

Dear Colleague

**IMPLEMENTATION OF ACTION 15 OF THE LOOKED
AFTER CHILDREN AND YOUNG PEOPLE: WE CAN
AND MUST DO BETTER REPORT**

This letter is to advise NHS Board Chief Executives of the recommendations arising from the *Looked After Children and Young People: We Can and Must Do Better* report, and to request that Chief Executives ensure the recommendations are implemented within the timescales which accompany them.

Looked After Children & Young People: We Can and Must Do Better was published in January 2007. The report identified what was required to improve educational and other outcomes for Looked After children and young people and care leavers. In particular it recognised that educational attainment cannot be seen in isolation but is dependent on other life circumstances, including health and wellbeing, being addressed.

Caroline Selkirk, the Tayside Child Health Commissioner chaired the Being Emotionally Mentally and Physically Healthy Working Group – one of 8 groups which took forward the recommendations in *We Can and Must Do Better*. The group considered how we can ensure that Scotland's Looked After children and young people and care leavers benefit from access to a range of appropriate services designed to meet their emotional, mental and physical needs. Specifically, it considered how to address action 15 in *We Can and Must Do Better*.

CEL 16 (2009)

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Addresses

For action
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For information
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Action 15:

Each NHS Board will assess the physical, mental and emotional health needs of all Looked After children and young people for whom they have responsibility and put in place appropriate measures which take account of these assessments. They will ensure that all health service providers will work to make their services more accessible to Looked After and accommodated children and young people, and to those in the transition from care to independence.

Next steps required:

- a) joint assessment and planning which takes into account the views of the young person and includes details of their particular health needs, including registration with a GP, dentist, regular health and dental checks, advice on sexual health, mental health and emotional wellbeing and access to any mental health services required.*
- b) NHS Scotland will scope the role and develop a competency framework for nurses of Looked After children and young people.*
- c) In partnership with NHS Scotland, Learning and Teaching Scotland will develop supports to ensure high quality sex and relationship education and drugs education.*

The Competency Framework Looked after and accommodated children and young people (LAAC) Nurses has been published, and work between NHS Health Scotland and Learning and Teaching Scotland on sexual health and relationship education is ongoing.

RECOMMENDATIONS

The Working Group has made the following recommendations, and these have been endorsed by the Implementation Board, of which I am a member, and by Ministers. The recommendations are:

- Each Territorial Health Board should nominate a Board Director who will take a corporate responsibility for Looked After children and young people and care leavers by 30 June 2009. Health Boards should let Child and Maternal Health Division know the name of the Director as soon as possible after that date.
- The Director will be responsible for ensuring that Health Boards fulfil their statutory duties under the Looked After Children Regulations 1996*. This will enable the Board, on the basis of information from local authority partners, to identify all Looked After children and young people and care leavers in their areas by 31 July 2009, including those who are Looked After at home and those placed from outwith their Health Board areas.
- The Director will also be responsible for the implementation of Next Step (a) under action 15 of *We Can and Must Do Better*, above. (Next steps (b) and (c) are in place)
- The Director will ensure that the Board offers every currently Looked After child and young person in their area a health assessment by April 2010. Any

new child or young person coming into the system from March 2010 should have a health assessment within 4 weeks of notification to the Health Board.

- The Director will ensure that the Board offers a mental health assessment to every Looked After child or young person. This recommendation should be phased in line with the implementation of “Mental Health of Children and Young People Framework for Promotion Prevention and Care“ (FPPC) by 2015.
- The Director will ensure that for every Looked After child or young person who has general and mental health needs identified as part of their health assessment, the person undertaking that health assessment takes responsibility for ensuring their care plan is delivered/coordinated as appropriate.
- The Director will ensure, using existing systems, that the performance of the Board in carrying out general and mental health assessments for Looked After children and young people, and the health outcomes of those assessments, is reported annually to the Scottish Government.

A health assessment template for Looked After Children, which Health Boards may wish to use, is currently being developed and will be issued in the near future.

Annex A sets out further background and the relevant section of “Better Health Better Care: Action Plan”.

Yours sincerely



Derek Feeley

Director of Healthcare Policy and Strategy

Background

At 31 March 2008 there were 14,886 children Looked After by local authorities. Of those, 43% were placed at home with parents, 16% were looked after by friends or relatives, 29% were Looked After by foster carers and 11% were in residential accommodation.

The Scottish Government is committed to ensuring all Looked After children and young people and care leavers get the support they need to enable them to be all they can be and to ensure that they are successful learners, confident individuals, effective contributors and responsible citizens. Historically, their outcomes across a range of indicators fall significantly below those of their peers.

It is essential that all services work together to improve outcomes for Looked After children and young people and care leavers, and this is reinforced in *These Are Our Bairns – guidance for community planning partnerships on how to be a good corporate parent* which was published on 9 September 2008. That guidance includes a chapter for health services and you will have received a copy together with a letter from Adam Ingram MSP, Minister for Children and Early Years. It can also be found at <http://www.scotland.gov.uk/Publications/2008/08/29115839/24>

Better Health, Better Care, Scottish Government, December 2007

www.scotland.gov.uk/Publications/2007/12/11103453/0

Our Most Vulnerable Children

We need to ensure a particular focus throughout early years and childhood on children who we know to be the most vulnerable in terms of health and wellbeing. These include disabled children, children who offend, children in homeless families, who are looked after or accommodated, who live in substance misusing households, are at risk in situations of domestic abuse and violence or live with parents who have mental health problems or learning disabilities. In many instances, these risk factors overlap and are strongly associated with poverty and deprivation. The new early years strategy will have a particular focus on improving outcomes for such groups and we will be working to ensure there is a continuum of care for vulnerable children and young people that supports them well beyond their early years.

Health for all Children (Hall 4) is a surveillance, assessment and need identification programme which provides NHS Boards with the foundation for working with young children, and the means of access to more intensive support for those with greater needs. We are working with NHS Quality Improvement Scotland to ensure its successful implementation and to support new ways of offering support through inter agency working.

We will work to ensure that our new strategies on drugs, alcohol and smoking prevention support the broader early years strategy and include approaches to protect children from the effects of substance misuse. This will, for example, include a commitment that NHS Boards will identify a lead maternity care professional to

help mothers stop drinking or smoking during pregnancy. In addition, we will implement the recommendations of Looked After Children and Young People: We Can and Must Do Better to improve the emotional, mental and physical health of these children and ensure that NHS Boards provide the support that the children require, including access to primary care and dentistry. As part of this commitment, NHS Education for Scotland has been commissioned to develop a competency framework to support the training and development of specialist nurses for looked after and accommodated children's nurses.

*The Looked After Children regulations are currently under review and are subject to consultation. NHS Boards will have considered their response to this consultation document, which is available at

<http://www.scotland.gov.uk/Publications/2008/10/27094011/0>

I would draw your attention in particular to the proposed Regulation 3 and Regulation 11 and accompanying schedules Regulation 3 which relates to the provision of health assessments to Looked After children and young people, and who can carry them out. Regulation 11 - proposes that every Looked After child should have a care plan and this must contain a medical report as required by the Regulations. In addition, where a local authority places a child who is looked after by them in a residential establishment, that authority must provide the person in charge of the residential establishment with written information about the child's background, health and mental and emotional development.

For more information on Looked After children and young people and care leavers, national developments and opportunities to network with other professionals, go to www.LTScotland.org.uk/lookedafterchildren .