



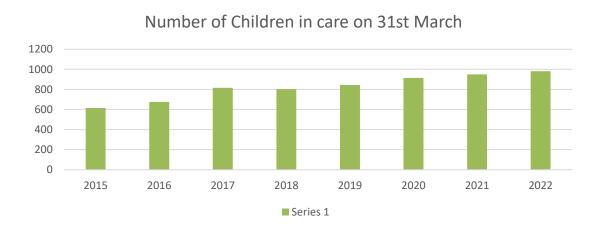
# Health Update for County Durham Corporate Parenting Panel

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## **Overview of County Durham's Children in Care**

On 31 March 2022 the overall number of CiC who had been looked after for at least 12 months in Durham was 982. This number remains high despite the introduction of a new Edge of Care approach into County Durham which supports children and families to prevent them coming into care.

Table 1: Number of Durham County Children In Care 2015 – 2022



On 31 March 2022 82 children in care (9%) were placed outside of County Durham's local authority boundary and over 20 miles from their home (16% in England). When children live away from their home authority there is a risk that they do not receive the support and help that they need





#### **Local Health Indicators**

- Children remain in care for more than one year should experience an improved quality of life, not least of all evidencing improvements in holistic health. The SSDA903 return provides crucial data to both the Local Authority and CCGs in understanding the needs of this cohort of children to enable the commissioning of health services which focus on improving outcomes. However, a more comprehensive health needs analysis is underway and will be a key area for development during 2022-2023.
- Compliance for Durham children being seen by a dentist dropped significantly in 2021-2022 to 41% compared to 86% [2018-2019] and 87% [2019-2020]. The Designated Nurses will continue to work with Public Health England and NHSE to improve compliance to previous pre-pandemic levels.
- Immunisation status decreased in 2021-2022 to 90% compared to 99% for 2018-2019 and 2019-2020 was 99% which is above the national average.
- Compliance with IHA statutory timescales by CDDFT on average remains above 90 % once the paperwork has been received from the local authority. Significant work has been undertaken by the local authority in Durham to improve the compliance with the statutory 5 day time frame.



## **Initial Health Assessments**

**Table 2: Compliance for Initial Health Assessments** 

Initial Health Assessments (IHAs)	2020-2021				2021 - 2022				
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
Percentage of IHAs undertaken within Statutory timeframes (within 20 working days)	84%	69%	65%	74%	57%	57%	63%	60%	

#### Table 3: Compliance for Initial Health Assessments for Children Placed Out of Area

IHAs for Durham children placed out of area	2020-2021				2021 - 2022				
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
% of Out of Area IHAs undertaken within Statutory timeframes (within 20 working days)	0%	67%	0%	50%	0%	0%	50%	56%	

#### Table 4: Compliance for Initial Health Assessments for Out of Area Children Placed into Durham

Out of area children placed in Durham		2021 - 2022						
		Q2	Q3	Q4				
Number of OOA Children placed into Durham requiring IHA by CDDFT	1	4	2	9				
Number of IHAs Undertaken in Statutory Timescale	0	0	1	5				
% of Initial Assessments undertaken for children placed in area within Statutory Timeframes (20 working days)	0%	0%	50%	55%				



### **Review Health Assessments**

**Table 5: HDFT Review Health Assessment compliance** 

Review Health Assessments (RHA's)	2020-2021				2021 - 2022				
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
Percentage of RHA's undertaken within Statutory timeframes	84%	85%	83%	77%	81%	78%	81%	82%	

Table 6: Review Health Assessment compliance for Children Placed Out of Area

Out of Area Review Health Assessments	2020-2021				2021 - 2022				
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
% of Out of Area RHAs undertaken within Statutory timeframes	60%	75%	43%	53%	23%	56%	30%	52%	

The majority of RHAs are undertaken by Health Visitors and School Nurses depending on the age of the child. The HDFT 0-25 Healthy Child Service staff undertake RHAs for County Durham children living within the Durham Local Authority boundary. The CDDFT health team complete RHAs for Durham children placed out of the Local Authority area within a 20-mile radius and children placed within the County Durham boundary by other Local Authorities.



## **Challenges**

- Increasing number of children entering care and remaining in care
- The publication of the National Transfer Scheme (NTS) Protocol for Unaccompanied Asylum Seeking
   Children in December 2021 sets out guidance for the safe transfer of unaccompanied children from the
   entry local authority to another receiving local authority. The receiving authority will then become legally
   responsible for the child at the point of physical transfer of the child to the care of the receiving authority.
- Increasing number of Unaccompanied Asylum-Seeking Children (UASC)
- Ongoing impact of COVID-19 pandemic
  - Waiting times for assessments
  - Impact on staffing across health and social care including residential settings
  - Impact on Primary Care and reduced face to face appointments
  - Sickness and absence within CDDFT Consultant Paediatric Team resulted in some cancelled clinics for IHAs as clinic slots were re-scheduled
- Availability of specialist in-patient services e.g. Tier 4 mental health beds
- Impact of the Somerset ruling





#### Priorities for 2022-2023

- Further improve health outcomes for children and young people in care and those who are care experienced
  - Increase compliance of Primary Care GP information to inform initial and review health assessments.
  - Improve compliance to previous levels for dental health assessments and immunisations for children in care in County Durham
  - o Ensuring the needs of children from County Durham who are placed out of area are met
  - o Improving compliance of Out of Area (OOA) health assessments within statutory timeframes
  - o The number of Children in care accessing CAMHS services and their needs are fully understood.
  - o To ensure that unaccompanied asylum-seeking children have access to services and support.
  - o To understand the needs of CiC who are compulsorily accommodated
  - o To understand the health needs of CiC who go missing from home/care in order to inform the health assessments and ensure outcomes for these young people are being met.
- Support the local authority with:
  - Recruitment of foster carers
  - Augment information sharing processes
  - Increase the number of health summaries provided to care leavers
- Further improve Data Collection









#### **Conclusion**

This annual report has provided an overview of the CiC population both nationally and locally and has outlined the performance of NHS commissioned services during 2021-22.

The numbers of Durham CiC have continued to increase year on year with 2021-22 seeing further increases. The resources required to deliver a quality service to this cohort of children will require continued evaluation to ensure this is not compromised.

There has been unprecedented challenges on all services as a direct result of the COVID Pandemic and the lifting of lockdown restrictions. Despite this, the services delivered to children in care have continued to be delivered overall.