

## **Health and Wellbeing Board**

**26 June 2025**

### **Improving Outcomes for Children in Care and Care Leavers**

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#### **Summary**

This report will provide the Health and Wellbeing Board with an overview of the support and intervention available to improve the outcomes for Children in Care and Care Leavers, when considering their health and wellbeing needs, whilst considering the impact of poverty and inequality.

At the end of April 2025 there were 497 children in care aged 15-17 in the 16+ service, and 200 care leavers aged 18-25.

Children in care are allocated to social workers in the service and are allocated to personal advisors aged 18+ as care leavers.

#### **1. Recommendations**

- 1.1. The Health and Wellbeing Board is asked to note the information within the report in relation to the health and Wellbeing needs of Medway's Children in Care and Care Leavers.
- 1.2. The Health and Wellbeing Board is asked to consider the impact that their service has on the health and wellbeing needs of Medway's Children in Care and Care Leavers.

## 2. Budget and policy framework

- 2.1 The Children and Social Work Act 2017 placed a duty on local authorities to have seven Corporate Parenting principles when exercising a function to children in care and care experienced young people.

The principles are:

- ✓ To act in the best interests and promote the physical and mental health and wellbeing of those children and young people.
  - ✓ To encourage those children and young people to express their views, wishes and feelings.
  - ✓ To take into account the views, wishes and feelings of those children and young people.
  - ✓ To help those children and young people gain access to and make the best use of services provided by the Local Authority and its relevant partners.
  - ✓ To promote high aspirations, and seek to secure the best outcomes, for those children and young people.
  - ✓ For those children and young people to be safe, and for stability in their home lives, relationships and education or work; and
  - ✓ To prepare those children and young people for adulthood and independent living.
- 2.2 The Children and Social Work Act 2017 extended Local Authorities' duties to offer advice and support to young people up to the age of 25 years irrespective of being in education or not. This Act requires Local Authorities to publish a Local offer for care leavers.
- 2.3 The Council has duties to provide support to care experienced young people under the Children Act 1989 and the Children and Social Work Act 2017. The Children and Social Act 2027 requires Local Authorities to publish a Local offer for care leavers.
- 2.4 The Children Act 1989 and the Children (Leaving Care) Act 2000 remain the general legal framework for young people in and leaving care. More recently legislation has been updated to supplement these provisions.
- 2.5 The guidance 'Working together to safeguard children 2018', highlights the need for collaboration among various agencies, ensuring effective communication and intervention for children.
- 2.6 Improving outcomes for those in vulnerable and disadvantaged groups, such as children in care and care leavers is an aspiration under priority theme 2: Reduce Poverty and inequality within the Joint Health and Wellbeing Strategy.

### 3. Background

- 3.1 Many looked after children come into care from families experiencing severe socio-economic hardship. This, coupled with their lived experiences and the trauma most of them have suffered in the care of their parents or care givers, significantly impact on their overall development, mental health, emotional well-being, and in turn, on the outcomes they achieve later in life.
- 3.2 Inequality for children in care and care leavers involves systemic disparities in outcomes and sometimes opportunities compared to children not in care. This may include:
- ✓ Poorer physical and mental health outcomes.
  - ✓ lower educational achievement and school stability.
  - ✓ higher rates of involvement in the criminal justice system.
  - ✓ reduced access to stable employment and secure housing post care.
  - ✓ discrimination and stigma based on the case status.
- 3.3 Both poverty and inequality are interconnected and reinforce each other, and place looked after children and care leavers at a significant disadvantage across many life domains.
- 3.4 Medway's children in care cohort, stood at 497 at the end of April 2025. The rate of children in care per 10,000 being 74.5. This is an increase compared to April 2024, when 486 children were in Medway's care, a rate of 72.9 per 10,000. Our numbers of children and young people in care have not reduced, as we have seen an increase in the number of our unaccompanied minors becoming looked after by the Local Authority, and this is in line with the National Transfer Scheme Medway is now part of. Medway's care leavers number supported by the council number stood at 200 in April 2025.
- 3.5 Improve the health and emotional well-being of children in care and young people and care leavers.

#### **Health assessments.**

- 3.6 "Improving children in care and care leavers' health and wellbeing by making sure they can access high quality services" is paramount; and as such this is one of the priorities in the Corporate Parenting Strategy. The Designated Consultant Nurse for Looked after Children represents the Integrated Care Board (ICB) at the Medway Corporate Parenting Board and provides the elected members with an understanding of the successes and challenges being experienced by children in care and the services commissioned to support them. The Annual Report on the health of Looked After Children is due to be published in August 2025.

- 3.7 A health sub-group of the Corporate Parenting Board was set up in October 2022 to provide a focus on health needs and outcomes. The sub-group is chaired by the Designated Consultant Nurse for Looked after Children and is attended by a range of professionals from health, commissioning, virtual school, independent reviewing service, children services and lead member for health. The focus of the subgroup is to scrutinise key performance indicators and explores ways in which service delivery can be further improved and children's needs met timely and efficiently.
- 3.8 There is more to do in respect of ensuring timely health assessment for children when they first enter care. The statutory timeframe to complete Initial Health Assessments (IHAs) for children and young people is within 20 working days of them entering care. IHAs are part of an on-going process of care planning which provides a view of children's health. A report and health care plan that becomes integral to managing each child's health is completed to address existing and previously undiagnosed health concerns. Medway Community Healthcare (MCH) are commissioned to provide the looked after children specialist team that undertakes the statutory health assessments and other work as detailed in the statutory guidance for children and young people in the care of Medway Council.
- 3.9 The services commissioned are for all of our children and young people in the care of Medway Local Authority, therefore they are responsible for arranging health assessments for any of our children placed in or out of area. The overall performance is mainly impacted in a negative way, by the timeliness of IHA undertaken when children are placed out of the area and it needs to be recognised, that it is not always possible to influence the timeline of providers in other areas who undertake the health assessment on our behalf. MCH also undertake IHA for all looked after children being placed in Medway by other local authorities and this can, sometimes, impact on capacity.
- 3.10 At 50% in March 2025, the IHA performance is currently below the target of 80% carried out within 20 working days, compared to 88% in April 2024. The performance in this area has fluctuated over the last 12 months, with the highest performance being achieved in December 2024, when 90% of the children who entered care had their Initial health assessment completed in the first 20 days. To improve performance, regular monitoring and tracking activity is taking place within the service, alongside bi monthly meetings with health colleagues.
- 3.11 A Review Health Assessment (RHA) is required every year for children and young people over the age of 5 years in our care, and every six months for children under the age of 5 years. RHAs provide an opportunity to reassess the child's health, address any health needs identified and check that the previous action plan has been completed. It also provides an opportunity for the child/young person and/or carer to discuss health concerns; physical, sexual, or emotional. The target for review health assessments is 95%. Timescales for RHAs have increased by 5 % in comparison to April 2024, sitting at 96%, above the set target in April 2025. Timely success to review health assessments for those children placed outside of Medway continues to

present a challenge, and this is raised at a national level with NHS England. It should be noted that some older children choose not to participate in their review health assessment.

### **Dental Checks**

- 3.12 Performance for dental checks currently shows that as of April 2025 88% of children in care have an updated dental check within the last twelve months. This shows a slight increase in comparison to 85% achieved in April 2024. The service monitors dental checks through regular performance clinics. Additional dental sessions are available to children in care with support for access. Dental checks are now also being monitored via the service's weekly performance meetings.
- 3.13 To continue to raise awareness in this area with professionals, children, young people and carers, and to increase access to dental services we hold regular meetings with Oral health colleagues to look at trends, reasons for non-attendance/ non engagement and explore how, with support from public health, we can raise awareness regarding importance of oral health. Reminders to parents and carers about the importance of these appointments are being sent out by the service and supported by our fostering colleagues.

### **Substance misuse**

- 3.14 Safelives research briefing (2023) highlights that a significant proportion of young people who misuse substances have experienced adverse childhood experiences (exposure to parental substance misuse, parental mental health, domestic abuse, neglect, etc), including being in care. Children in care and care leavers are at greater risk, compared to their peers, to misuse substances and therefore face poorer social care outcomes.
- 3.15 In Medway, Open Road- Medway young people's service offer help and advice to young people who experience issues regarding alcohol and drugs. This is an universal service, available to all children and young people residing in Medway. The service offers confidential advice and support. The young person can self-refer or can be referred by a professional or someone they trust subject to consent being given for the referral to be made. Some of the services Open road offer to children and young include:
- ✓ Advice and Information
  - ✓ One-to-One with a specialist Substance Misuse Worker
  - ✓ Group work
  - ✓ Sexual health advice
  - ✓ Help to access other services
- 3.16 Some of our Children in Care are placed outside Medway and where this is the case, similar universal services are accessed to ensure young people receive the advice, information and support required.

- 3.17 The children looked after nurse, the allocated social worker and the child's carers play an important role in supporting the young person to understand the risks around substance misuse and to encourage and support them in engaging with services to address these issues.

### **Emotional wellbeing and mental health.**

- 3.18 45% of looked after children meet the criteria for a possible mental health disorder, rising to 72% for those in residential care compared to 10% outside of the care system, (<https://www.nice.org.uk/guidance/ng205/evidence/e-interventions-and-approaches-to-support-practitioners-in-completing-physical-and-mental-health-and-wellbeing-assessments-and-act-on-findings-during-the-care-journey-for-looked-after-children-and-you-pdf-333471052701>(nice.org.uk). In line with statutory guidance, commissioned mental health services are required to prioritise looked after children and ensure that their care is uninterrupted should they move out of area. Kent and Medway Integrated Care Board (K&M ICB) have responsibility for ensuring access to mental health and emotional wellbeing support for children and young people.
- 3.19 At the end of March 2025, 97.8% of our children in care who have been in care for at least 12 months has been assessed by way of a Strengths and difficulties questionnaires. The Strengths and Difficulties Questionnaire (SDQ) is a brief behavioural psychological screening tool for 4–16-year-olds which provides a means of regularly measuring emotional and behavioural experiences of children in our care. The SDQ consists of 25 items on psychological attributes equally divided across five subscales measuring emotional symptoms, conduct problems, peer problems, hyperactivity/inattention and prosocial behaviour. A total score of 17 and over is a reliable indicator of emotional and behavioural difficulties. 45.5% of the children included in this cohort had a score of 17 and higher. Children whose SDQ present a score of 17 and over are supported via a number of mental health and well being services, in line with their assessed needs.
- 3.20 To respond to the children and young people's increased emotional well being and mental health needs, Partnership commissioning have implemented and embedded the i- THRIVE framework, this is supported by a i-THRIVE directory for Medway professionals to access, to ensure children and young people have appropriate and timely access to services and support. The areas of need range from *Getting Advice* to *Getting Risk* Support with certain services offering interventions and support in more than one area.

## i-TRIVE MODEL



- 3.21 Medway Young Peoples Well Being Service (MYPWS) are part of the North East London Foundation Trust (NELFT). This service is an NHS service that offer Mental Health assessment, interventions and evidence-based treatment to children and Young peoples aged 0-19 years in Medway, who are experiencing a range of challenging mental health difficulties or may require a diagnostic assessment for Neurodevelopmental conditions such as Autism or ADHD.
- 3.22 The Children and Young people who are seen by NELFT are usually significantly affected by Mental Health difficulties to the point that this is affecting their everyday life, like attending school or going out with friends. Not all mental health or emotional wellbeing difficulties need to be seen by NELFT and when this is the case they are supported by other services like SIT (Short intervention therapy), can access online support via KOOTH and their recent developed webapp QWELL. QWELL is a webapp that offers mental health support to parents, adults and care leavers: <https://explore.gwell.io/medway/> The service provides 24/7 access to support and counselling. QWELL is available for free to all care leavers in Medway. They don't need to see a GP and there are no waiting lists. There is a live chat available with a mental health professional 12pm to 10pm on weekdays, 6pm-10pm on weekends.

- 3.23 When the children and young people's mental health needs are such that NELFT criteria intervention and support is required, Children in Care are seen within a consultation clinic and seen within approximately 2 weeks of a referral. Children in Care are prioritised because of their status. Referrals will have an initial assessment and personalised care plans, offering an array of evidence-based interventions either in groups or 1-1, medication management, consultation for the network around the CYP and/or risk support depending on presentation and level of need.
- 3.24 Children in care are currently accessing support from the refreshed Short Intervention Team (SIT). This service is available to children and young people who are accessing children's social care, including children in care and care leavers, who are aged 5-18, or 18-25 for care leavers or those with SEN. The short intervention therapy can be CBT (Cognitive behavioural therapy), DBT (Dialectical behavioural therapy) and creative therapies.
- 3.25 The SIT impact report dated April 2025 highlighted that 1134 children and young people were supported within the last 12 months via CBT, DBT, Creative session, both group work and individual sessions. The service delivery includes children who are subject to children in need and child protection plans, playing a significant role in preventing children from becoming looked after.
- 3.26 Behavioural support will now be provided by Family Action, known as Small Steps in Medway. Children and young people, and their parents and carers, can get support both before and after assessment of ASC and ADHD. Those who do not meet the criteria for a formal diagnosis but still present with behavioural needs can also access support. The Positive Behavioural Support (PBS) offer is available to Medway Residents aged 5-19 years old, or up to 25-years-old for those with SEN.
- 3.27 The health and well-being of young people leaving care has consistently been found to be poorer than that of young people who have never been in care. Care leavers are likely to have additional mental and physical health needs, and the impact of their social circumstances may exacerbate these health issues (Caring for better health: <https://www.careleavers.com/wp-content/uploads/2017/12/Caring-for-Better-Health-Final-Report.pdf>). Care leavers have higher levels of teenage pregnancy, drug and alcohol abuse as well as being at risk of exploitation and poorer financial circumstances. Due to the increased vulnerability of this cohort of young people, there is a national driver to provide targeted mental health support and for this support to be provided by NELFT until the young person is 19 years of age to prevent transitions challenges.
- 3.28 Moving forwards is a Care Navigator pilot for care leavers being delivered in Medway and Thanet that sits within the 'Getting Help' aspect of the i-THRIVE framework. Care Leavers are supported by the service Navigators through a person-centred approach, identifying SMART goals and based on personal outcomes that include support around managing 'what to do in a crisis. A key focus is on empowering and equipping the young adults with tools and coping

strategies to support themselves in the future, building upon their resilience and connections within the community.

- 3.29 Medway's 16 + team are the main referrer with referrals also made by housing, probation, health as well as from the young adults themselves. Since January 2024 10 young adults have been referred from within Medway Local Authority and 17 young adults from out of area local authorities. Currently, the service is supporting 28 young adults and have seen through their outcome data that there has been a 47.19% decrease in anxiety symptoms, with 46% young adults expressing they feel they are able to deal with their problems, and 42% expressing a significant increase in life satisfaction.
- 3.30 The 16+ service have worked with Medway Community Healthcare to develop a specific 'care leavers pathway' which allows for the allocated nurse to continue to support the young person's health needs until they are 19 years old. The team now attends the Children and Families Hub at the Elaine centre once a week and have a private room for any health discussions to take place at the Elaine Centre. The Personal Advisors also invite the Looked After Children's Nurses to any young people's pathway planning meetings that they feel would benefit from any health support. The pathway promotes partnership working with the personal advisor to foster closer working relationships and avoid duplication for the young person.
- 3.31 There is also a national drive for free prescriptions for the young people who would not be otherwise eligible. Young people leaving care in Medway are provided with a personal health history, an important record of the young person's health from birth to their 18th birthday. In addition, information and advice on how to access universal health services and other services is provided alongside the personalised health history. Kent Community Health Foundation Trust (KCHFT) are commissioned to provide the health histories. In Medway 100% of young people who turned 18 between April 2023 and March 2024 received their health history before leaving care. Data for 2024-2025 is currently awaited, with the Annual health report due to be released in August 2025.
- 3.32 The emotional wellbeing and mental health offer to children in care and care leavers is aligned to their identified needs and the implementation of the Medway Therapeutic Alliance in 2026, will further strengthen the offer which in turn will contribute to achieving positive outcomes for children and young people.

#### 4. Advice and analysis

- 4.1 The overall health and wellbeing of children in care and care leavers has remained a key area of focus for children services and partners. The right level of scrutiny has been in place via the Corporate Parenting Board and relevant subgroups. The main area of focus remains in relation to ensuring that children have their initial health assessment within 20 days of them becoming looked after. Understanding the children in care's health needs

from the onset will better support the health care planning and that the right health services are available and accessed at the right time.

- 4.2 The review health assessments and dental checks will remain under increased scrutiny to ensure that we continue to deliver the right support and services, and the children and young people's overall health needs are met.
- 4.3 45.5% of all eligible children and young people who had an SDQ in 2024-2025 have had a score of 17 or higher which evidences the prevalence of emotional well-being and mental health needs for our children in care. This data does not include young people 16-year-old and over. This further evidence the significant need for services in this area and for children and young people access to mental health and emotional well being services to be facilitated in a timely manner. As aforementioned in this report, a separate pathway has been developed via NELFT and children in care are seen as a priority, which is positive. Moreover, NELFT support is available to young people until age of 19 which is key in terms of transitions and them not experiencing the 'cliff edge' where services stop when they turn 18.
- 4.4 Where children and young people move placements and NELFT is involved, there is the risk of the support ceasing until responsibility to offer support is assumed by the mental health provider in the area they are now residing. This means children and young people can experience a gap in support which may impact on their mental health. Therefore, every placement move is carefully considered and liaison with services in the new area is taking place at the earliest opportunity to prevent such gaps in services.
- 4.5 Work is being done with partners to increase awareness regarding accessing mental health and emotional well being services and break down myths and stigma around mental health and accessing services. This work is key to ensure children in care and care leavers access services in a timely manner and their needs are addressed and risk of escalation in their mental health is avoided.

## 5. Consultation

- 5.1 Children and young people are consulted with to look at services on offer and services that may be missing. This is done alongside Young Lives Foundation where appropriate.
- 5.2 When services are recommissioned, the children, young people, parents and carers' voices are also ascertained to inform service delivery.

## 6. Climate change implications

- 6.1 [The Council declared a climate change emergency in April 2019](#) - item 1038D refers, and has set a target for Medway to become carbon neutral by 2050.
- 6.2 There are no climate change implications arising from this report.

## 7. Financial implications

- 7.1 There are no direct financial implications arising from this report. The cost of delivering the substance misuse treatment services and behavioural support programmes are met from within existing public health funded revenue budgets and other specific targeted grants.

## 8. Legal implications

- 8.1 There are no direct legal implications arising as a result of this report

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### Appendices

None.

### Background papers

None.