



NHS West Yorkshire  
Integrated Care Board

Bradford District and Craven  
Health and Care Partnership



# Children Looked After and Care Leavers Annual Report

## April 2021-March 2022



Michelle Turner, Strategic Director of Quality and Nursing,  
Dr Catherine Murray, Designated Doctor Children In Care  
Jude MacDonald, Designated Nurse Safeguarding Children

# The Context of the Report

- The 2<sup>nd</sup> annual Children Looked After (CLA) and Care Leavers Annual Report provided by West Yorkshire Integrated Care Board (WYICB) - the successor organisation to Bradford District and Craven Clinical Commissioning Group.
- Written in response to the statutory guidance *'Promoting the health and well-being of looked-after children'* (2015).
- The purpose of the Annual Report is to form part of WY ICB assurance arrangements, in relation to Children Looked After and wider Safeguarding Children arrangements.
- Covers period from 1<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022
- Has been developed through regular engagement with key partners and stakeholders in the Bradford District and Craven Health and Care Partnership.

# Key Aims



- To provide the WY ICB and the Bradford District and Craven Health and Care Partnership with an overview of the work undertaken by the Children Looked-After (CLA) Health Team in the last year.
- To share report with the new Bradford District and Craven Health and Care system programme for Children and Young People (CYP) and the Corporate Parenting Panel (CPP).
- To demonstrate that the Bradford District and Craven Health and Care Partnership has discharged their statutory and legislative responsibilities for Children Looked After & Care Leavers.

# A Child Looked After

## Children Act 1989

A Child is looked after by a local authority if he/she:

- Is provided with accommodation, for a continuous period of more than 24 hours
- Is subject to a care order or
- Is subject to a placement order.

A child ceases being “Looked After” when they are:

- Adopted
- Return home
- Reach the age of 18 years.

# Care Leavers

- Care leavers are those children who have been previously Looked After and are now being supported to live independently, with an age range of 18 to 25 years.
- Social care responsibilities for Care Leavers over the age of 21 changed under the **Children and Social Work Act (2017)**:
- Care leavers can request support up to the age of 25, regardless of whether or not they are in education



# Legislation

## The Local Authority (LA)

The **Children and Social Work Act 2017** introduces corporate parenting principles

- set out local authorities' responsibilities for looked after children
- The LA has a duty to promote the welfare of Looked After Children
- includes promoting the child's physical, emotional and mental health.

## WY ICB and NHS England

- have a duty to cooperate with requests from the LA to undertake statutory health assessments
- and provide support services to Looked After Children without any undue delay
- irrespective of whether placement of the child is emergency, short term or in another area outside of Bradford District and Craven.

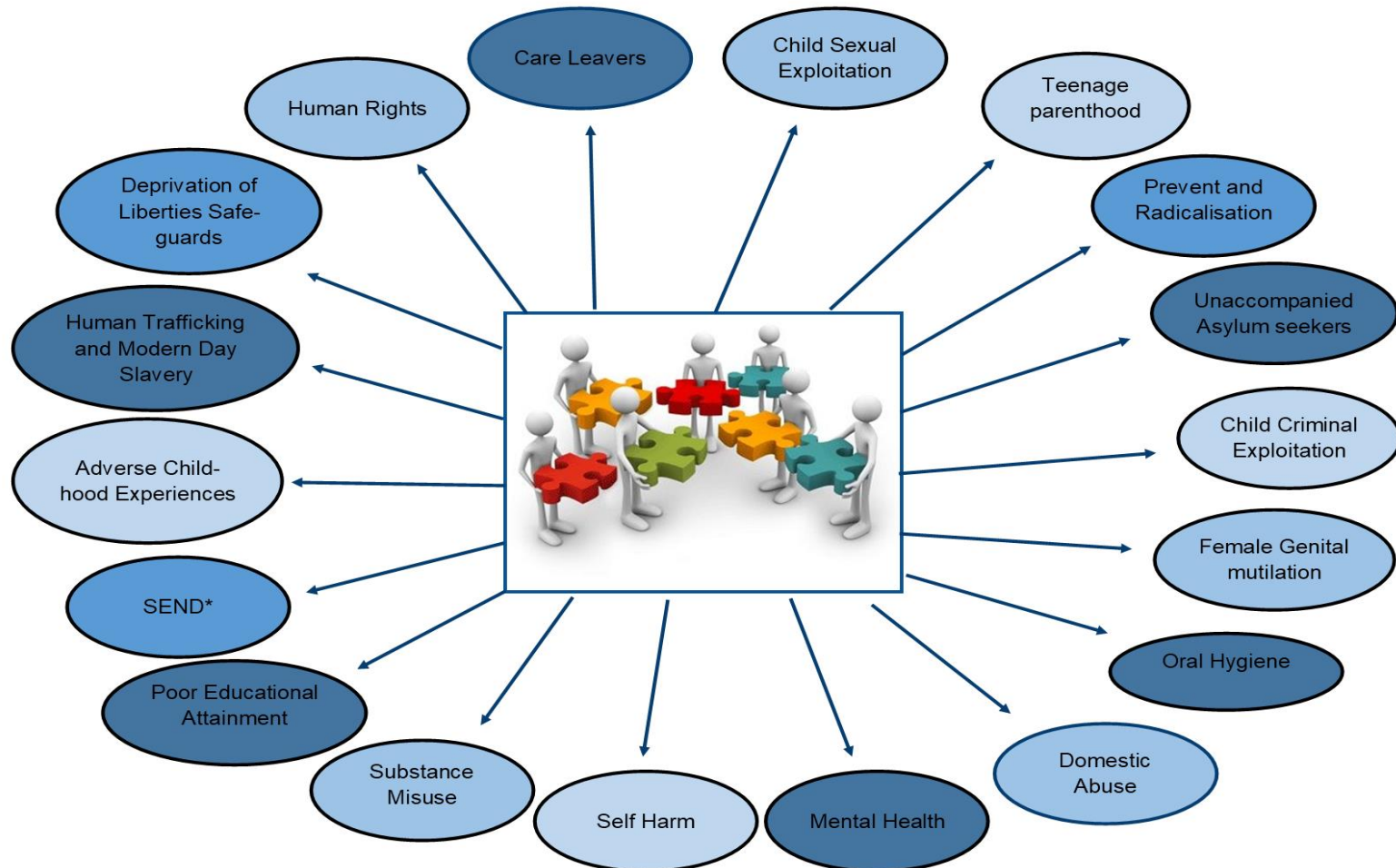
# Why Their Health is So Important



They often experience:

- unmet health needs such as missed immunisations, neglected dental care and missed health appointments.
- a higher incidence of learning and developmental problems
  - 3-4 times more likely to have Special Educational Needs by 16 years of age than all children
- emotional, behavioural and mental health problems
  - higher rates of mental health disorders – 45% rising to 72% for those in residential care, compared with 10% of the general population aged 5-15 years.
- Most have experienced a high numbers of Adverse Childhood Experiences (ACEs) and the subsequent health impact is significant.

# Scope of CLA – Multiple Agendas



\*SEND – Special Educational Needs and Disabilities

# WY ICB Responsibilities

There is a clear line of accountability for safeguarding, reflected in the Bradford District and Craven Health and Care Partnership governance arrangements. (i.e. a named Place based Director lead to take overall leadership responsibility, who employs or secures the expertise of Designated Professionals (Des) to provide health leadership and expertise across local area).

**Place Based Director of Quality and Nursing**  
**WY ICB Director of Nursing**

## Children's Team

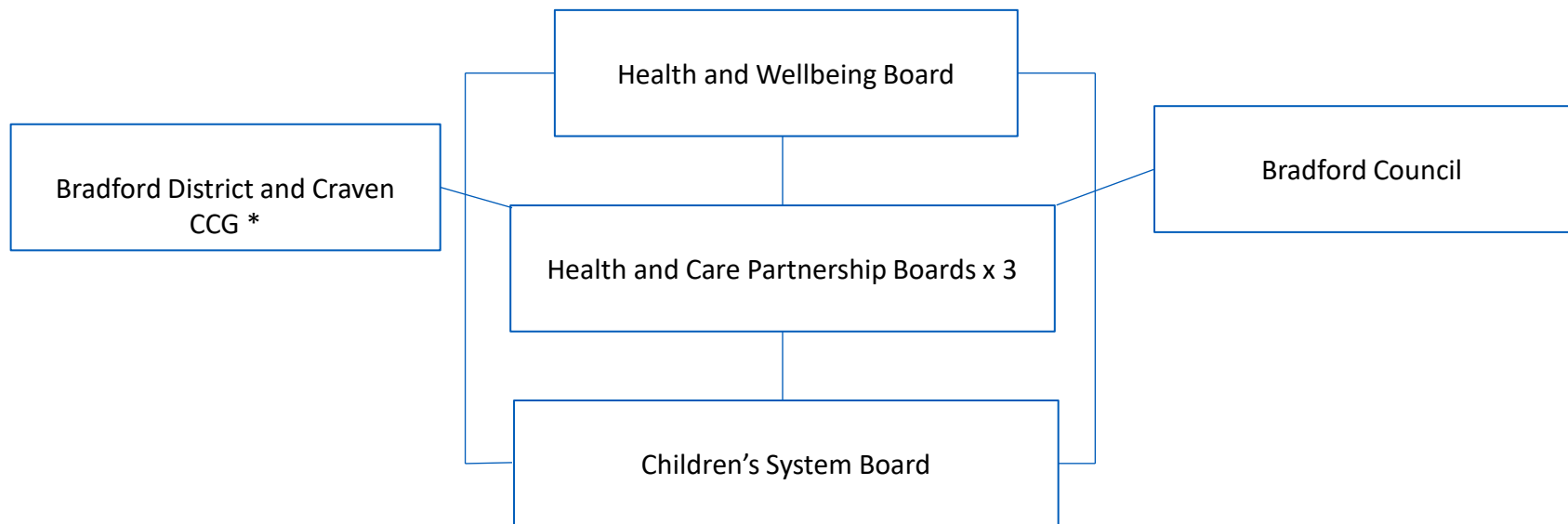
- Des Nurse Safeguarding and Children Looked After
- Deputy Des Nurses: Safeguarding Children
- Specialist Health Practitioner: Safeguarding Children and Domestic Abuse
- Named GP Safeguarding Children
- Des Doctor Safeguarding
- Des Doctor CLA

## Adult's Team

- Des Nurse Safeguarding Adults
- Deputy Des Nurse: Safeguarding Adults
- Mental Capacity Act/Liberty Protection Safeguards Lead
- Specialist Health Practitioner: Safeguarding Adults
- Named GP Safeguarding Adults



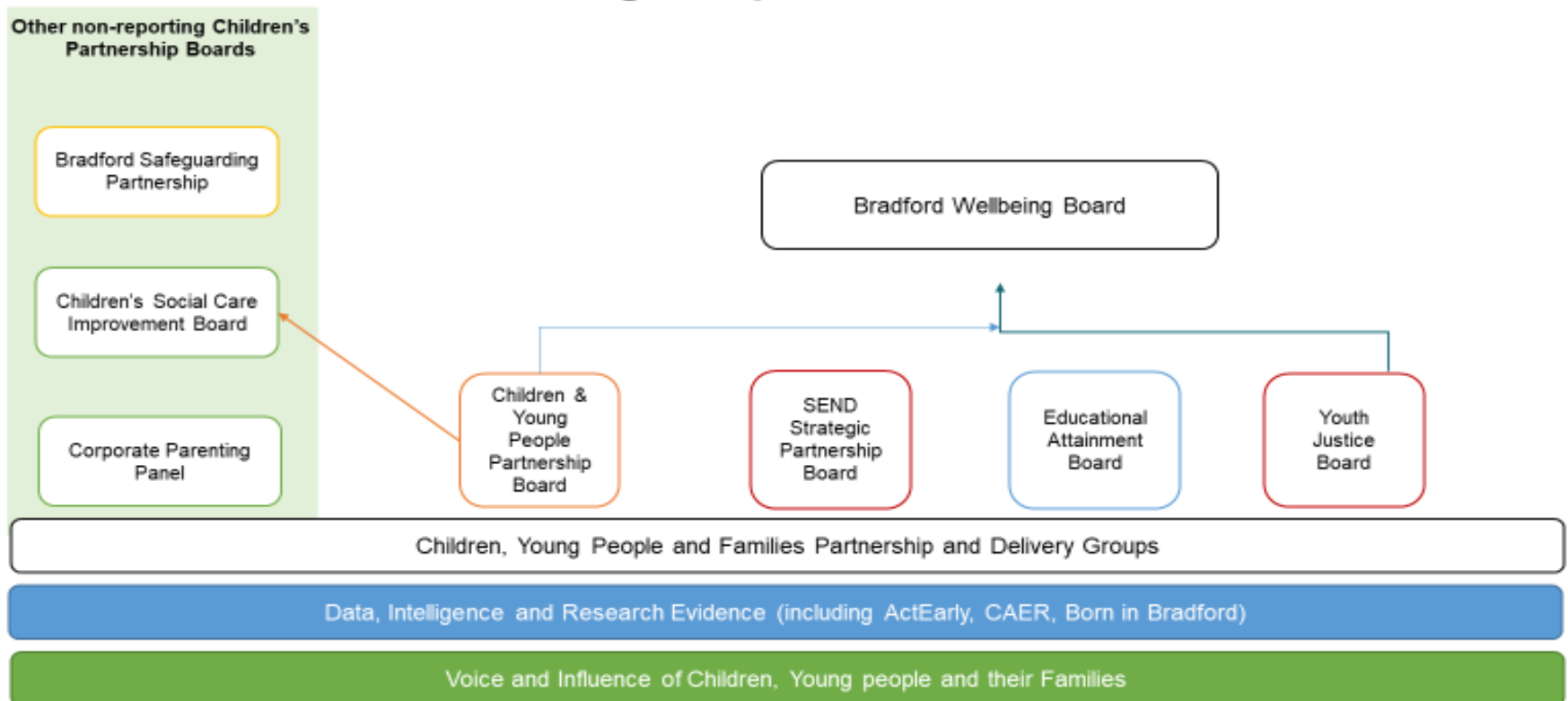
## Children and Young People's District Governance 21/22



\*West Yorkshire Integrated Care Board (WYICB) - the successor organisation to Bradford District and Craven Clinical Commissioning Group.

# Local Authority Responsibilities and Governance Interface with Health Team

## Children and Young People District Governance 21/22



# Statistical Neighbours: CLA

Published figures for the period 2020-21 and as at 31/03/21

Numbers are children looked after per 10,000

Bradford District and Craven  
Health and Care Partnership



Statistical Neighbours		2017	2018	2019	2020	2021
	Kirklees	70.00	67.00	62.00	66.00	66.00
	Peterborough	73.00	74.00	73.00	71.00	67.00
	Oldham	83.00	93.00	86.00	88.00	89.00
	Dudley	99.00	96.00	95.00	90.00	89.00
	Bolton	87.00	91.00	95.00	92.00	90.00
	<b>Bradford</b>	<b>66.00</b>	<b>70.00</b>	<b>82.00</b>	<b>87.00</b>	<b>95.00</b>
	Blackburn with Darwen	96.00	97.00	104.00	106.00	97.00
	Walsall	97.00	95.00	90.00	97.00	97.00
	Telford and Wrekin	96.00	92.00	96.00	98.00	102.00
	Rochdale	89.00	95.00	108.00	100.00	104.00
	Derby	76.00	82.00	94.00	98.00	108.00

# The Local Figures: CLA

Published figures for the period 2020-21 and as at 31/03/21

Numbers are children looked after per 10,000

Local Authority, Region and England	2017	2018	2019	2020	2021
Bradford	66.00	70.00	82.00	87.00	95.00
Yorkshire and The Humber	67.00	71.00	74.00	77.00	78.00
Statistical Neighbours	86.60	88.20	90.30	90.60	90.90
England	62.00	64.00	65.00	67.00	67.00

- Current no. of CLA in Bradford (March 2022) was 1447
- Many have additional needs, have experienced abuse and neglect and therefore enter care with multiple and complex health and care needs.

# The Local Context, Bradford

- 7th largest local authority in England in terms of population size, after Birmingham, Leeds, Sheffield, Cornwall, Manchester and Buckinghamshire.
- In June 2020, the Office for National Statistics published latest population estimates for 2019.
- Bradford had a total estimated population of 539,776, an increase of 2,576 people since 2018. The population is expected to grow to around 550,100 by mid-2028.
- A young population, with the fourth highest proportion of under 16 - year - olds in England (over 160,000 children)

# The Local Context, Bradford

- Approx. 56.7 % of school children are from ethnic minority groups (national 31%).
- 3 main ethnic groups in the local authority are
  - White English & British 40.6%
  - Other Pakistani 19.6% and
  - Mirpuri Pakistani 11.4%
- Health and well-being of children generally worse compared with the England average
  - obesity, teenage pregnancy and accidental injury.
  - 11.4% of children have a rare disorder compared with national average of 4.3%
- Infant mortality rates significantly higher
- Craven in N. Yorkshire LA– slightly different demographics, with more ageing population, still many children in poverty

# Who Provides the Medical Care for CLA?

## Children Looked After Team

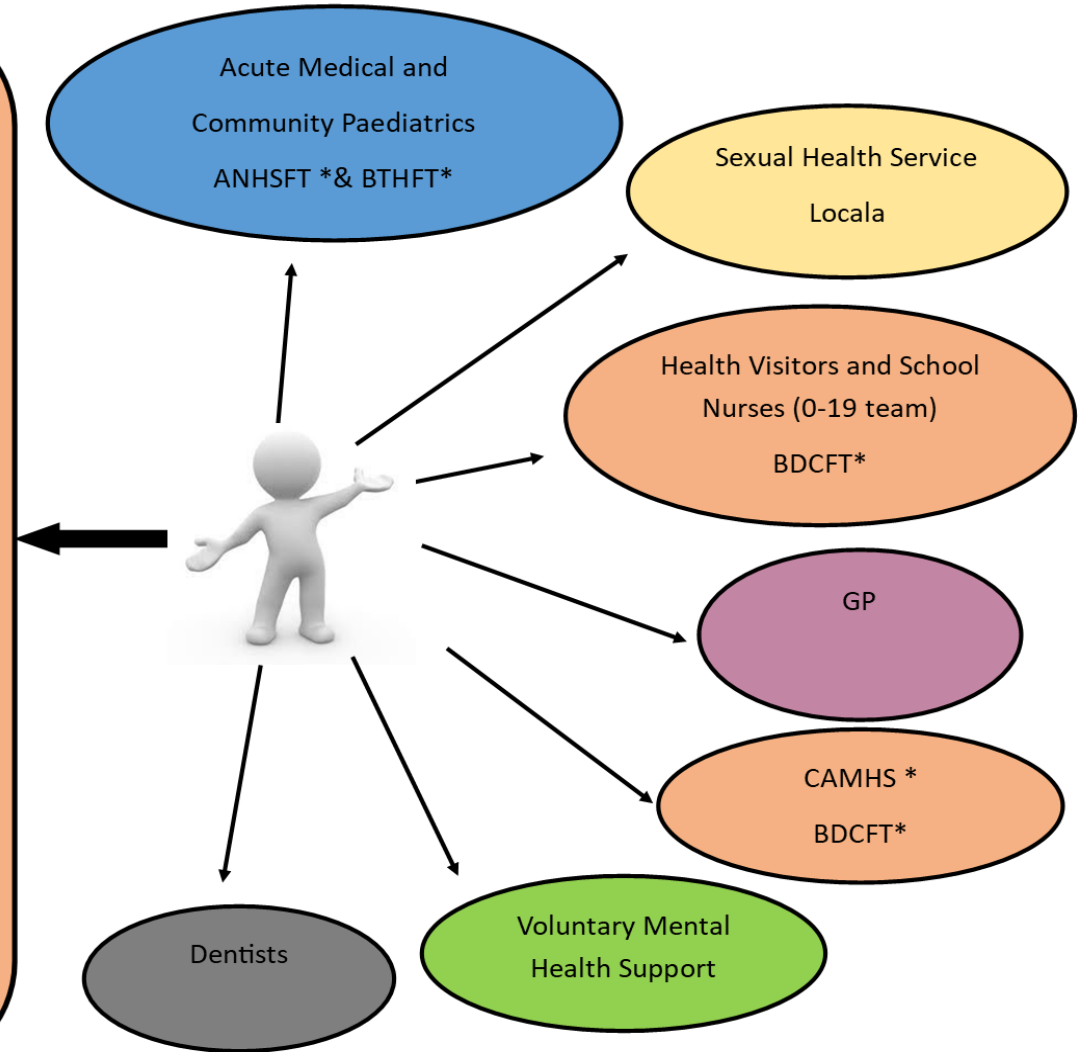
IHAs\*- allocated at triage according to the need of the child, to most appropriate medical professional. Either:

- Paediatrician in Airedale
- Paediatrician in Bradford
- Specialist GPs for CLA (BDCFT) - 3 GPs— one session a week and 1 GP 1 session per month.
- Adult Health Forms now all completed by BDCFT since 1st December 2021

RHAs - team of specialist CLA nurses comprising

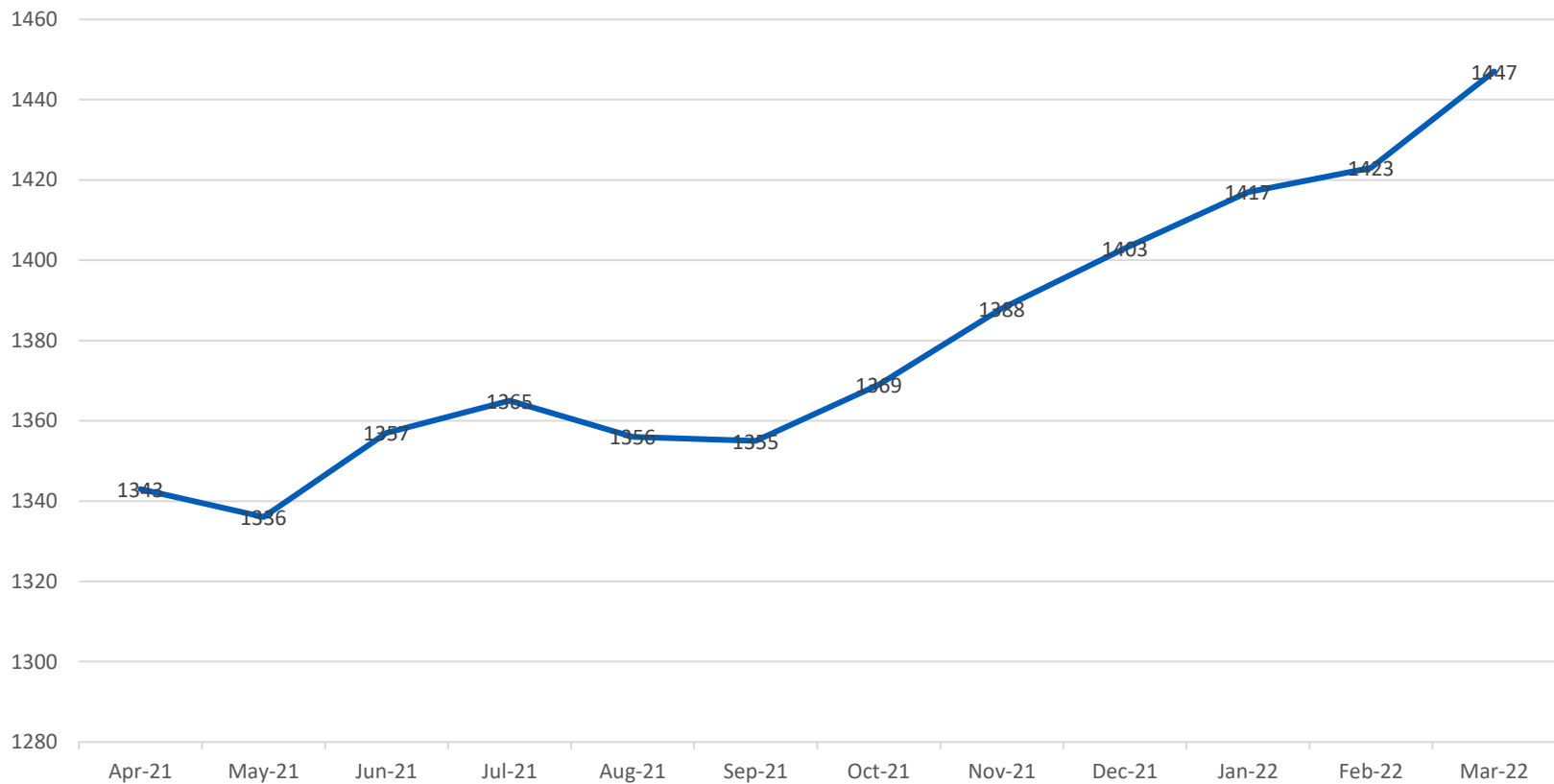
- 1 WTE Named nurse (Band 8)
- 1 WTE Team Leader (Band 7)
- 10.34 WTE Band 6 nurses—case holders
- 2 WTE Band 5 staff nurses – support clinics
- 2 WTE Band 4 nursery nurses
- 1.9 WTE Band 3 admin
- 1.1 WTE Band 2 admin

\*Using a systems approach to help addresses the needs of children and looked people looked after in Bradford. Ensuring more timely access to services for the child. Also, provides a clearer understanding of any risks/gaps and overall system capacity.



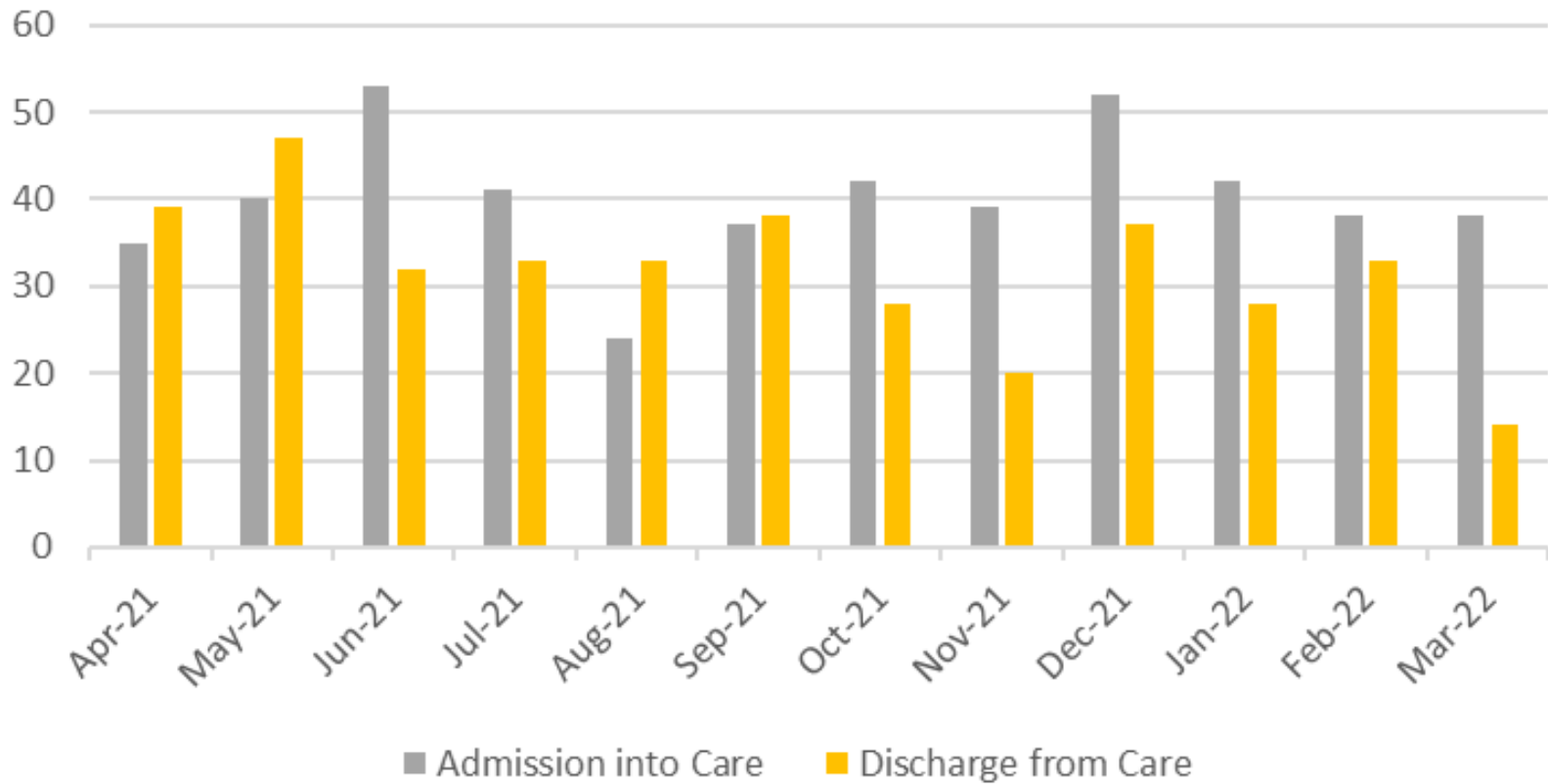
# Numbers of Children In Care, Bradford April 2021-March 2022

Total Number of Children in Care





## Admission and Discharge From Care

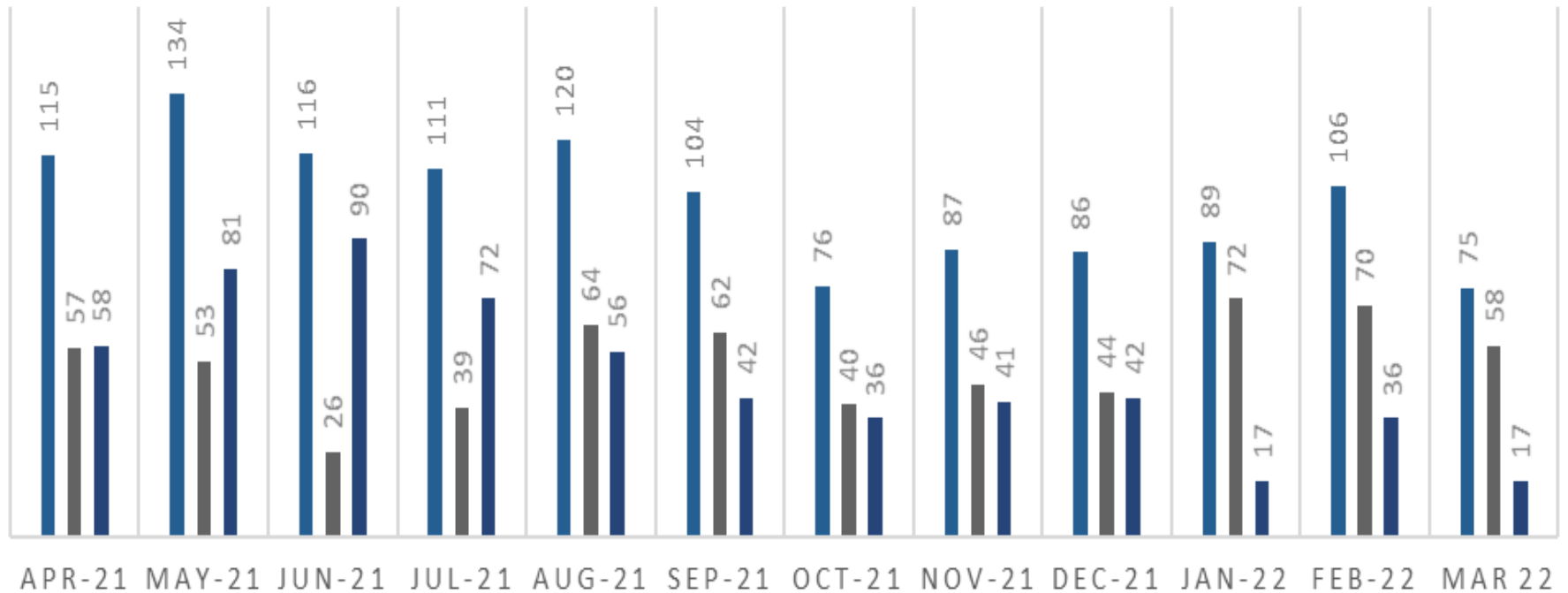


# Purpose of IHA and Who Can do Them?

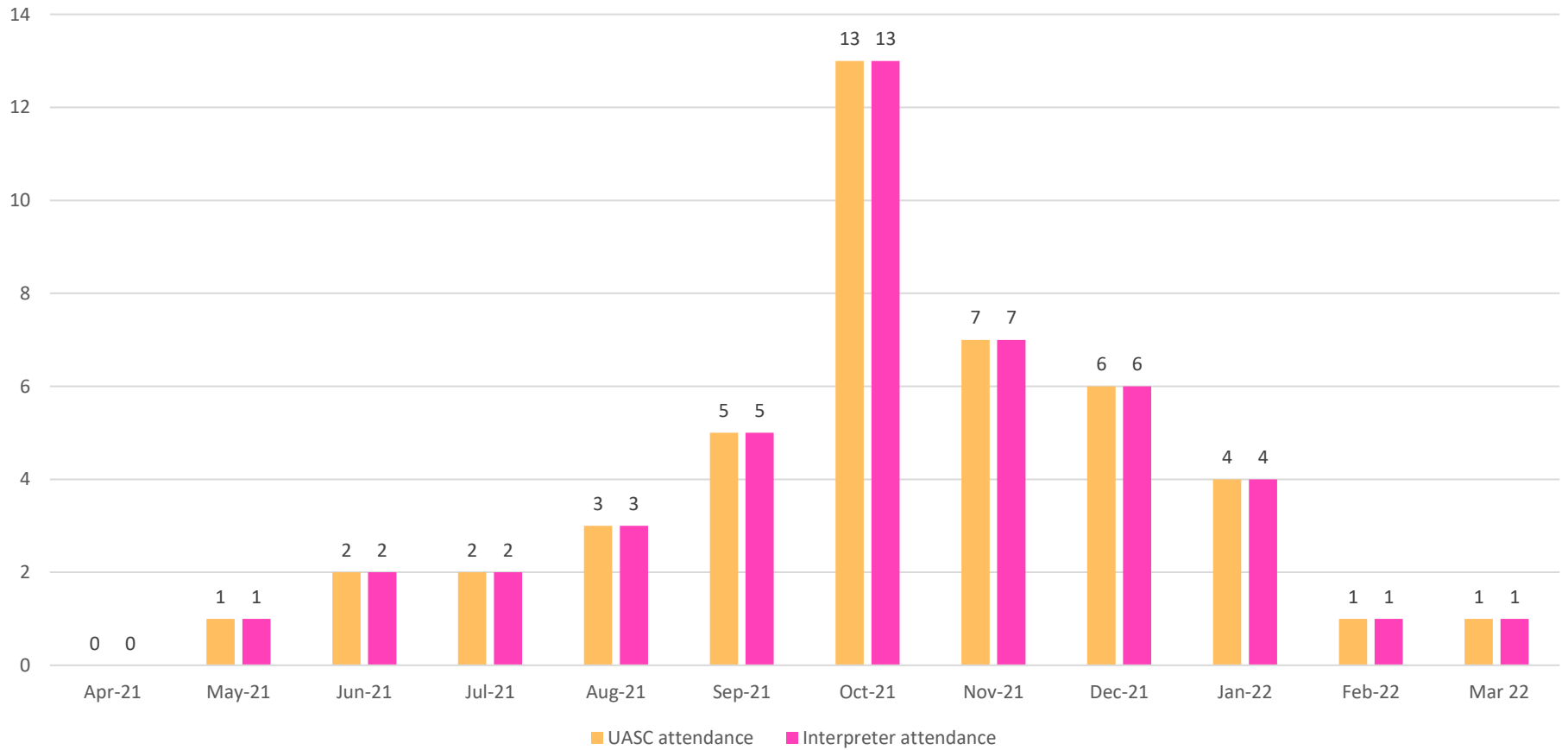
- The Initial Health Assessment must be done by a registered medical practitioner <sup>1</sup>
- Statutory guidance states that IHAs should be done within 20 working days of entering care.
- The statutory health assessment should address the following for a child:
  - The state of their health, including physical, emotional and mental health
  - Their health history including, as far as practicable, his/her family's health history
  - The effect of their health history on their development
  - Existing arrangements for their health and dental care; including
    - routine checks of their general state of health, including dental health treatment and monitoring for identified health (including physical, emotional and mental health) or dental care needs
    - preventive measures such as vaccination and immunisation
    - screening for defects of vision or hearing
    - advice and guidance on promoting health and effective personal care
    - any planned changes to the arrangements
    - the role of the appropriate person, such as a foster carer, residential social worker, school nurse or teacher, and of any other person who cares for the child in promoting his or her health.

## INITIAL HEALTH ASSESSMENTS

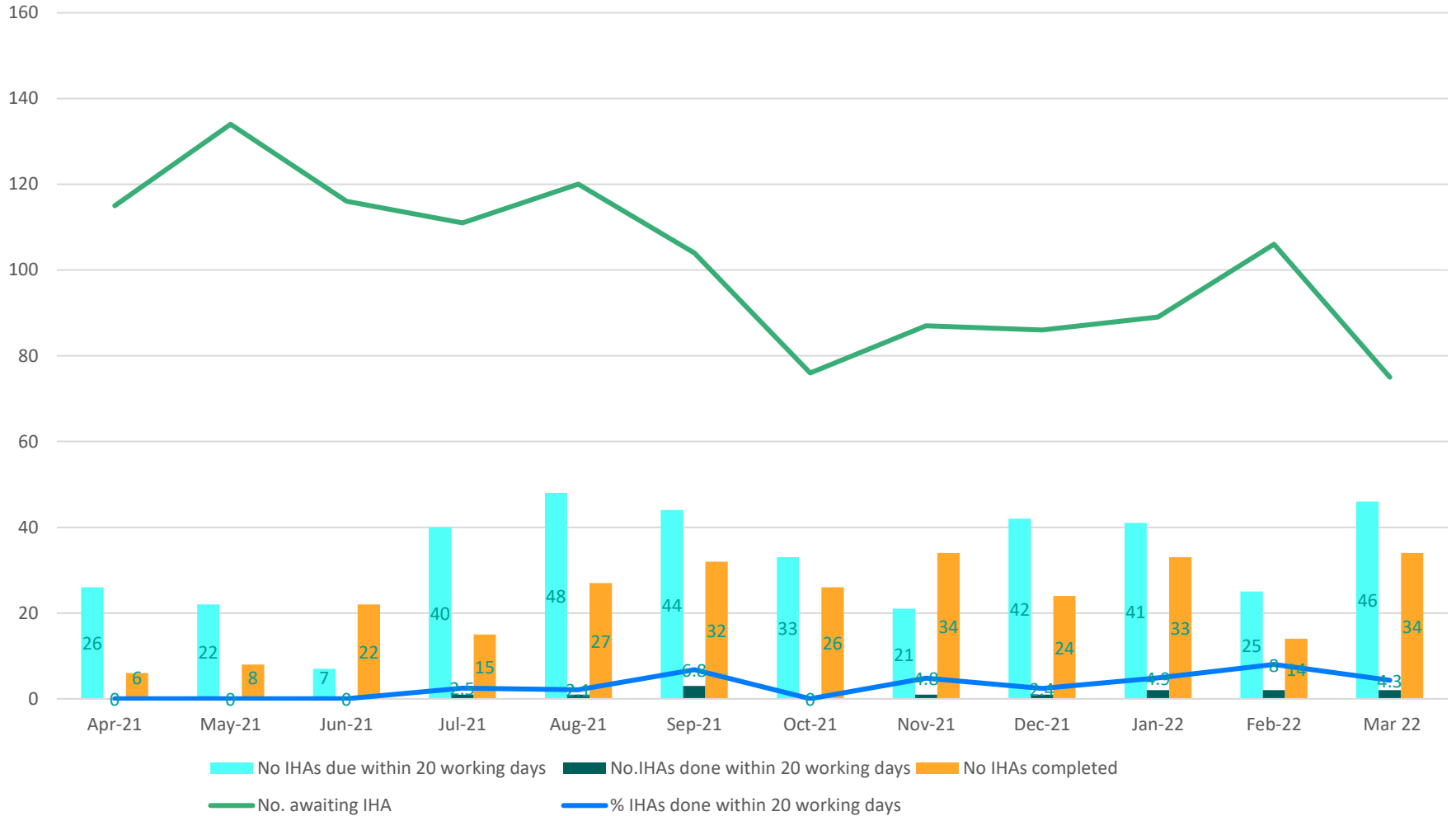
■ No. awaiting IHA    ■ Awaiting assessment with consent    ■ Awaiting assessment without consent



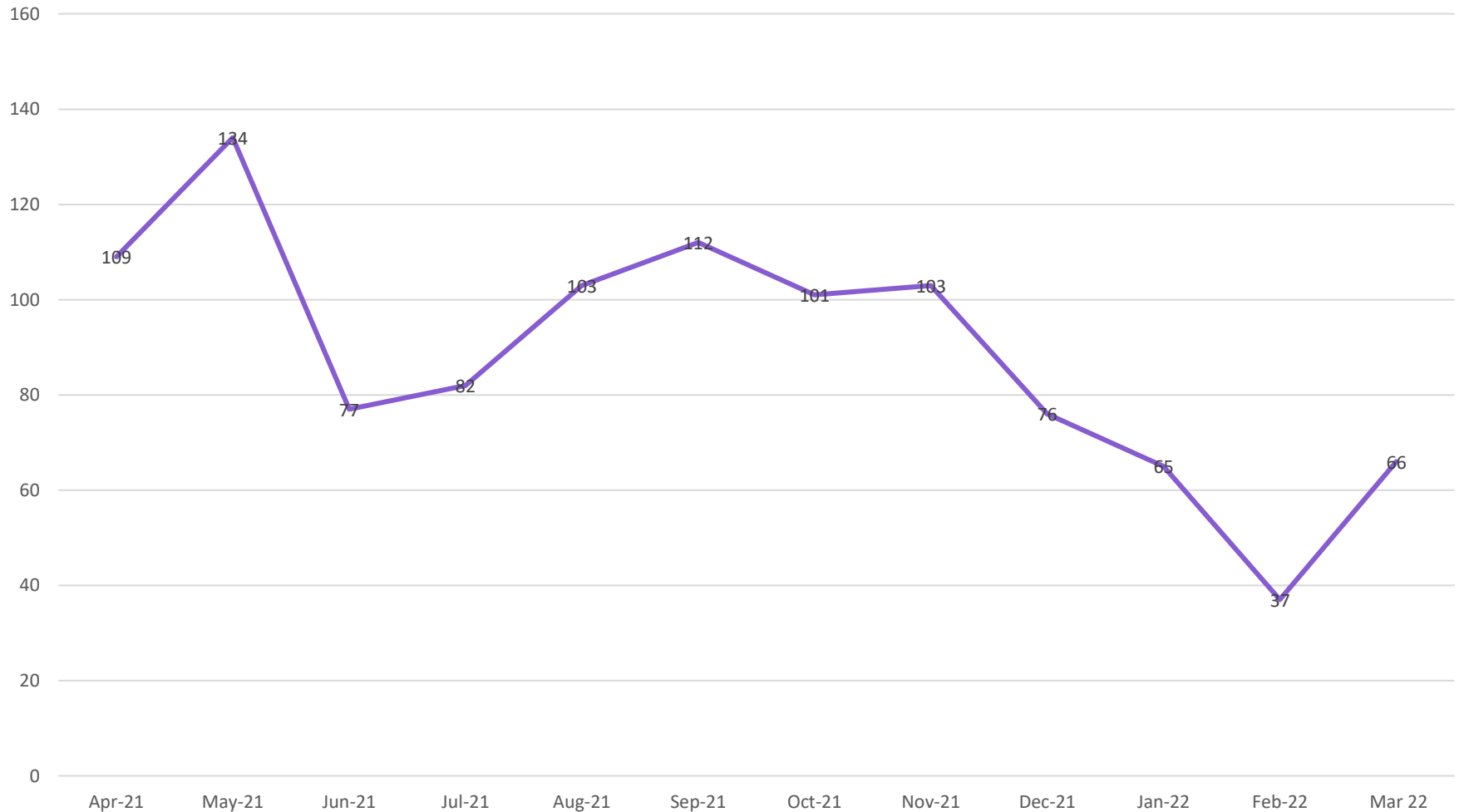
### Numbers of Unaccompanied Asylum Seeking Children (UASC) and interpreters booked



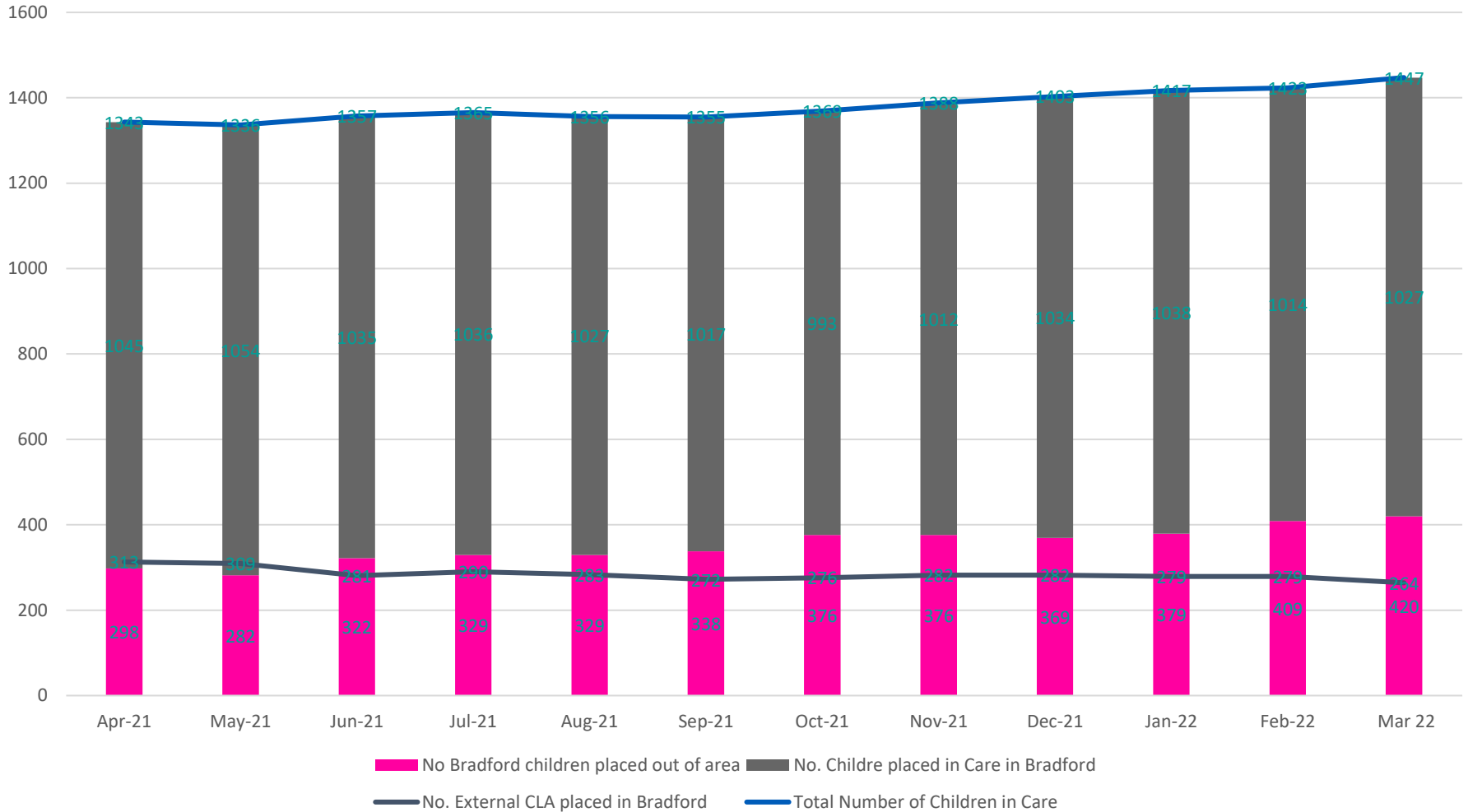
### IHAs Completed



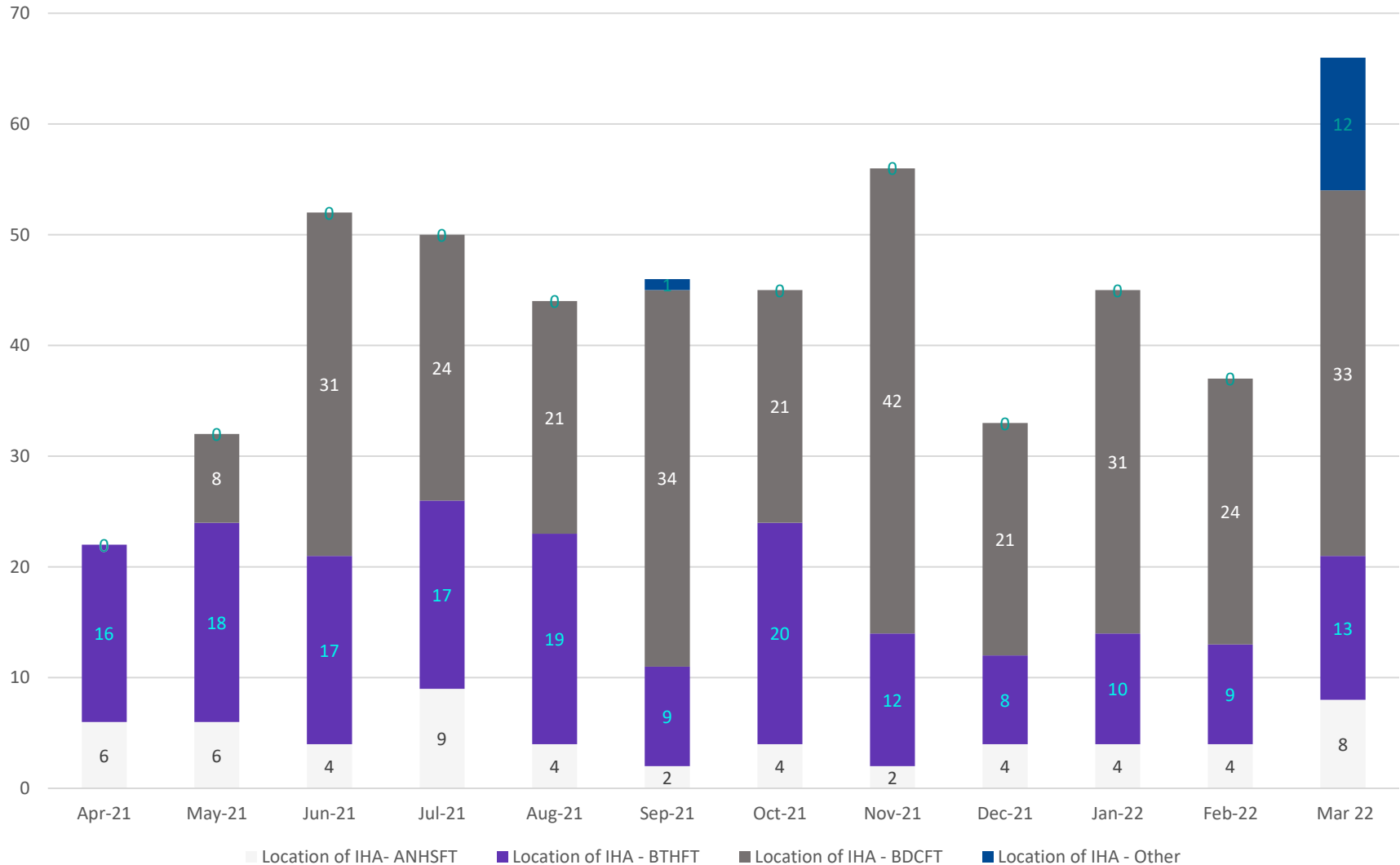
Av. Time CYP becoming CLA to IHA completion (working days)



### Placements

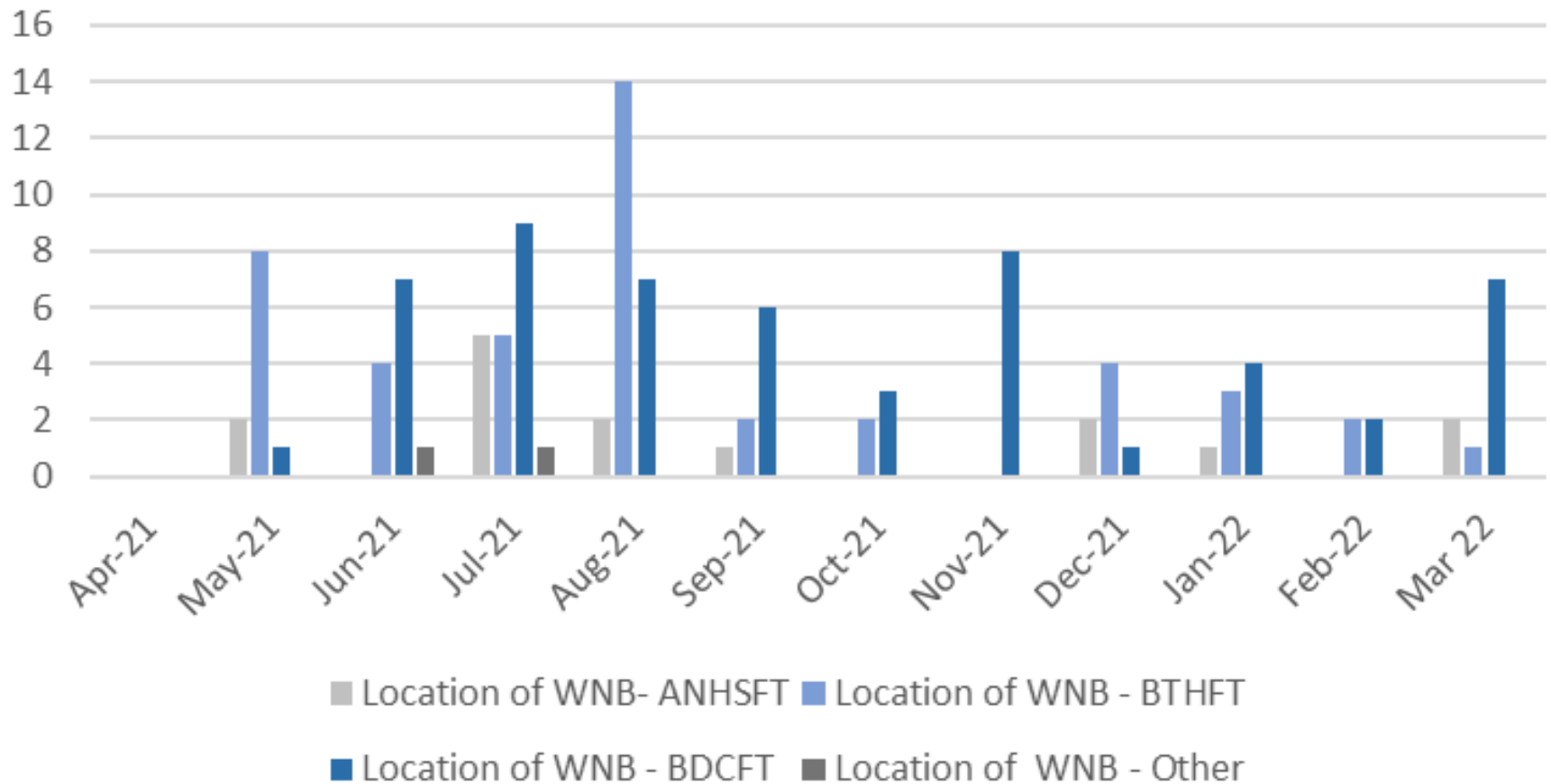


### Location of IHAs





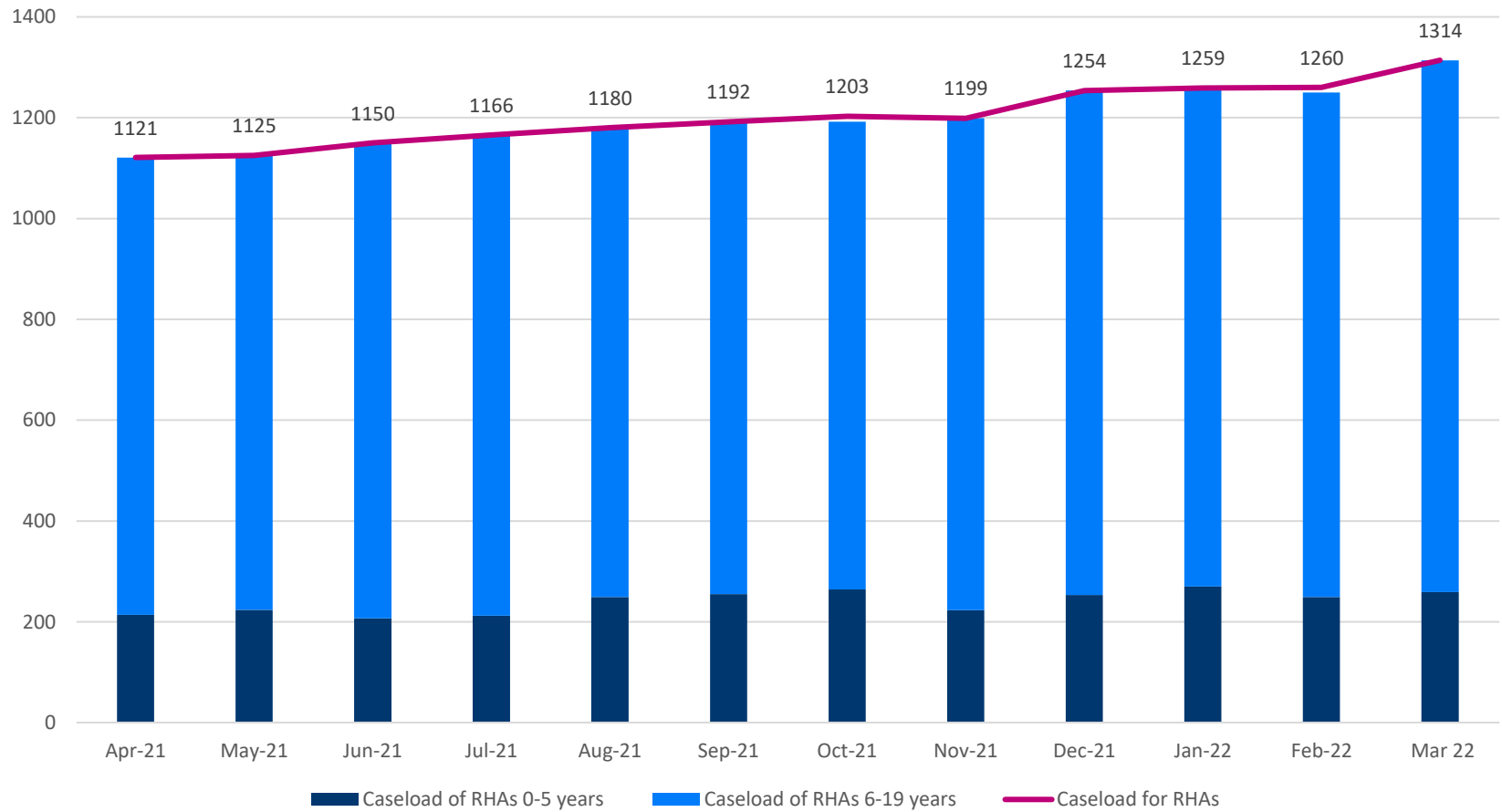
## Was Not Brought to Appointments



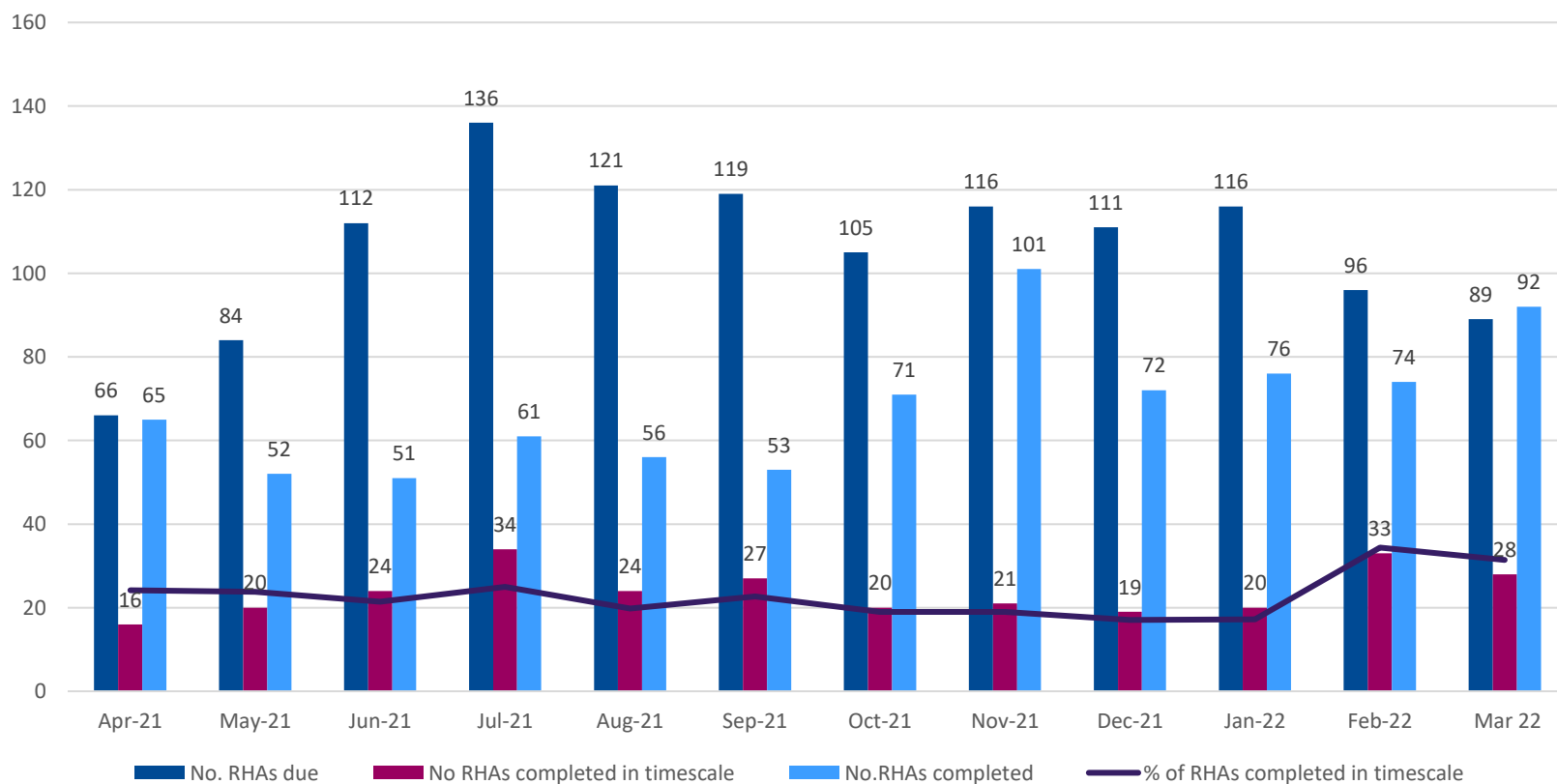
# Review Health Assessments (RHA)

- The LA that looks after the child must make arrangements for a registered medical practitioner or a registered nurse or registered midwife to review a looked-after child's health needs and provide a written report for each review
- The review of the child's health plan must happen at least once every six months before a child's fifth birthday and at least once every 12 months after the child's fifth birthday.
- The child's social worker and Independent Reviewing Officer (IRO) have a role to play in monitoring the implementation of the health plan, as part of the child's wider care plan.
- The local authority that looks after a child must take all reasonable steps to ensure that the child receives the health care services he or she requires as set out in their health plan. Those services include mental health services, medical and dental care treatment and immunisations, as well as advice and guidance on personal health care and health promotion issues

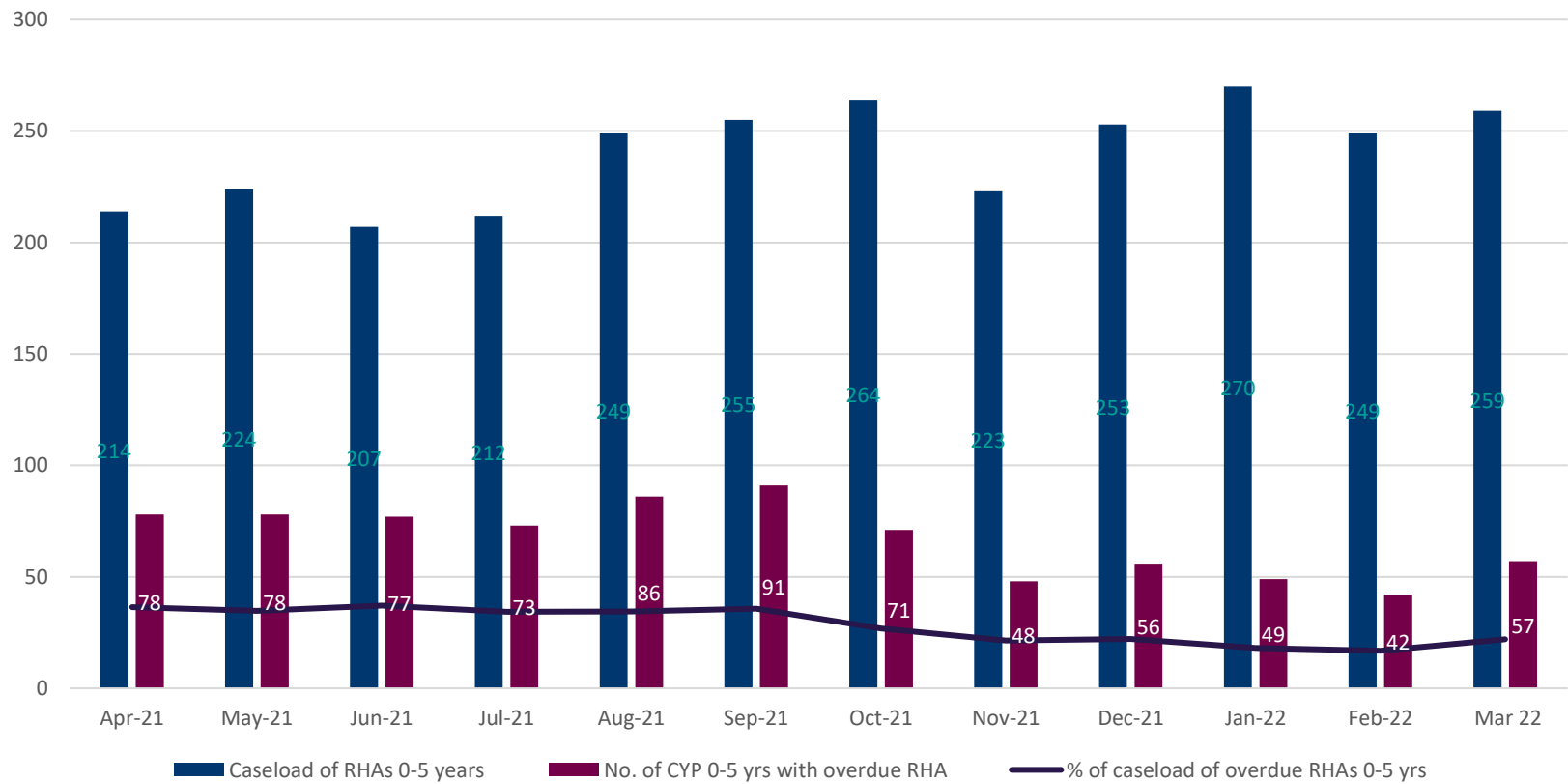
### Caseload For RHAs



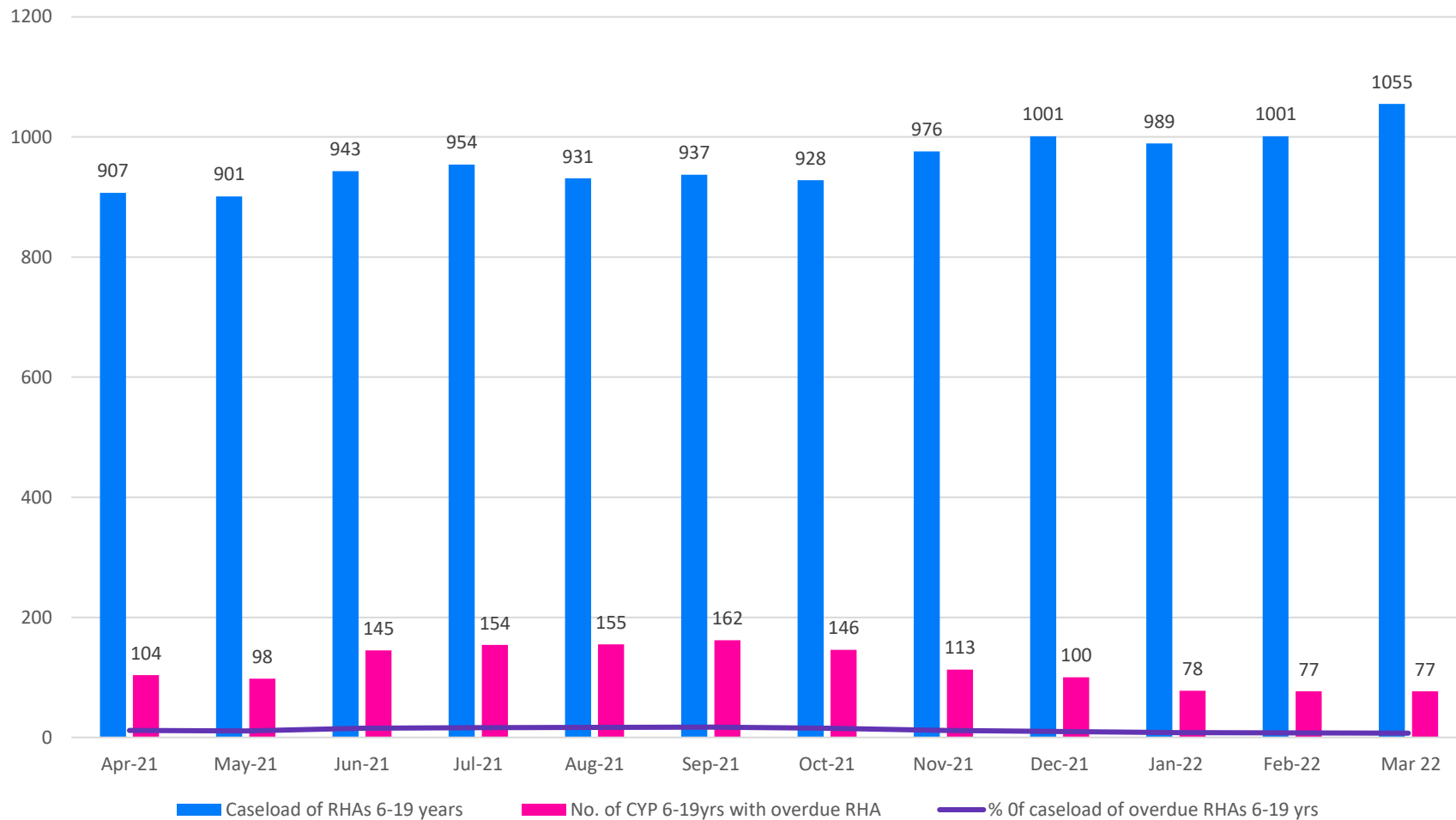
### Review Health Assessments



### RHAs 0-5 years



### RHAs 6-19 years



# Dental Checks

- The dental assessment undertaken help to inform the overall health assessment.
- Informed consent for dental treatment is needed from an adult with parental responsibility for the child (unless the child can consent for themselves)

	2019-2020	2020-2021	2021-2022
Number of children who had their teeth checked by a dentist	93.0%	45.0%	83.2%

As at 31/08/22 – CIC in care for 12 months+ who had teeth checked by a dentist = 70.93%

# Other Data

- Bradford children generally have good childhood vaccination coverage, especially for CLA

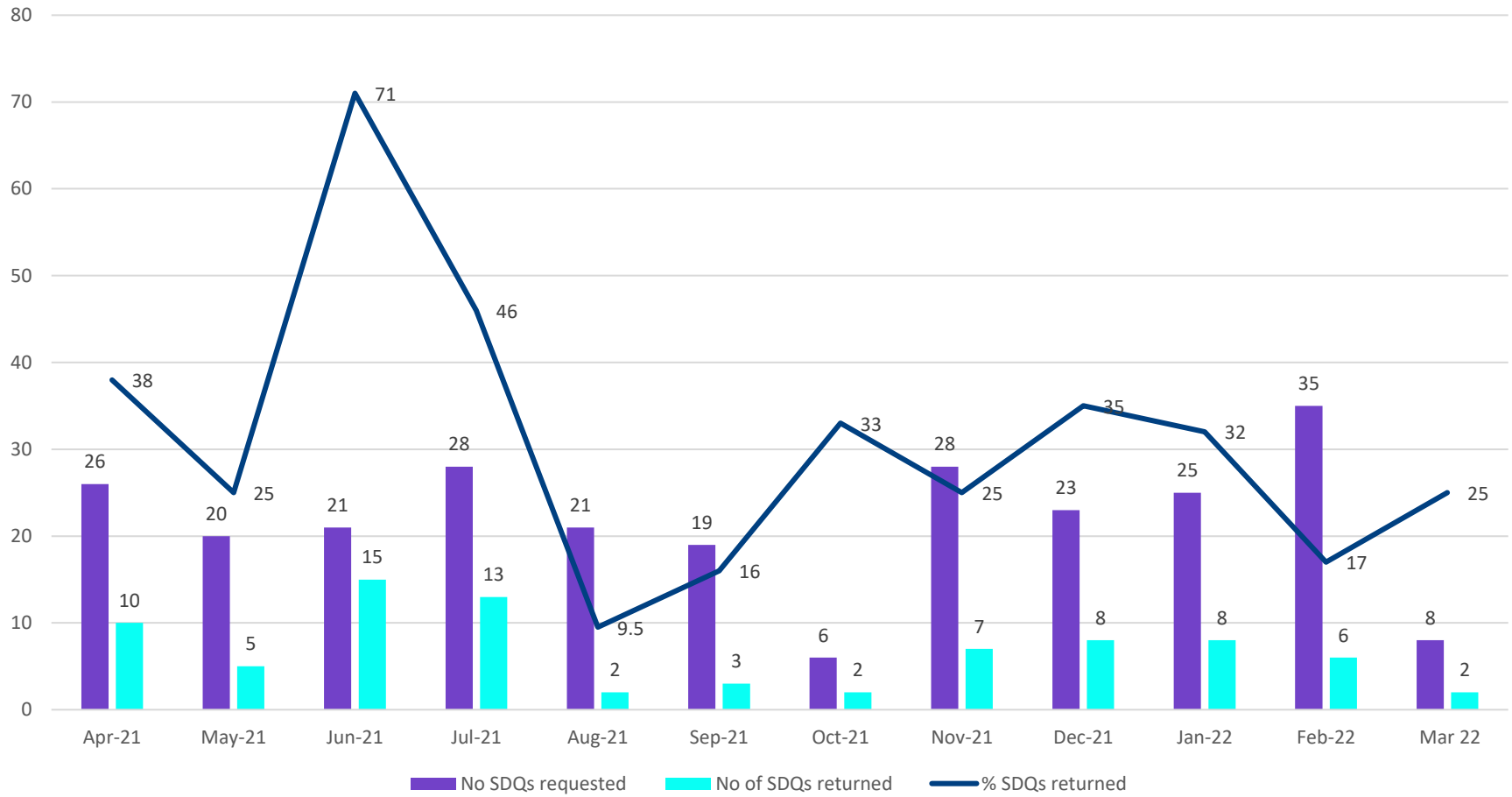
	2019-2020	2020-2021	2021-2022
Number of children whose immunisations were up to date	97.0%	95.0%	96.8%
Number of children who had their annual health assessment	94.0%	94.0%	95.3%



# Strength and Difficulty Questionnaires (SDQ)

- Important to have some means of measuring on a regular basis the emotional and behavioural difficulties experienced by looked-after children at a national level.
- SDQ is a clinically validated brief behavioural screening questionnaire for use with 4-17 year olds or 2-4 year olds.
- Internationally validated and simple to administer.
- 3 versions: for parents or carers, teachers and children aged 4-17
- Used to screen for any problems related to a child's emotional well-being.
- Provides information to help social workers form a view about the emotional well-being of individual looked-after children. Recommended that it is completed around the time of child's IHA or RHA

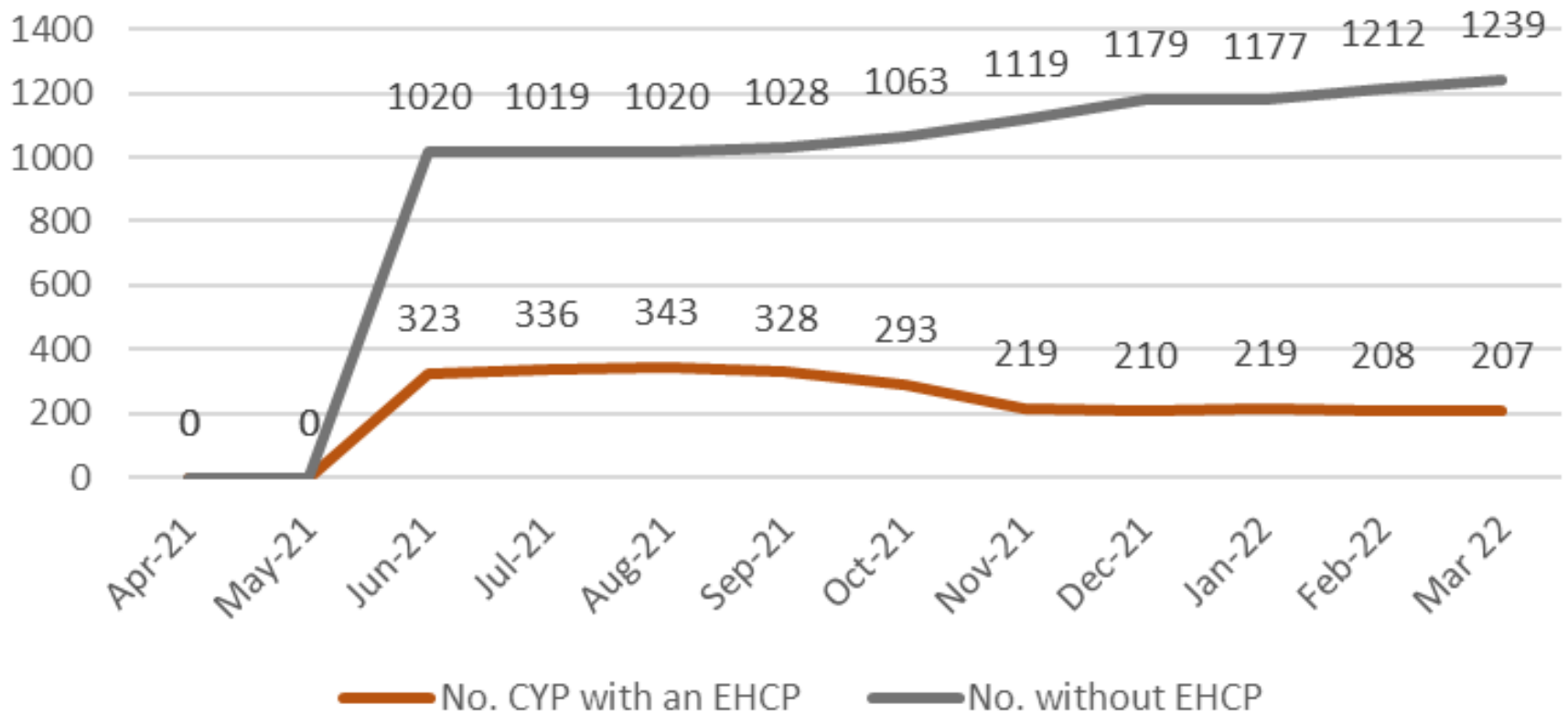
### Strengths and Difficulties Questionnaires



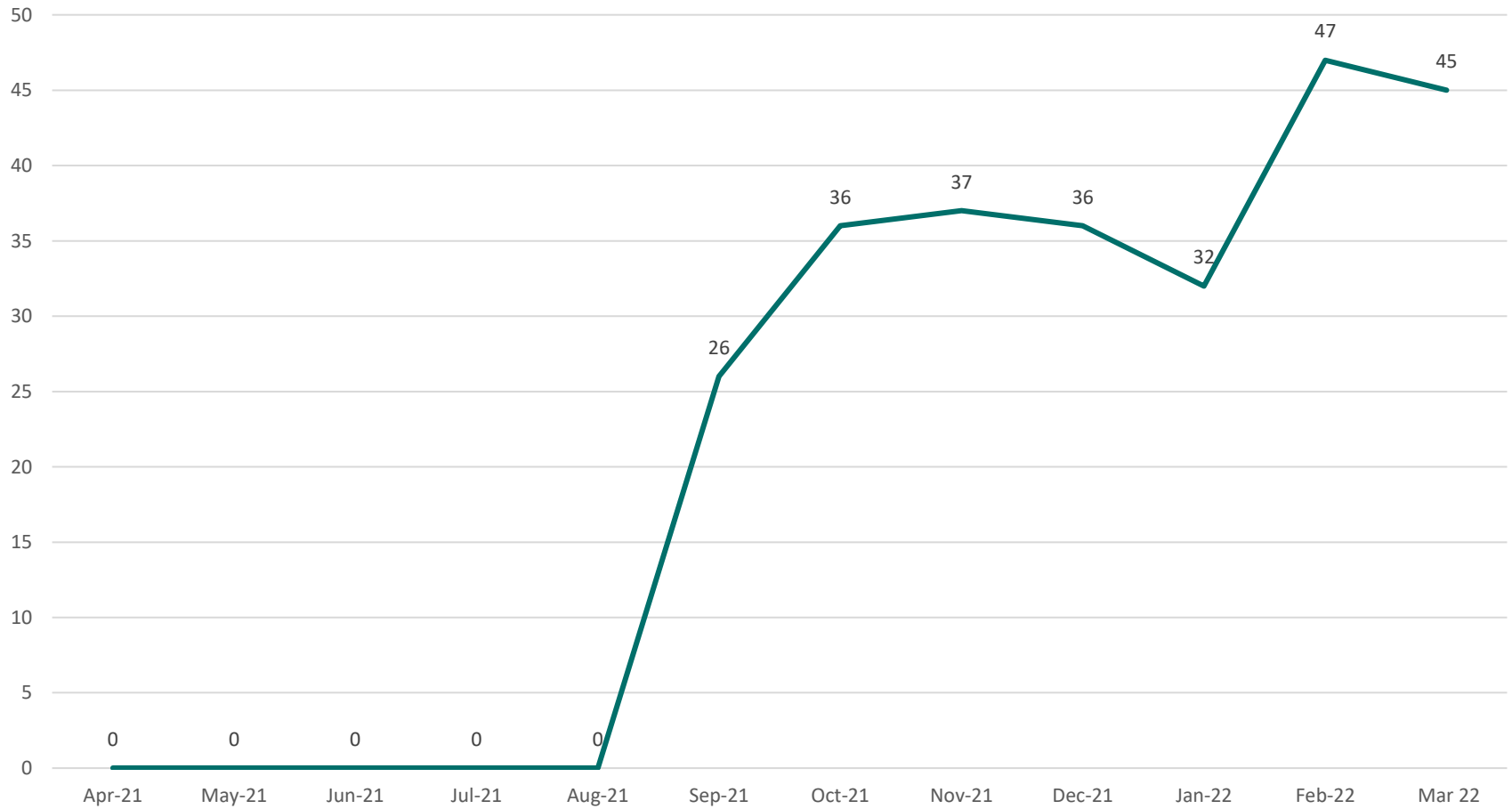
# Education, Health and Care Plan (EHCP)

- Around 70% of looked after children have some form of SEN, and it is likely that a significant proportion of them will have an EHCP <sup>2</sup>
- Local authorities will have particular responsibilities for these children and will act as a ‘Corporate Parent’
- It is imperative that their needs are quickly and efficiently assessed and provided for so that the effect of any instability on their education is reduced to a minimum

## Children With An EHCP



Number of Strategy Meetings Attended



# Key areas of focus for 2022/23 for Partners to Address

## Annual report to be considered by

- Corporate Parenting Panel
- SEND partnership

## IHAs

- Optimise recruitment to medical staffing vacancies as much as feasible through partnership working.
- Improve attendance at appointments
- Improve time taken to obtain consent. Should be day 0.
- Improve data collection so we can be more responsive, currently takes 1 or 2 months to see the monthly data

## Work with partner agencies

- To better understand where there are delays and problems
- Work closely with Local Authority to improve contractual agreements and policy & procedures and to strengthen the governance and strategic support.
- To respond to any relevant areas of concern highlighted in the SEND Inspection Written Statement of Action

# References

- 1 Promoting the health and well-being of looked-after children Statutory guidance for local authorities, clinical commissioning groups and NHS England. March 2015. DOE and DOH
- 2 Special educational needs and disability code of practice: 0 to 25 years Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities. January 2015. DOE and DOH