Nottingham City Council



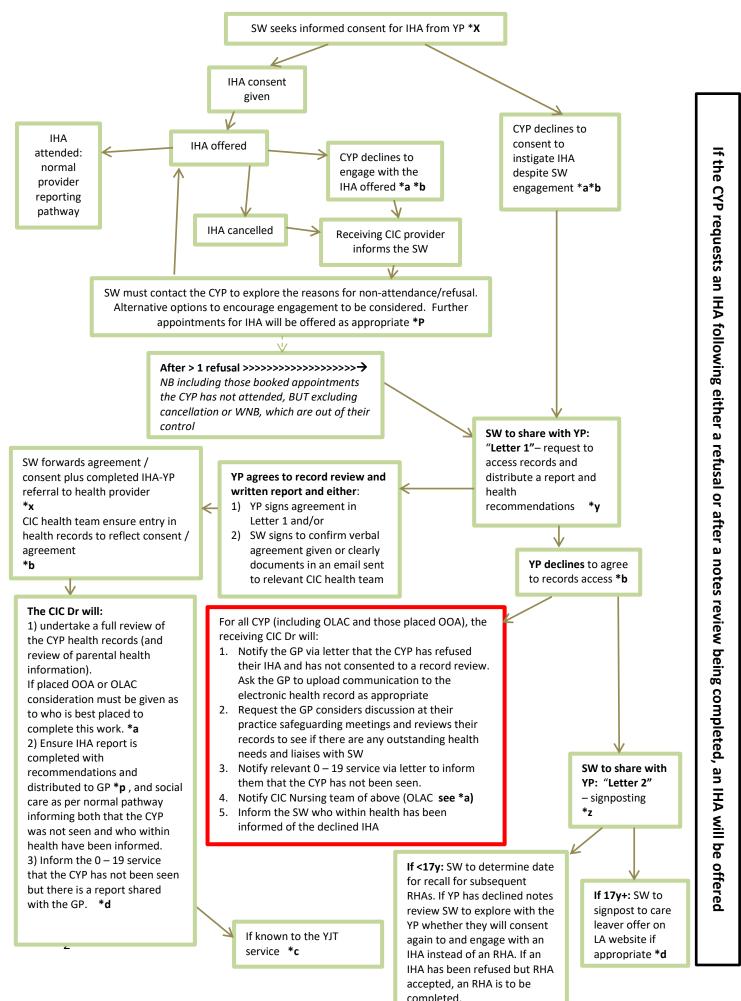


# YOUNG PEOPLE IN CARE WHO DECLINE STATUTORY HEALTH ASSESSMENTS

# Pathway for the Local Authorities and Health Providers in Nottinghamshire and Nottingham City

V18 14.09.21 (Led by Designated Professionals LAC)

# This pathway will be initiated when the Child or Young Person (CYP) declines to engage with their Initial Health Assessment (IHA)



# \*a Child (OLAC)

# **Other Local Authority**

If OLAC, the originating referrer (responsible health team) must be informed by receiving health providers of non-engagement. A decision about how to proceed to be made following discussion with originating health team (availability of information and health records) e.g. follow local decliner pathway or return to originating health team.

If OLAC, the CYP will not currently be referred onto the nursing caseload therefore good liaison must take place between the CIC health provider and the GP / 0 – 19 service.

# \*c Youth Justice Service/ Specialist Nurse

If open to the YJS, liaison undertaken with the YJ nurse to consider whether they could support with facilitation of the health assessment and update on any relevant health issues if in contact with the CYP.

## \*d Care Leaver

If the CYP is over 17 years of age and living in area, the SW to provide CYP with copy of information to support access to local services (originating from CIC Medical Team). The SW will share the local offer (some elements of the offer are available for OLAC however they will have support from their originating local authority).

# \*x Informed consent for IHA

Social workers to use appropriate consent process/forms and request documentation from their agreed local procedure to instigate a statutory initial health assessment. This includes consent to:

- 1. Undertake an IHA consultation (IHA-YP / consent)
- 2. Access CYP health records and share a report
- 3. Demographic information (IHA-YP)

NB – specific consent is required from each birth parent to access and share their health information, ideally with a completed Parental Health Questionnaire attached for each parent. Information about parents cannot be included in an IHA report without this.

# \*b LAC Review Meetings

Social workers and IROs must discuss the nonengagement at the following Looked after review meeting. Health representation is crucial at this meeting; especially in transition from care therefore every effort should be made to ensure appropriate health representation/ report is at the meeting. Social care must ensure that risks and vulnerabilities are reviewed and documented at the LAC reviews and that the young person receives support to enable them to address any health concerns.

Further offers of an IHA should be an on-going action from the LAR meeting as the CYP may change their mind at any point (even if subsequent RHAs have been completed).

# \*p

#### Non face to face consultation

Consider whether the YP would engage with a non-face to face assessment (acknowledging that the physical element will be outstanding but becomes a health recommendation e.g. GP follow up)

#### **00**A

If the CYP is placed out of area, the appointments offered will be dependent on the external health provider.

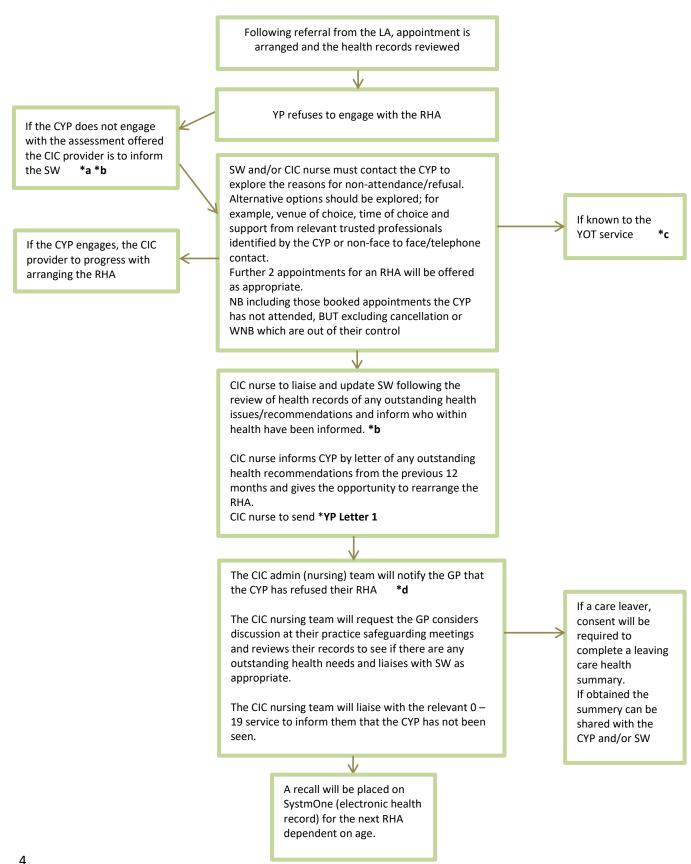
#### Abbreviations:

CYP	Child or young person
CIC	Children in Care
IHA	Initial health assessment
RHA	Review health assessment
YP	Young person
SW	Social worker
CIC	Children in care
OLAC	Other local authority child
LAC	Looked after child
ΥJΤ	Youth justice team
00A	Out of area
LA	Local authority

# \*y Decliner Letter 1 YP Agrees to Record Review and Written Assessment

\*z Decliner Letter 2 YP Does not agree to Record Review or Written Assessment

# This pathway will be initiated when the Child or Young Person (CYP) declines to engage with their Review Health Assessment



## \*a OLAC

If OLAC, the originating authority must be informed by health providers of non-engagement. If OLAC, the originating referrer (responsible health team) must be informed by receiving health providers of nonengagement. A decision about how to proceed to be made following discussion with originating health team (availability of information and health records) e.g. follow local decliner pathway or return to originating health team.

# \*c Youth Justice Service

If open to the YJS, liaison undertaken with the YJ nurse to consider whether they could support with facilitation of the health assessment and update on any relevant health issues if in contact with the CYP.

#### **Abbreviations:**

CIC	Children in Care
CYP	Child or young person
RHA	Review health assessment
ΥP	Young person
SW	Social worker
CIC	Children in care
OLAC	Other local authority child
LAC	Looked after child
YJT	Youth justice team
00A	Out of area
LA	Local authority

#### \*b LAC Review Meetings

Social care must discuss at the following LAC review the non-engagement. Health representation is crucial; especially in transition from care therefore every effort should be made to ensure appropriate health representation is at the meeting. Social care must ensure that risks and vulnerabilities are reviewed and documented at the LAC reviews and that the young person receives support to enable them to address any health concerns.

#### Care Leaver

\*d

If the CYP is over 17 years of age "important health information" is to be offered by the CIC admin (nursing team) to the SW and GP as per distribution pathway and **\*YP Letter 2** sent to the YP by CIC nurse. This includes those placed OOA.

Consent will be required to complete a leaving care health summary.

If living in area, information to support accessing local services to be sent by the CIC admin (Nurse) to the SW for sharing with the CYP. The SW will share the local offer once in place.

If OLAC, information to support accessing local services to be sent by the CIC admin (Nurse) to the SW for the CYP to distribute. The SW will share the local offer (some elements of the offer are available for OLAC however they will have support from their originating local authority).

\*YP Letter 1 Decliner Review of Health Assessment

\*YP Letter 2 Decliner Final Review of Health Assessment