

Multi Agency Case Audit

6 Step Briefing

Looked After Children – Out of County

Theme / Cases

- Themes are based on priorities identified by the NSCB and Quality Assurance Sub Group.
- Quality Assurance Sub Group members nominate cases.

The Process

- The selected cases were circulated to MACA members and each member was asked to produce evidence of their engagement with the young person. A summary report was produced and in addition, each agency was asked to consider specific questions in terms of their historic and current engagement with the young person, where relevant.
- The group reviewed each case and held a 25 minute discussion which included a summary of the current situation for the young person, any additional agency views and focus on what worked for the young person and what needed to improve to support Looked After Children placed out of Northamptonshire.

The Identified Strengths

Case 1

- The allocated Social Worker is fully engaged and committed in spite of this young person's challenging behaviour. Contact is more frequent than the statutory requirement.
- In terms of management oversight, the Independent Reviewing Officer is engaged and has been included in a number of case discussions.
- In reviewing this case, it was felt everything that can be done to keep this young person safe, has been done.
- The Voice of the Child is well recorded by Health colleagues regarding medical procedures.

Case 2

- Mental Health diversion has been provided by the Youth Offending Service.
- Up until recently, the same provider has worked well and consistently with this young person.

Case 3

- The young person is engaging well with their Social Worker, is settled and making progress.
- They are receiving good support from their current placement.
- There is a plan in place for a managed return to county (to an appropriate placement) post GCSE.

Case 4

- CAMHS outreach out of county is providing support to this young person.
- The young person has had the same Social Worker since December 2016.
- Independent Return Interviews and follow up visits have been offered – albeit unsuccessfully.

Case 5

- This young person has a good relationship with their Social Worker. The Pre-Birth Assessment has been completed and a Child in Need plan put in place.
- They are settled in a Mother and Baby residential placement.
- She is engaging well with the Family Nurse Partnership Team.
- Whilst this case did not meet the threshold for RISE support, an engagement worker has visited anyway.
- Incidences of missing have now stopped.
- The young person has given up smoking, drinking and drugs during pregnancy.

Case 6

- The young person is engaging well with therapy provided by their current placement.
- They have a stable relationship with their Social Worker and Independent Reviewing Officer.

The Findings

Case 1

- This young person had a troubled and unsettled childhood due to paternal violence and drug abuse.
- Mother asserts the young person has ASD / ADHD. This is noted in records however, the assessment has not yet been completed. It is likely that the young person's behaviour is related to early trauma and attachment rather than cognitive issues.
- Incidences of missing have decreased significantly since the young person has been placed out of county, but it is harder to carry out Independent Return Interviews.
- They have a good relationship with current Social Worker however, this young person has had many changes in Social Workers since first coming into Children's Social Care.

Case 2

- This young person was placed out of county due to engagement with previous gang associations.
- Incidences of going missing are becoming longer in duration, with evidence of anti-social behaviour, gang association and criminal damage while missing. This behaviour has led to the termination of the young person's current placement and he is now in crisis care. Independent Return Interviews had been carried out whilst in county, but he is refusing to engage with Barnardo's team.
- He has a Personal Advisor who visits every eight weeks, however, this needs to be more frequent.
- He currently receives visits from their Social Worker every 6 weeks.
- A number of educational placements have been arranged, however none have lasted more than a few weeks. The young person is now waiting to start an apprenticeship.
- The young person has a diagnosis of ASD / ADHD and is on medication. Interaction with local LAC Health Team is required.

Case 3

- This young person was placed out of county primarily due to being at high risk of CSE and repeated incidences of going missing. Early records indicate a chaotic and possibly violent home life with clear indicators of neglect.
- She is engaging well in the current placement and is back in education with good predicted GCSEs.
- Contact with her Mother arranged via proxy only.
- Contact with Mental Health Services has been suggested in relation to a previous attack, however, the young person is reluctant to engage - perhaps put off by the term "Mental Health".
- Her Social Worker has recorded the young person is now very resilient and well adjusted. She has had good support in her current placement and good engagement with RISE.

Case 4

- This young person was initially placed with their grandparent following the death of their mother. Father is unknown.
- The young person has had 18 placements for varying reasons and is currently placed out of county as they have been considered to be at high risk due to a potentially abusive relationship.
- A number of Independent Return Interviews have been offered and a number of visits made by the Northamptonshire Missing Team, but the young person has refused to engage. The Social Worker visits monthly but repeated incidences of going missing mean that the young person is not always available.
- The host Local Authority does not work with out of county children in their area. RISE are doing what they can to signpost the young person to appropriate support.
- The young person is now approaching their 18th birthday when services will change and may prove harder to provide.

Case 5

- Father is a known drug user who has encouraged similar behaviour in his child. There has been limited supervised contact with Mother.
- The young person was previously chaotic and aggressive but is now settled in a Mother and Baby placement. Positive work has been undertaken by Social Worker. The Pre-Birth Assessment has been completed and plans put in place.
- The plan is for this young person to remain in the Mother and Baby residential unit until she reaches 17 years of age, then she will work with a Personal Advisor to live semi independently.
- This young person has underlying mental health issues. Commissioning was put in place for a psychological evaluation but funding has since been withdrawn.

- The young person would like to move nearer to her Mother, however, this would still leave her out of county, in an area where there is no Family Nurse Partnership provision.
- The young person is not currently in education as preparing for the birth of the baby. She has given up drugs, alcohol and smoking.
- Whilst this case did not reach the threshold for RISE support, the young person was visited by a RISE caseworker.

Case 6

- This young person was removed from Mother due to risk of familial CSA and then subsequently moved from a family friend placement for a similar reason. The Mother is unable to understand the level of risk. Father deceased. Bereavement counselling offered once and declined.
- There was an incident of physical abuse whilst in foster care placement.
- The young person is currently in a therapeutic placement. Since coming into care, the young person has had 11 placements which has meant six school changes.
- The young person has been recommended for a Learning Assessment, however, she has refused to engage with cognitive assessment. A further assessment has proved difficult due to the number of placement moves.

Recommendation as a Result of this Multi-agency Case Audit

- Commissioning arrangements between Northamptonshire County Council and Looked After Children health colleagues needs to be improved. There were a number of cases where the information sharing and placement support e.g. associated therapies, assessments was not co-ordinated as well as it could be.
- All historical factors and assessments should be used to inform placement decisions including linking with EHCP Team and Health LAC team to ensure all working well together.
- Consideration for cognitive assessments to inform requirements from placement and education - A high level of placement disruption goes hand in hand with a lack of engagement in Education. Young people seem to drift in their education with limited focus.
- The impact of trauma on a number of the cases reviewed was recognised. This impact needs to be better understood with appropriate support services identified and put in place.
- Review increasing provision in Northamptonshire – this would reduce the risk of young people are going missing from their placements to return to Northamptonshire.
- Engaging with young people is crucial, combined with clear, accurate record keeping.
- Use of language – Inappropriate wording was used in assessments and greater consideration needs to be given to focus on the strengths of the young people.
- In general, Return Home Interviews offered poor service quality. This provision needs to be reviewed and improved.
- There needs to be a clear recording and understanding of a young person's diagnosis confirmed by a suitably qualified health practitioner and not taking the parent's comments as being accurate.