

Lambeth Children Social Care's update to the recommendations made by Healthwatch Lambeth on improving the performance on Initial Health Assessment (IHA).

## Background:

In Lambeth, there are 352 looked after children as of March 2019, 166 of whom were children who became looked after in that year (Evelina Hospital data 2019). Of the 166 children, 143 (86%) had their Initial Health Assessment. However, only 37% of those 143 children had their Initial Health Assessment (IHA) completed within the 20-day period. In addition, monitoring data on Review Health Assessments for children who have been in care for at least 6 months show that only 281 (69%) children and young people attended the Review Health Assessment (RHA).

Healthwatch Lambeth in conjunction with the commissioning officer of Looked After Children Service and Mary Sheridan Centre held 11 group interviews in July/August 2019 with a total of 61 social workers, team managers, Business Support Officers, and Independent Reviewing Officers in Children's Social Services. The interviews were aimed at determining the views of social care staff working with Looked after Children and Young People on the challenges faced in achieving the target for Initial Health Assessment within the 20-day period as required by the Care Planning, Placement and Case Review (England).

Findings from the interviews showed that there is a need to improve social workers' understanding of the IHA process and to improve communication across health and social care staff. The role of the Business Support Officers (BSO) and Independent Reviewing Officers (IRO) in supporting social workers to ensure referrals are made on time was also identified as a need.

## Recommendations

- 1. Learning and Development Develop and implement a robust rolling training programme for all social workers including an induction programme and provide opportunities for sharing knowledge through workshops and short seminars.
- 2. Communication and Referral Forms Develop a consistent approach to information sharing including a clear an organisational structure to show line management responsibilities and accountabilities and improving communication across health and social care.
- 3. Roles and Responsibilities Revisit the role of the BSOs including line management responsibility and having a more proactive engagement with staff of Mary Sheridan Centre.



## Lambeth Children Social Care's update on the above recommendations

In a meeting with representative from CSC in July 2020, the following update had been discussed:

- 1. Training and communication- Children Social Care has reviewed the induction pack and as of 21<sup>st</sup> August 2020, all new staff will be inducted using the new pack. It also provides links to Practice Hub and guidance on where relevant forms can be accessed. Managers monitor the staff's attendance in training and information during supervision meetings to ensure that all are aware of the IHA process. In addition, the designated doctor at Mary Sheridan Centre also holds regular meetings and training sessions for all social workers, BSOs, and IROs, including understanding of health recommendations.
- 2. Monitoring Referrals of children is being monitored by team managers and IHA referrals has also been added as a Key Performance Indicator. There are different layers of monitoring such as through the practice and performance board that meets monthly, quality assurance board, improvement board, and corporate parenting board who all oversee and scrutinise attainment of targets.
- 3. Roles and clarity of accountability One Assistant Director takes the lead for improving performance on IHAs. Between January and May 2020, there was a dip in performance as children who have been placed with family under private arrangements were deemed to be looked after following a review. This meant their Child Looked After status was back dated and the IHA was inevitably out of time. Training has been provided to social workers and managers to identify when a child is placed with alternative family members under private arrangements made by the family and when these children placed with connected carers become looked after.
- 4. The designated doctor also takes time to write/talk to young people to encourage take up of the IHA referral. The Director of Children services has a designated Business Support Officer who acts as a Health Champion. There is also a plan for the Corporate Parenting Board in the next few months to allocate an elected member as champion.

In general, Children Social Care has improved systems and processes to ensure that looked after children and young people are referred for IHA within the 20-day period. Some improvements had been recorded in the last few months and continued to be monitored to ensure consistency in performance. The tables below provide data on performance for IHAs and RHAs for the last 3 years and both show a trajectory of slight improvement. Children Social Care is still amending systems to achieve consistency.





