

Harrow Children Looked After Health Service Corporate Parenting Panel June 2023

**Christine Nichols – Named Nurse
for Children Looked After Harrow**

KPI's for Harrow CLA March – April 2023

Month	Target for IHA 100% CNWL within 20 days of child becoming CLA	Target for RHA 100% CNWL within 6/12 months
March	100%	100%
April	100%	100%

Exception reporting excludes:

- requests and consent not made available within 3 days for IHA's and within 3 months for RHA's,
- CLA who do not attend or refuse appointments given or are missing
- CLA placed out of Harrow who depend upon another provider to offer an appointment.

Other Service Specification Requirements

The CLA team also assist the London Borough of Harrow to:

- Record and report dates of dental checks following health assessment
- To update immunisation status of each CLA following health assessment where possible
- GP Registration
- Record and report dates of Optician Checks

Initial Health Assessments Completed

Month	Total Due	IHA completed within 20 days (percentage / number)	IHA completed outside of timescale (percentage / number)	IHA not yet completed (percentage / number)
2023				
March	6	100% (6)	0% (0)	0% (0)
April	5	80% (4)	0% (0)	20% (1)

Time scales from CYP identified as CLA to completion of IHA

Total Number of CYP = 11

- within 20 days - 10
- between day 21- 30 - 0
- between day 31- 40 - 0
- day 41+ (includes not yet seen) - 1

Reasons for Late Completion of IHAs

Summary of reasons for late IHA's									
	No of requests received	Late requests for IHA to CLA team	Carer Declined / Cancelled Appointment	DNA / WNB	Referral / Consent issues	Refusal by Young person	OoB placement	Placement move	Young Person in Hospital
March	6	3	2						
April	5	4	1					3	

Themes for Completion of IHAs

- **Contributing challenges for completion are late requests* and placement moves.**

7/11 (63.6%) of requests for IHA were received outside timescales. 6 of the 7 late requests were seen in timescales.

No of requests received within

Day 4-5 – 3

Day 6-10 - 3

Day 11-20 - 0

Day 21-40 - 1

- **Other reasons can be unpredictable eg DNAs, placed of of borough etc**
- *** (late referrals and late consents)**

Review Health Assessments Completed

Month	Total Due	RHA completed within timescale (percentage / number)	RHA completed outside of timescale (percentage / number)	RHA not yet completed (percentage / number)
2023				
March	21	76.2% (16)	19% (4)	4.8% (1)
April	8	87.5% (7)	% (0)	12.5% (1)

Time scales from CYP identified as CLA to completion of RHA

Total Number of CYP = 29

Number seen:

within statutory timescales – 23

late - between day 1-10 – 0

late - between day 11-20 – 1

late – between day 21-30 – 1

late – 31+ days plus (includes not yet seen) - 4

Reasons for completing RHA late

Summary of reasons for late RHA's	No of requests received	Late requests for RHA	Carer Declined / Cancelled Appointment	DNA / WNB	Referral / Consent issues	Refusal by Young person	OoB placement	Placement move	Young Person in Hospital
March	21	4				1	5		
April	8	5					1		

Themes for Late Completion of RHAs

- The main factor contributing to completing RHA's outside of timescale are Out of Borough LAC teams experiencing capacity issues.
- 9/29 (31%) requests for RHA were received outside timescales. 7 out of the 9 late requests were completed in timescales.

Late requests received within:

Weeks 12-10 - 6

Weeks 6-9 – 1

Weeks 8-2 - 2

1 Week or less – 0

- Other reasons are unpredictable eg sickness etc

Work Undertaken to Improve Late IHAs/RHAs

- **Fortnightly meetings with LA colleagues to improve late requests.**
- **Liaison with Senior Managers / Team Managers.**
- **Offer of additional flexible appointments eg Saturday clinics.**
- **Reminder telephone calls to carers / young people regarding appointment times.**

Case Study

- **BACKGROUND**
- **17 yr old, almost turning 18.**
- **Currently living in a semi-independent placement.**
- **Young person experienced significant childhood trauma and abuse.**
- **History of poor engagement with services, known to CAMHS.**

Case Study Cont'd

- **Concerns**
- **Concerns around going missing and abusing alcohol.**
- **High risk of CSE risk taking behaviour.**
- **Frequenting A&E department regularly but absconds before treatment.**
- **Concerns that young person may have liver failure.**
- **Transferred in and out of borough several times due to placement changes.**
- **Unclear whether YP was aware of condition.**

Case Study Cont'd

- **Outcome:**
- **CLA Nurse called for a professionals meeting to help YP.**
- **CLA Nurse liaised with YP's GP to find out whether there was a confirmed diagnosis.**
- **GP shared details that helped the professionals to support YP.**
- **CLA Nurse continued to support YP and professionals even after she had just turned 18.**
- **Professionals agreed to a plan to support YP with alcohol abuse, rehabilitation and treatment.**

Voice of the Child

- **Carer** - . All aspects of health and development thoroughly discussed and covered in depth. Fully satisfied with the assessment – Lovely lady.
- **Young Person** – I enjoyed the health assessment. This is my final one and the conductor was very kind.
- **Young Person** – The nurse was very assuring and kind whilst also being professional. Better experience than last time.
- **Young Person** – It was good.
- **Carer** – We are happy with the health assessment and how it was done. Appreciate the concern and care provided – Thank you.
- **Carer** – Very comprehensive, asked about behaviour and health in great detail. I felt all issues were raised and addressed.
- **Young Person** – It was very good, the LAC nurse was very welcoming and very understanding.