



Improving health and well-being outcomes of children under five years of age looked after in the care of local authorities.

Context

The paper is based on a facilitated discussion with looked after children services staff, care leaving managers and looked after children's nurses as part of the Yorkshire and the Humber Healthy Care Learning Network. It outlines a range of pre care experiences and consequent poor health outcomes experienced by children in early years; identifies key professionals who have contact with children in early years, and others who may meet them in the course of their work. The paper suggests some effective practice issues to improve health and well-being and future actions. The policy and statistical base for the work is not included.

Suggested reasons for children birth- 5yrs coming into care.

- Mental health of parents – particularly mothers.
- Alcohol and substance using parents.
- Mother living with a violent or abusing partner so unable to provide safe care.
- High levels of domestic violence, especially during pregnancy and early years.
- Young people in and leaving care, especially those under 18 yrs are often thought not able to care adequately for their babies, because of their own lack of parenting and attachment, as well as grandparent support.
- Lengthy court processes for adoption; necessitating children remaining in foster care in pre - adoption placements for many months/years.
- Neglect, abuse and safeguarding from harm and abuse.
- Non accidental injuries and contact with Accident and Emergency Depts.
- Youth offending by mother, with possible custodial sentence.

All these issues can have a negative impact on the health and well-being of the child resulting in possible:

- Attachment difficulties with consequent problems for future relationships and difficult to manage behaviours.
- Emotional brain development affected by relationships with inconsistent care, nurture and love.
- Pre-birth damage to the baby resulting from mother's poor health behaviours.
- Separation of child from mother, lack of bonding and breast feeding.
- Birth traumas and anxious babies often caused by domestic violence.
- Low birth weights, and early poor thriving.
- Early trauma caused by addiction in utero requiring withdrawal from mother's substance addiction after birth.
- Trauma of contact visits with birth parents resulting in troubled behaviours.
- Poor health development, including speech and language, dental care, immunisations and nutrition.
- Poor sense of identity because of lack of stable relationships with parent, siblings and extended family, especially grand parents.

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As has been suggested above, babies and children under five years are greatly affected by their home care, key carers and families. For those who are vulnerable and need to be safeguarded through care, adoption or family support the following professionals are in contact with babies and children under five years looked after by local authorities.

Key Professionals	Contact areas	Activity area
Foster carers (and their families)	Home care to provide substitute family based care and nurture to improve all life chances and provide a healthy care environment	Day to day care, support and advocacy for a child. Role modelling, 24/7 care, pre - adoption work, parent assessment of young parent.
Social workers – for child and for carer	Responsibility for child's well - being, and for care placement. Contribute to Common Assessment Framework	Responsibility for child's care planning and welfare in care. Preparation for adoption and adoption process if applicable.
Health visitors Midwives	Early years child health development in the community. Pilots of Family Nurse Partnerships (FNP). Carry out Common Assessments	Health monitoring and support to mother and baby/child including early developmental milestones. Implementation of child health strategy for all children.
Looked after children's nurses	Health planning and looked after health service.	Work in early years varies in different LAs and PCTs. Nurses may be involved with mothers in care as well as babies/ children.
Paediatrician/Designated Doctor for Looked after Children	Health assessment and health planning as part of the child's care plan on reception into care.	Overall responsibility for diagnosis of health needs and health assessments of all looked after children
Nursery workers / early years staff	Nurseries and children's centres	Providing out of home education and development support for all children under five
Children Centre staff	Links to care services vary	Out of home child and family support to improve outcomes for vulnerable children under 8yrs
LA Play workers and early arts	Links to care vary	Should form part of the care plan to support involvement.
Therapeutic staff in CAMHS, speech and language, dentistry etc	Services vary in PCTs. Health and care plan should include their specific input.	Contribute to health planning and service delivery
Parenting Support Workers	Wide range of initiatives including Family Intervention Projects, Triple P, Parenting Support Advisors etc	Early identification and support to children and families

Possible actions to improve outcomes for children looked after in early years, through access to universal and targeted services.

- Listen to babies and young children using a variety of communication media – including the use of the creative arts and play.
- Provide “listening training” to key professionals.
- Consider links and opportunities with the wider safeguarding agenda for the training of a wide range of staff to listen to children in early years, and refer appropriately.

- Increase the knowledge and skills of social workers in child development – especially in relation to early childhood.
- Ensure that care reviews of babies and children are effective.
- Ensure early identification of mental health difficulties including ADHD and autism through health professionals to ensure children and parents are supported and so reduce numbers of children identified with disruptive behaviours in education.
- Share evidence to inform practice ie what do we know about risks to healthy child development, what works and how do we show and share it has worked.

- Provide adequate support to foster carers and their own children.
- Support for foster carers as parenting role models for young parents.
- Identify how effectively foster carers link to parenting programmes, children’s centres and nurseries to support good practice in early years development.
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- Provide appropriate support to mother, father and carers whilst care or adoption proceedings are in progress.
- Provide young parents with training about parenting, including how to play with and communicate with their babies and young children.
- Address poor levels of hygiene and personal care by mother for herself and her baby/child e.g. hand washing, feeding, and toileting.
- Address support and advice for young parents including providing safe substitute care/ baby sitting.

**Helen Chambers, Principal Officer, NCB hchambers@ncb.org.uk
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