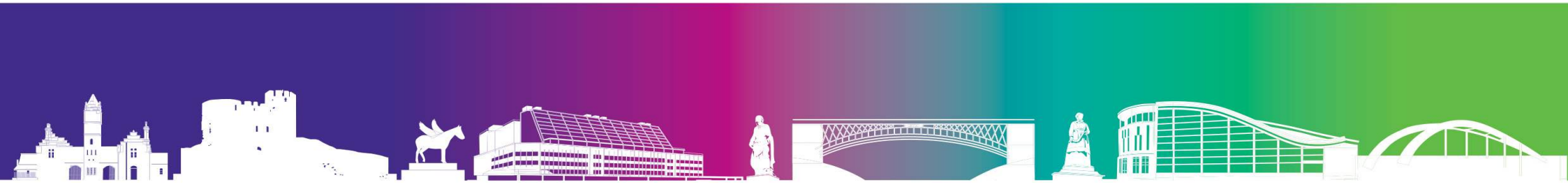


# Children in Care Annual Report- Corporate Parenting Board



Sharon George- Designated Nurse for Children in Care- Dudley  
Corporate Parenting Board - 18/04/24



Dudley | Sandwell | Walsall | West Birmingham | Wolverhampton

[www.blackcountryandwestbirmccg.nhs.uk](http://www.blackcountryandwestbirmccg.nhs.uk)

# Core Health Activities

The core health activities that require commissioning for CIC relating to statutory duties are:

- **Initial Health Assessments (IHA)** - The initial health assessment should take place in time to inform the child's first CIC review within 20 working days of entering care.
- **Review Health Assessments (RHA)** - The review of the child's health plan must take place once every six months before a child's fifth birthday and once every 12 months after the child's fifth birthday.
- **Care Leaver Summaries- Dudley Care Leavers Passports** - Care leavers should be equipped to manage their own health needs wherever possible. They should have a summary of all health records (including genetic background and details of illness and treatments)



## Service Model

- Review health assessments (0-5 years) are provided by Black Country Healthcare NHS Foundation Trust (BCHFT).
- Review health assessments (5-18 years) have been provided Shropshire Foundation Trust until April 2021 when the service was transferred to Dudley Integrated Health and Care NHS (DIHC).
- Children placed out of area, within 40 mile of child's originating address are provided by BCHFT, commissioned in December 2016 by Dudley CCG.
- Leaving Care Passports (Care Leavers Summaries) are completed by the Named and Specialist Nurses within BCHFT
- Initial HA'S are provided by BCHFT and Dudley Group NHS Foundation Trust (DGFT)



# Service Model

Professional Role	Current Establishment	Intercollegiate Establishment
Designated Doctor Looked after (NB title used in National Paperwork)	Appointed November 2019	0.2 whole time equivalent (WTE) per 400 Child in care (CIC) (excluding operational activity)=0.36 Whole Time Equivalent (WTE)
Designated Nurse Looked After Children	1 WTE	1WTE per 70,000 (72,875 in Dudley)
Administration (ICB)	1 WTE (shared by 4 Nurses)	0.5 WTE
Named Doctor Looked After Children	Community Medical Officer (CMO) provides 2 PA x32 for Initial Health Assessments (IHA)	1 PA per 400 CIC =1.81 PA's per IHA
Named Nurse Looked After Children	0.8 WTE	Minimum of 1 WTE for each provider
Specialist Nurse	1.8 WTE	1 WTE per 100 CIC
Administration (Provider/s)	1 WTE (commissioned)	Minimum 0.5 WTE



# Governance arrangements

## Health of Children in Care Strategic Group (Place)

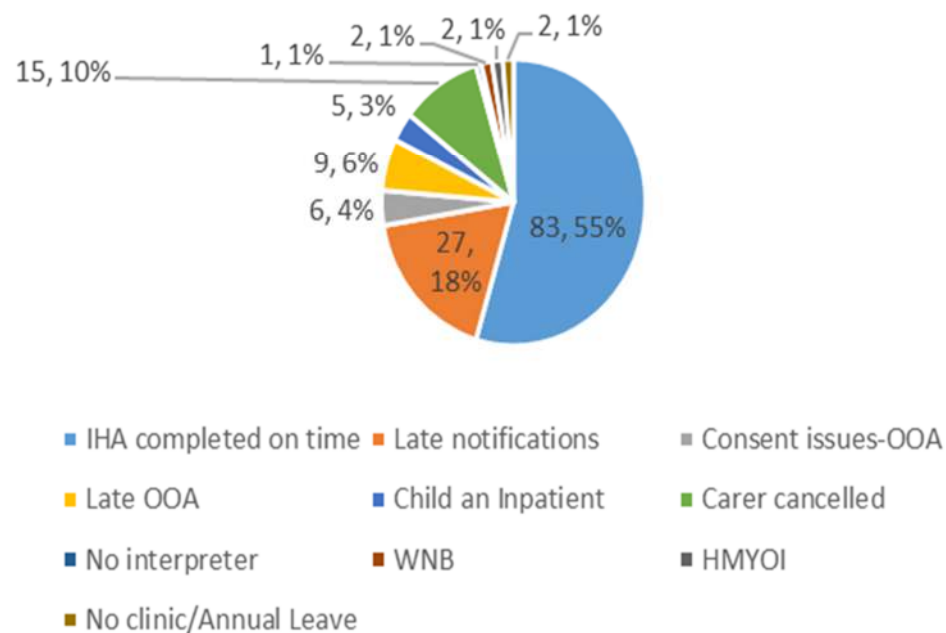
- The purpose of this group is to monitor and improve the delivery of health outcomes for Children in Care. To ensure Dudley Council, BCICB and Dudley Health Providers are meeting statutory duties under the ‘Promoting the Health and Well-being of Looked-after Children’ statutory guidance (2015). This meeting takes place on a quarterly basis and is responsible for the implementation of the “Health of Children in Care Action Plan”.

## Children in Care Workstream (system)

- The purpose of this group across the Black Country Integrated Care Board (formally Clinical Commissioning Group) is reduce unwarranted variation relating to Children in Care ensuring a consistent approach and that safeguarding standards are integrated into all commissioning processes and service specifications. The group will also share appropriately information about CIC/ young people and examples of good practice will be shared. This Group reports to the Safeguarding Steering Group and Quality and Safety within BCICB



IHA's data 2022-23

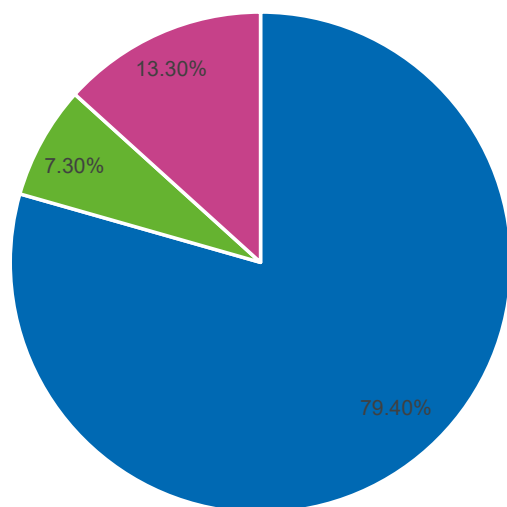


155 IHA's completed for 2022-2023. The overall percentage of IHA's completed on time is **55% (41.3% last year)**. Please note that this is the percentage of children seen within 20 working days from being in care. All children are offered a date to be seen at the earliest available appointment, which can be day 21,22 etc. The percentage of late Notifications **27% (46.8%last year)** from the Local Authority was the main reason for IHA's not being completed in a timely way. (LA) and work continues in the LA to improve the timeliness of Notifications. Only two (**1%**) IHA were completed late due to Dr/ clinic availability. The number of IHA's cancelled by carers is **10%** this is a rise from last year when cancelled by carer did not feature and only 1% of the children and young people were not brought. This has been shared with Head of Service in the LA



## Review Health Assessments completed within timescales

RHA's data 2022-2023

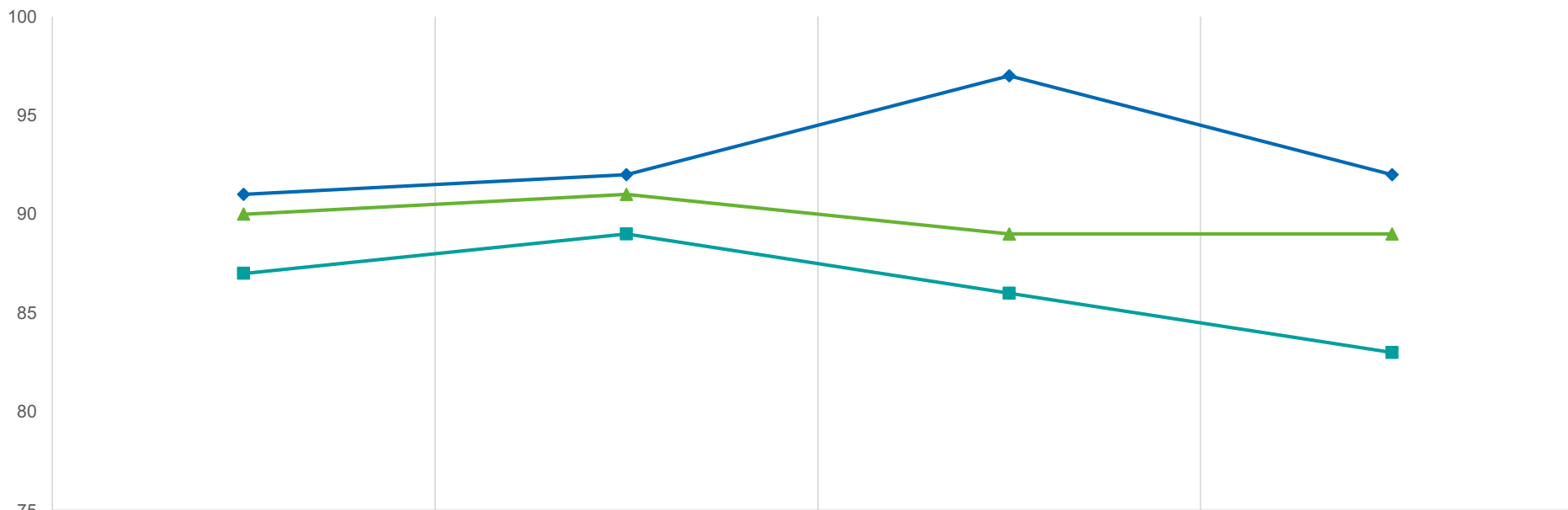


■ Completed on time
 ■ Health Exception
 ■ Staff capacity

4.2.2 The percentage of RHA's completed on time is **79.4%** (74.2% last year). The majority of the RHA's are completed by the Children in Care team in Black Country Health Care. 261 of the 626 total number of RHA's. This is a small team of 3 staff members (2.6 whole time equivalents). There have been some issues with capacity due to vacant posts and some staff sickness which had an impact of the timeliness for some of the RHA's. At the End of March 2023, the percentage of Children in Care who had an up-to-date health plan was **86.5% (91.8 % December 23)** Exceptions include: - cancelled by the carer, Covid, Late information from LA (part A), child missing, refusal and child was not brought. Health staff sickness equates to 6.4% RHA not completed within timescales. There are a number of RHA's where the reason for late completion is not given.

**PERCENTAGE OF CHILDREN WITH UP TO DATE HEALTH ASSESSMENTS**

—◆— Dudley —■— West Midlands —▲— Engalnd

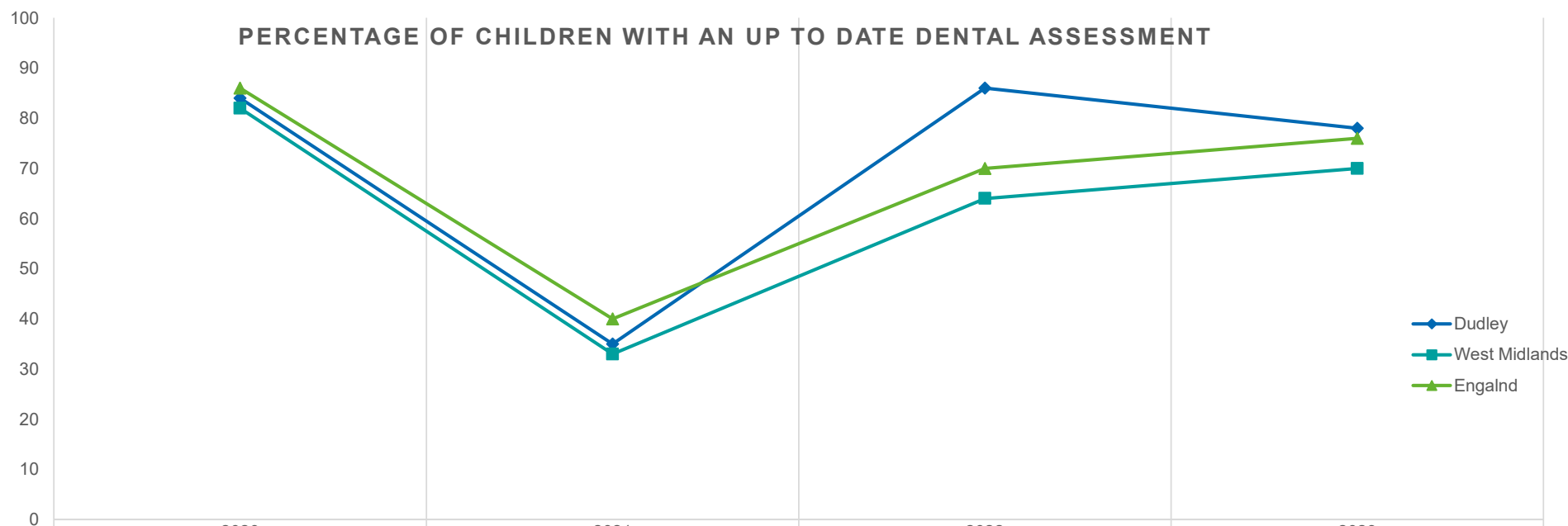


	2020	2021	2022	2023
◆ Dudley	91	92	97	92
■ West Midlands	87	89	86	83
▲ Engalnd	90	91	89	89





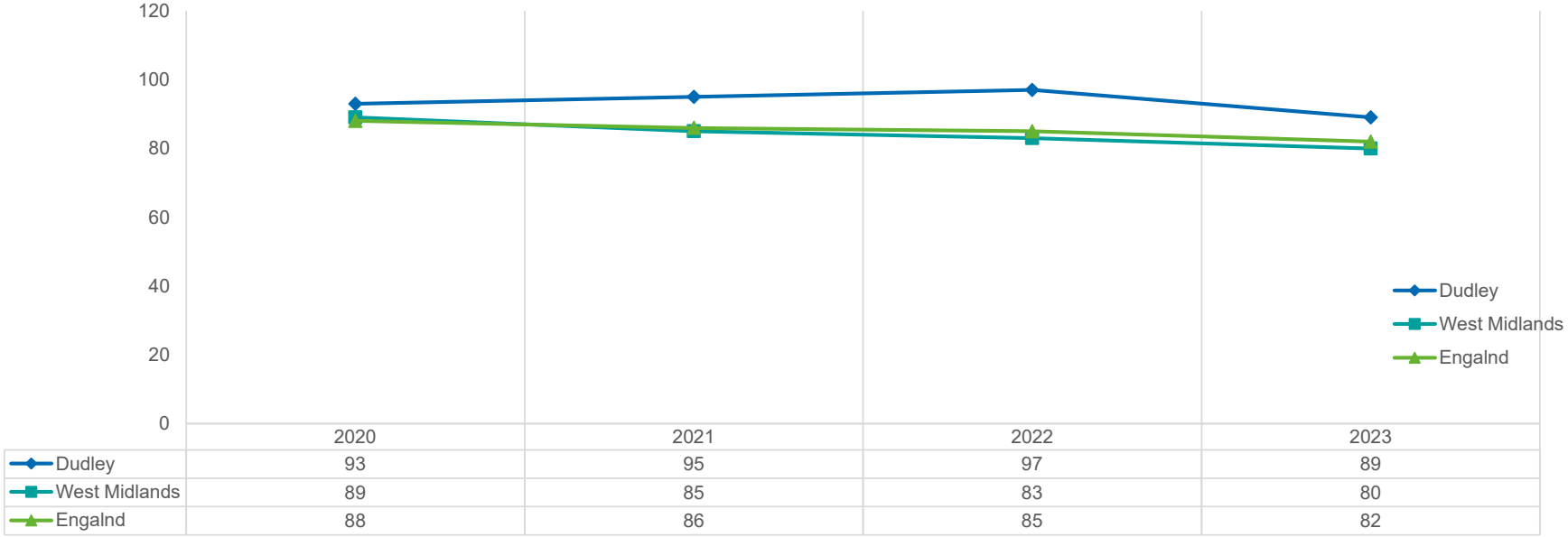
PERCENTAGE OF CHILDREN WITH AN UP TO DATE DENTAL ASSESSMENT



	2020	2021	2022	2023
◆ Dudley	84	35	86	78
■ West Midlands	82	33	64	70
▲ England	86	40	70	76



**PERCENTAGE OF CHILDREN WITH UP TO DATE IMMUNISATIONS**



## Special Educational Needs and Disability (SEND)

- Statutory guidance (2015) states that the health assessment should be integrated with any other assessments and plans such as the child's Core Assessment or an Education, Health and Care Plan (EHCP's) where the child has special educational needs. The SEND team, CIC health team, Designated Nurse, and Virtual school are now sharing relevant information regarding health assessments and EHCP's. The plan is to map out processes for CIC with EHCP's to ensure that there is a consistent approach to ensure the needs of the child are met and all agencies are aware of their responsibilities.



## Key Priorities for 2023-2024

1. To continue to work with colleagues in special educational needs and disability (SEND) to establish pathways that ensure that relevant information is shared to inform the Education Health and Care Plan (EHCP).
2. Continue to work with Designated Colleagues across BCICB to reduce unwarranted variation with commissioned services for Children in care.
3. Continue to work in partnership with the local authority and other providers to improve the health outcomes for children in care.
4. Development of Health Passport in consultation with all professionals including foster carers and children, young people and care leavers.
5. Work with Children in Care Council to ensure that the views of looked after children are considered to inform, influence and shape service provision.
6. Develop the care leavers App with young people and other professionals.
7. Implement Dental Pathway for all children in care in Dudley.

