

## Corporate Parenting Specialist Advisory Group

<b>Date of meeting</b>	11 <sup>th</sup> January 2023
<b>Title of paper</b>	Health update
<b>Presented by</b>	Amelia Brummitt specialist safeguarding practitioner
<b>Author</b>	Victoria Balmer deputy designated nurse for safeguarding children and children in care & Amelia Brummitt specialist safeguarding practitioner
<b>Agenda item</b>	
<b>Confidential</b>	Yes

### **Purpose of the paper**

To provide the Blackburn with Darwen corporate parenting specialist advisory group with an update regarding health activity since the last meeting. The information within the paper has been presented into separate headings to clearly highlight the key areas of focus and the depth of the work being undertaken.

The areas of work highlighted within this report have been identified as priorities from the BwD health sub group or as an action from the specialist advisory group.

### **Quality assurance of health advice to inform Education Health Care Plans (EHCP)**

An action taken from the last specialist advisory group was to explore the quality assurance process of the health advice provided to inform EHCP's for Children in our Care. There is not a specific quality assurance process specifically for Children in our Care, however, below is the QA process for all children with an EHCP.

1. The health information as part of EHCP's is quality assured by the Designated Clinical Officers (DCO) and their administrators. This team co-ordinates the requests for EHCP health information and sends them out to teams for completion with strict return dates.
2. If the information does not meet the standards expected, it is returned with guidance notes for completion. Returns for poor quality are low
3. The DCO in BWD also provides feedback to us via the SEND improvement meetings and reports back quality themes, areas of good practice and areas for further development.
4. The 0-19 teams are in the process of delivering a number of 'what a good EHCP looks like' training to all health practitioners within BwD 0-19 that complete health advice. This is generally offered every couple of years and has been shown to ensure exceptions regarding poor quality are minimal.

### **Dental pathway update**

Access to dental healthcare has been identified as a national challenge and this has been reflected locally via the Local Authority Chat Data.

The priority care pathway is for priority patients including Children in Care, alongside other priority patient groups e.g. care for cancer patients and cardiac care. Clarity is currently being sought as to whether the priority care criteria will include care leavers.

NHSE are exploring the logistics regarding the single point of access including the means in which this will be facilitated, by phone referral/by email etc.

The expectation will be that the dental practice that provide care through this pathway following referral will retain registration of the child following initial treatment.

If a child/ young person was to move placement out of area, a re-referral would need to be completed. It is anticipated that the pathway will be launched in January 2023, NHSE have identified dental practices willing to participate throughout Lancashire and South Cumbria.

Communications, including method of referral will be provided to share with Social Care, Foster Carers, PA's and wider health providers.

Further updates will be provided as they are received.

### **Pre-adoption pathway**

As part of the BwD Health Subgroup an action was identified around the Pre-Adoption processes and the completion of an overarching multiagency pathway for pre-adoption medicals that ensures timely and quality assured assessments to inform the child permanence plans. Adoption is complex and agencies often work individually and are not aware of the intricacies each individual agency undertakes. Therefore, meetings have been held with relevant agencies to undertake this pathway. The pathway enables clear time frames for each agency. Escalation and quality assurance are also key to the pathway.

Updates have been made to the pathway and V4 has been shared with the chairs of the BwD health subgroup. The pathway will be discussed at the next meeting and following that for members of the subgroup to comment and feedback. The draft pathway has been shared with the children's commissioners for their information and to share with the community paediatric network.

### **Initial health assessment & Review health assessment performance**

#### **Initial Health Assessment - Children originating from BwD and residing in BwD**

During Quarter 2, there were 22 IHA requests and 18(82%) were completed within timescales. In Quarter 1, there were slightly fewer requests, 18, of which, 10 (56%) were completed in time. The number of requests for IHAs this quarter has increased; however, the compliance rate has similarly increased. This may be due to availability of the ELHT Paediatricians to complete IHAs, children being brought to appointments and the relevant documents being received more timely from BwD CSC which would lead to more IHAs being completed within the statutory in timescale.

**Quality Assurance**

In ELHT there is a devised Quality Assurance tool that must be completed by the CNP Administrator, the Children in Care Nurse and the Doctor completing the IHA.

ELHT complete 3 monthly Quality Audits and 6 monthly deep dive quarterly audits in conjunction with the ICB, Quality of the IHA's is consistently very good.

**Review Health Assessments -Children originating from BwD and residing in BwD**

In Quarter 2, there were 49 RHAs requested and 42(86%) completed within timescales. Similar numbers were requested in Quarter 1, there were 45 RHAs requested and 42 (93%) completed within timescales.

**Quality Assurance**

The Enhanced CIC Nurses quality assure 100% of all RHAs completed by Blackburn with Darwen (BwD) Children and Families Teams and LSCFT Special Needs School Nurses Team. If RHA's do not meet the quality threshold as set out in statutory guidance, the RHA is returned to the practitioner with guidance and support on areas to improve the quality of the health assessment.

<b>Report authorised by:</b>	S.Clarke
------------------------------	----------