.uk/safeguarding/wp-content/uploads/sites/221/2015/05/LCSPR-Baby-M-Final-Report-April-2023.pdf> <sup>10</sup>

## **9. Audits, Inspections, Consultations and National Reviews**

### **9.1 Audits**

This reporting year saw three audits undertaken by the Designated Professionals. Two of the audits involved with agreement of the commissioned provider of the CLA health services, the quality and timeliness of the statutory Initial Health Assessment and Review Health Assessments. The findings have been collated and will be shared in the 2023-2024 report.

In addition, a specific audit to ensure that notification of newly registered or re-registered foster carers in the BANES locality to the individuals GP in Primary care was undertaken. This was following on from a year's implementation of the process and to give both the BaNES LA and the ICB assurance that communication and actions were being followed. The full report with findings and action plan will be available in the reporting period of 2023-24.

### **9.2 Inspections**

During this reporting period there have been no specific CLA inspections that the Designates have been directly involved with across all 3 Local Authorities. This doesn't mean that they have not been involved with a number of inspection preparations across BSW such as JTAI and SEND preparations across all three LA areas. They continue to take an active part in supporting LA partners in ensuring CLA and CEYP health is considered in all aspects.

### **9.3 Consultations**

During 2022 there were three national reviews into children's social care

Published:

- The Independent Review of Children's Social Care
- The Child Safeguarding Practice Review Panel's Review into the deaths of Arthur Labinjo-Hughes and Star Hobson
- The Competition and Market Authority review of the placements market

In February, the Government published its response to the three National reviews “Stable Homes, Built on Love” with a consultation.

[Children's social care: stable homes, built on love - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/consultations/childrens-social-care-stable-homes-built-on-love)

The Designated professionals have submitted responses to the consultation on behalf of the BSW ICB alongside their Safeguarding Designated Professionals.

The presentation summarising the document is included in the PowerPoint that can be found in Appendix 3

## 9.4 National Practice Reviews

These National reviews were scrutinised by the Designated Professionals for CLA and learning identified locally

Leiland-James Corkill- Child Safeguarding Practice Review

[Cumbria LCSPR Report - Leiland-James Michael Corkill](#)

Back Ground:

- Leiland -James was placed with prospective adopters at 7 months old. He had been taken into care at birth.
- He had been living with the couple for five months when he died. The female prospective adopter has been found guilty of his murder and child cruelty.
- History of Female Adopter having low mood, anxiety, counselling and significant alcohol consumption
- The criminal investigation identified that the female prospective adopter was receiving talking therapy at the time of the adoption assessment. This was not shared by the GP in the adoption medical report only the anxiety and low mood
- The female adopter was receiving private counselling and they did not know of the adoption application

Areas Identified within the report that impacts on health.

- Adopters Medicals:
  - Undertaken by GPs in Primary Care needed to be more detail as omissions about mental health and alcohol were possible factors in this case. Highlighted-Poor understanding by GP as to the significance of these adult medicals and the individuals health on a child being placed with them.
  - Medical Advisors questioning of some of the content of the medical report when the individuals were challenged was able to influence the understanding by the SW as “normal behaviour”. Highlighted- Lack of understanding and Knowledge of significance of alcohol intake and SW being persuaded by couple to be seen as “normal and acceptable behaviour”.

Recommendations for Health

- The medical assessments of potential adopters require thorough consideration. They should include detailed information from the individuals medical records and include information from specialists and providers of mental health support the individual is receiving or has received.
- Often there is a delay between the medical assessment in the process for becoming an adopter and having a child placed. System would be more robust if these assessments were updated at the point of matching and before an adoption order is made to recognise any changes.

Issues to be considered by BSW ICB

- What training do GPs get before completing Adult Health forms?
- Do we rely too much on self- reporting and a lack of rigorous professional curiosity?
- How do we capture new medical issues for adopters that may occur between assessment and matching?
- Did the fact that the couple already had a child for whom there were no concerns give a false reassurance?
- How do GP practices know that a child has been placed for adoption and how to they record this?
- Ensuring that the health visitor is informed as soon as possible that a match is agreed and involving in the placement planning/matching meetings.

As a result of this case an action plan has been developed in the ICB to address these issues and is being progressed by the Designated Professionals in partnership with LA colleagues and Adoption agencies across BSW ICB footprint. PowerPoint summary presentation available as Appendix 4.

## 10. Key Achievements, Progress and Delays from the 2022-2023 workplan

There are currently 44 working sections in the workplan within the six themes areas of the strategy.

Table 6.

Red/Amber/Green (RAG) rated against the plan (March 2023)

Key Achievements	In Progress	Delays
6	31	7

Key Achievements against the Workplan:

- The Designates now review all BSW ICB contracts for their response to the CLA component of the Safeguarding and CLA schedules
- Embed the CLA training strategy and deliver training across the ICB and partners on CLA

- The Designated Health professionals are attending the correct forums, within BSW ICB, Regionally and Nationally-Making sure they are sitting at the “right table” to influence and advise
- Continue the Strategic CLA and CE Health Group and strengthen it. As this is group is embedded within BSW ICB partner colleagues from the LA are now members.
- Monthly meetings with the Chief Nurse to make she is fully aware of the issues, progress and successes around CLA and CE YP agenda
- Continued scanning the CLA and CE agenda for legislative and statutory changes and consultations that will impact this group and inform the BSWICB of the impact and requirements for them to adhere to or implement.

Delays in progress against Workplan:

### *Communication*

- Development of a child friendly version of the BSW ICB annual report, designed in collaboration with CLA and CEYP. Including feedback from young people and how it can be distributed to CLA and young people- Ongoing discussions taking place with BSW ICB communication Team to support this.
- Develop strong links with ICB comms team and ensure CLA and CE young people are integral within the ICB communication strategy- Ongoing discussions taking place with BSW ICB communication Team to support this.

### *Mental Health*

- Support the pilot funded project work from the NHSE for specific work to support CLA
- Support obtaining a specific link person within the provider service for CAMHS for Designated Professionals and Children’s commissioners’ access to support complex CLA both within BSW ICB and Outside
- Get agreement for the current CAHMS provider to Implement the NICE guidance 205 with specific emphasis on PTSD service for UASC
- Seek to get and agree equity of access and services provision across the BSW ICB footprint for a CAMHS service for CLA

### *Partnership*

- Be involved with the JSNA and its development to ensure the health of CLA and CEYP are included in the documents.

## 11. Workforce

In the autumn of 2022 as a result of a successful business case in BSW ICB and in recognition of the requirements to ensure compliance with regulatory expectations, a Specialist Nurse for CLA and CEYP was advertised. We were delighted to be able to recruit to the post and joined the Designated CLA Team in December 2022. The new team member brought with them a wealth of

experience working with children and young people in universal health services as well as having recent experience of working in a provider CLA operational health team. This role is considered to be a development role to enable the individual to gain experience and knowledge of working in a strategic capacity part of succession planning with their operational experience to underpin this.

In the later part of the reporting period the Designated Nurse for the Wiltshire and BaNES locality shared her intention to retire in Sept 2023. Preparation for retirement of the Designated Nurse and the recruitment following the BSWICB policy and processes will commence in the first quarter of 2023-24.

All other Designated Doctor and Designated Nurse roles are at full complement as of the end of the reporting year 2022-23 as per statutory requirement.

## 12. Looking to the Future

### 12.1 National Changes

- Outcome from the “*Stable Homes, Built on Love*” consultation and implications for BSW ICB
- Awaiting the new *Promoting the Health and Wellbeing of Looked After Children* Government document. Last written in 2015 and amended in 2022 to reflect ICB rather than CCG due Winter 2023.
- Still awaiting Implications for 16-17 years old CLA with the introduction of Liberty Protect Safeguards (LPS) which has been paused by the Government

### 12.2 Local Changes

- Continue to progress the CLA and CEYP workplan against the strategy.
- Fully participate in the recommissioning of Specialist Children Services for 2025-2030 in relation to CLA Health team and CLA and CEYP referenced within other specialist services.
- Recruitment of a New Designated Nurse for CLA and CEYP for BSWICB
- Investment and implementation in SALT Project, Free Prescriptions for CEYP and Youth Mental Health First Aid programme
- CAMHS progress in relation to NICE guidance compliance-Identified CAMHS professional for Designated to link with in CAMHS Provider, the NHSE Project work and UASC PTSD

## 13. Summary

The Workplan for 2022-2024 remains challenging, although we have had some successes, there remains a considerable amount of work to do. It is imperative that the voice of CLA and CE YP

continue to be front and centre into everything we do. If, in partnership with our LA colleagues, health providers and the 3<sup>rd</sup> Sector we work together we can help to reduce the health inequalities experienced by this group of children and young people.

There are a few areas that will require further focus on in the forthcoming year: improved access to dentists, improved access to emotional health and wellbeing as well as mental health support. These will be key areas within the workplan and for the strategic CLA and CEYP group to progress. The implementation of the Care Leavers Covenant will also require a BSW ICB focus to be a truly signed up member and improve outcomes for CEYP going forward.

As part of the new BSW ICB and as it moves forward with its transformation program, CLA and CEYP must be central to any developments as a specific cohort of children and young people across all areas. The Designated Professionals have continued to raise and will carry on doing so at every opportunity for the inclusion of the group to ensure health outcomes are improved for all to impact on their future life chances.

The Designated Professionals continue to be committed to achieve this for the children and young people on behalf of the BSW ICB and our Partners.



# 14. Appendices

## Appendix 1



Oxford Health  
CAMHS submission ir

## Appendix 2



Training for foster  
Panel Wiltshire CSPR

## Appendix 3



Implications%20of%  
20Stable%20Homes%

## Appendix 4



LJ CSPR.pptx

# 15. References

1. [Care Leaver Covenant](#)
2. The Children Act 2004 [Children Act 2004 \(legislation.gov.uk\)](#)
3. *Promoting the Health and Wellbeing of Looked After Children* [Promoting the health and well-being of looked-after children - update note added to start in August 2022 \(publishing.service.gov.uk\)](#)
4. Health and Social Care Act 2012 [Health and Social Care Act 2012 \(legislation.gov.uk\)](#)
5. Children and Social Work Act 2017 [Children and Social Work Act 2017 \(legislation.gov.uk\)](#)
6. Accountability and Assurance Framework (NHSE, 2022) [B0818 Safeguarding-children-young-people-and-adults-at-risk-in-the-NHS-Safeguarding-accountability-and-assuran.pdf \(england.nhs.uk\)](#)
7. Youth Mental Health First Aid programme ( [YMHFA is an internationally recognised programme](#))
8. <http://www.nuffieldfoundation.org/project/looked-after-children-grown-up>
9. [Child safeguarding practice review: the long-term sexual abuse of children in care.](#)

10. Child safeguarding Practice Review: <http://sites.southglos.gov.uk/safeguarding/wp-content/uploads/sites/221/2015/05/LCSPR-Baby-M-Final-Report-April-2023.pdf>
11. <https://www.gov.uk/government/consultations/childrens-social-care-stable-homes-built-on-love>
12. [B0818\\_Safeguarding-children-young-people-and-adults-at-risk-in-the-NHS-Safeguarding-accountability-and-assuran.pdf \(england.nhs.uk\)](#)
13. [Cumbria LCSPR Report - Leiland-James Michael Corkill](#)