



Responding to the Health Needs Of Care Experienced Children and Young People

Overview

The Promise, 2020¹ advocates a rights based assessment stating that ‘nurturing relationships should be at the centre of caring for children and young people, and that as with any other child, it is these relationships with adults which must alert us to potential health concerns’.

Early identification, the right help and timely intervention from the right people is a crucial element of Health Needs Assessment (HNA) for care experienced children and young people and vital to improving their outcomes. There is a wide research platform highlighting the health inequalities faced by care experienced Children and Young People. They often have greater health needs than others their age which may have a lasting impact on their adult lives, often as a result of exposure to additional risks to their wellbeing including poverty, abuse and neglect

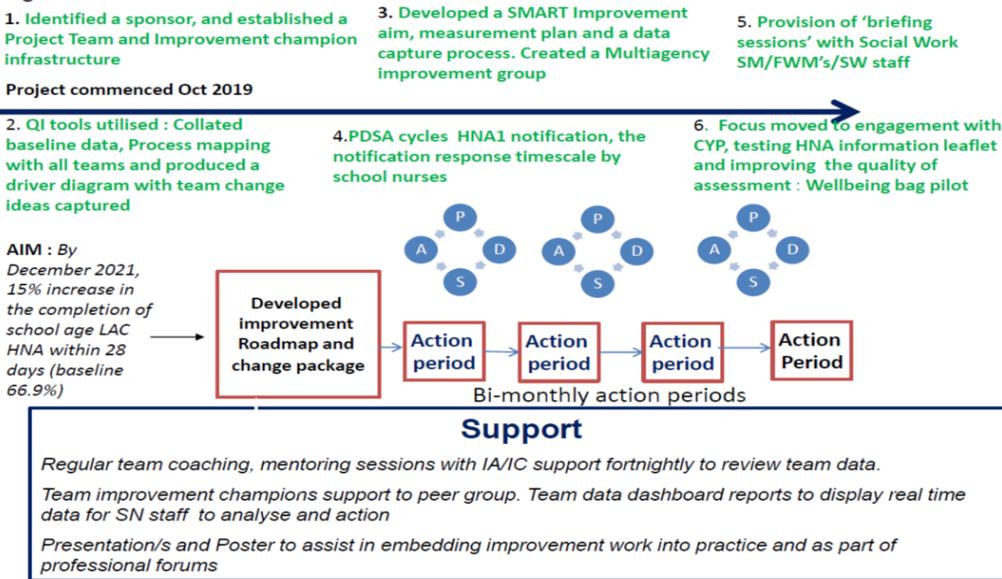
Project Aim: By December 2021, 15% increase in the completion of LAC HNA of school age children within 28 days (baseline 66.9%)

Methodology

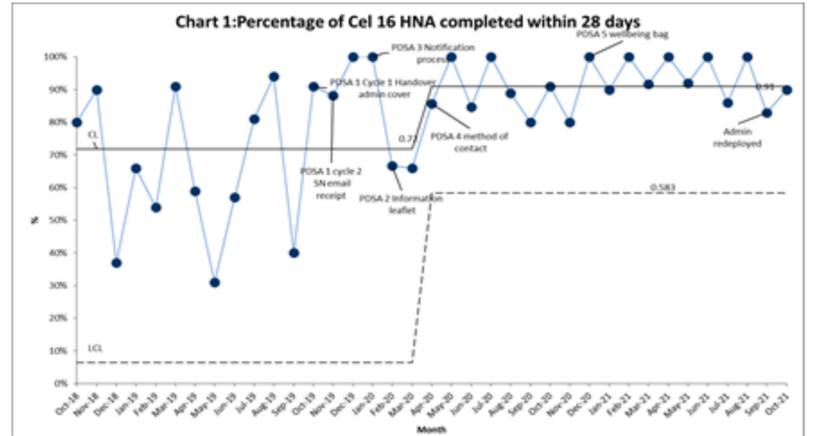
Identified Problems: - quality, timeliness and engagement of young people and carers in the HNA process.

Staff adapted their practice to overcome the challenges of young people shielding, self-isolation, education and children house’s access restrictions presented through the COVID pandemic. The team utilised the IHI breakthrough series seen in figure 1 below. The improvement team (SW, Health and Education) utilised the three step model for improvement in practice to address the problems. As an integral feature of improvement was involving and listening to the voices of children and young people and their desire to change the approach from assessments to ‘health conversations’. As part of the response we worked collaboratively with them to 1. Redesign a Health needs assessment information leaflet. 2. Enhance the quality of assessment by applying an engagement and interactive toolkit (Wellbeing Bag) and taking the necessary time to capture Children and young people’s (CYP) views of their own health and wellbeing needs to inform future care planning

Figure One



Results / Outcomes



Working with care experienced young people, carers and staff, overcoming some of the restraining forces presented by COVID we improved the timeliness of the HNA response. Chart one illustrates the data from the outcome measure linked to our aim. **We exceeded our aim with a 19 percentage point increase from the point of evidence of process change following sustained improvement (72%- 91%) in the completion of a HNA by 28 days.**

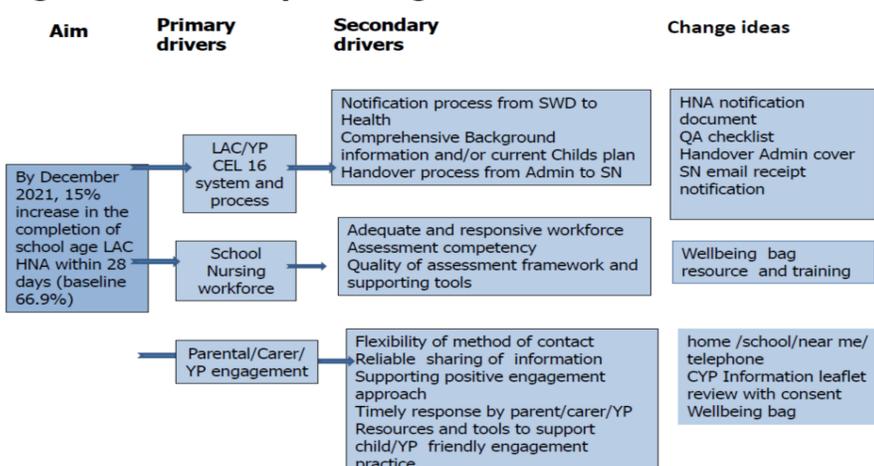
Key Learning Points

- Staff made adaptations to their practice to respond to ongoing challenges e.g. virtual contact with CYP/Carer/key workers, visits to ‘children’s houses’ and education hubs.
 - A redesign in the notification process from Social Work to Health and HNA information leaflet for CYP to improve engagement with school nursing staff has become an integral feature of the improvement response.
 - Application of an engagement and interactive toolkit has **helped capture CYP views** of their own health and wellbeing needs to inform future care planning.
 - The project learning has highlighted that **KPI timescales can in fact impose on achieving a high quality HNA**. The new policy framework (The Promise) may well influence a national review for a timely response to the HNA notification but with the priority on **relationship building and a continuous assessment process** to achieve improved outcomes for care experienced children and young people
 - Lanarkshire children and young people placed out of local authority (LA) area can experience challenges accessing a HNA and we are now **working with the Child Health Commissioner to advocate for responsive improvement in other LA areas across Scotland**.
 - Care experienced CYP will receive ongoing care and intervention by the school nurse as well as receiving an annual review of health and wellbeing need but there is no process in place to capture more medium term/long terms outcomes and this is currently being scoped out.
- Having identified a health need, it is **important that the school nursing service build capability and capacity for ongoing intervention** and support for care experienced and work is now in progress to develop local pathways of care and enhanced training e.g. LIAM intervention

Process Change

As seen in figure two there were several change ideas tested from the critical elements of the key processes to engaging and communicating with children and young people

Figure 2 Our Theory of change



Next Steps

The Improvement project has been shared at the Pan Lanarkshire school nursing implementation group and work is now underway to improve Lanarkshire wide data collection. A standard operating procedure is in development to facilitate standardisation of the database process, which will assist when admin support goes on leave etc. The NHS Lanarkshire child health plan and partnership children’s services plan as part of our corporate parenting response will monitor these changes going forward. In addition an exciting opportunity has been created with two care experienced young people being employed to assist the partnership in delivering the local Promise actions, with one of their areas of work including a focus on health outcomes

Scale / Spread

The Changes have been implemented into practice and spread and scaled up across the school nursing teams in South Lanarkshire. Learning has been shared across Lanarkshire with the Wellbeing bag element of the change package being shared with Greater Glasgow and Clyde.