

SUMMARY: Mental health needs assessment (MHNA) of adopted children & young people

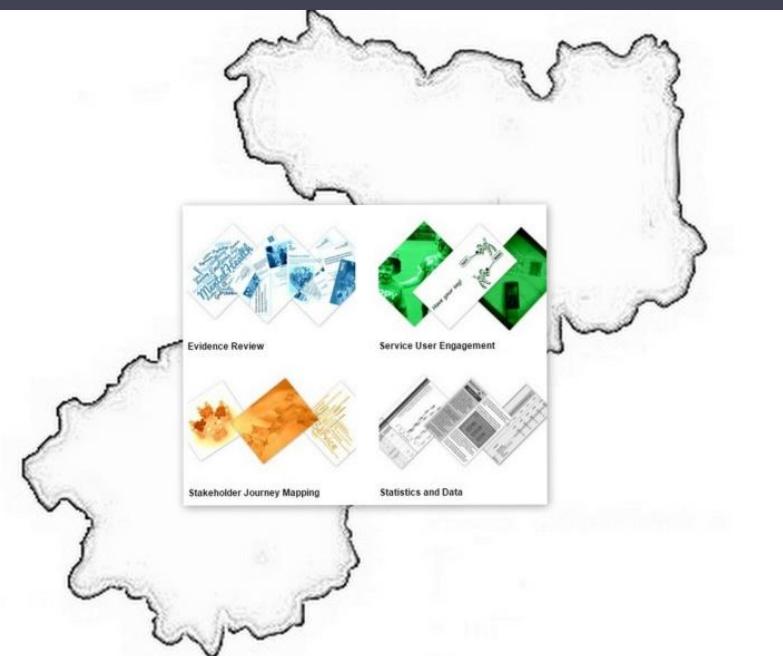
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Health and Wellbeing
Board presentation



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1. Approach

[A] Built a profile of local adoption intelligence & mental health

- including statistics on placements, breakdowns, requests for support >>

Adoption Timeline & Key Stats Cheshire East



National statistics for LAs are published in the LAC statistical first release (SFR) and Adoption Scorecards. These statistics tend to present headline performance measures, such as the time between a child entering care and moving in with an adoptive family. To supplement this profile the local request for statistics and intelligence sought further information around the type of adoption flows (into and out of area) as well as the type of adoption support being requested.



145 (355)

145 children started to be looked after in Cheshire East in 2014/15. 355 looked after in total in year. (Source: SFR 2014/15 stats - LAA1 /LAC1 tables. Rounded to nearest 5).

Child ENTERS CARE



693

693 days is average time between a child entering care and moving in with its adoptive family in Cheshire East (2012-15 average; Source: March 2016 Adoption Scorecard). England average is 593 days



196

196 days is average time between LA receiving court authority to place a child and the LA finding a match to an adoptive family in Cheshire East (2012-15 average; Source: March 2016 Adoption Scorecard). England average is 223 days



21 children adopted 2014/15, which is 17% of care leavers (Source: SFR 2014/15 stats - LAE1 table; and Adoption Team stats March 2016).

21

Adoption Order application made & child is LEGALLY ADOPTED



Sources: Adoption Scorecards (March 2016) raw data here: www.gov.uk/government/publications/adoption-scorecards. SFR statistics available here: <https://www.gov.uk/government/statistics/children-looked-after-in-england-including-adoption-2014-to-2015>

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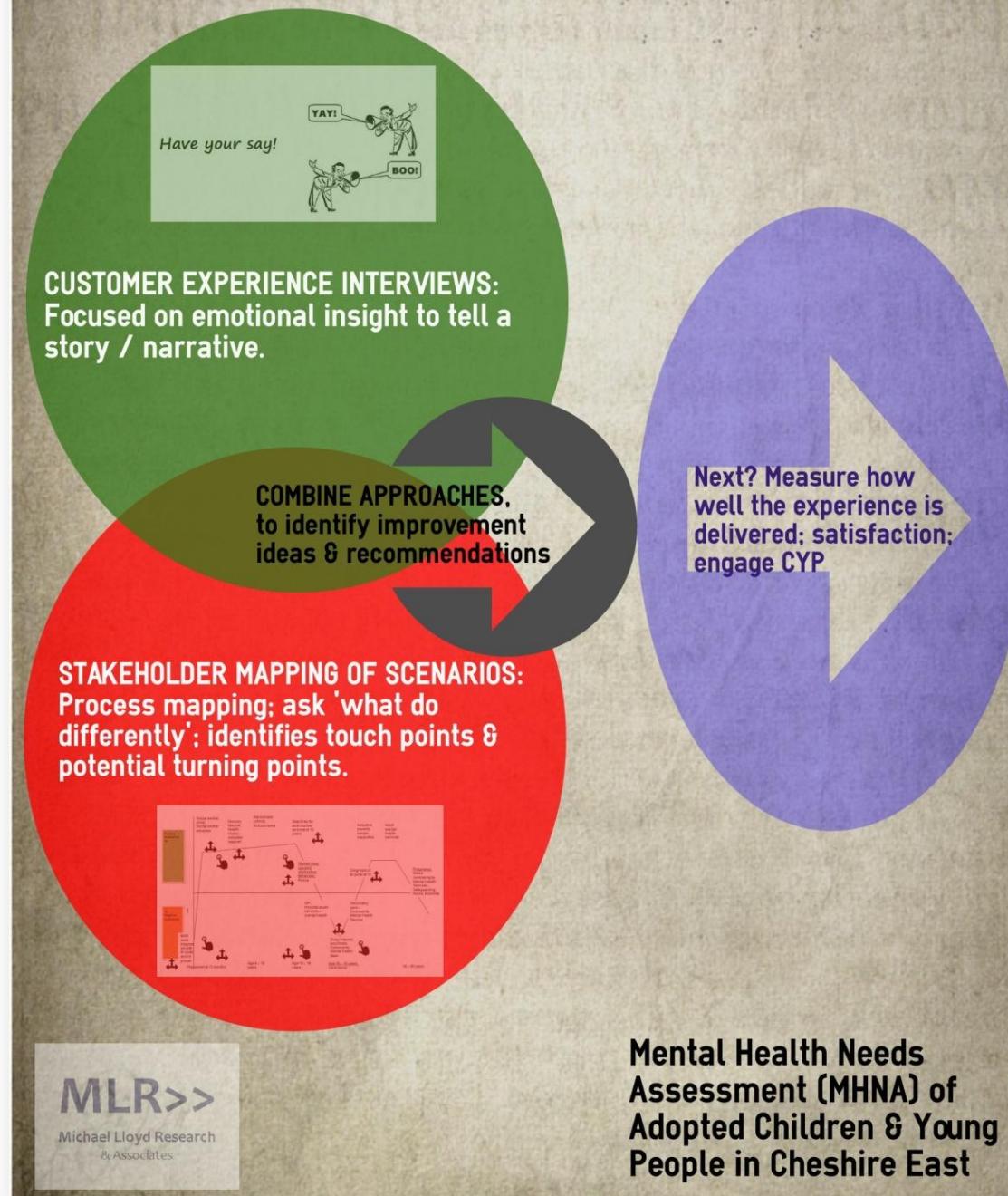
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Approachcontd

[B] Applied a participative & qualitative methodology of engagement

- Two key strands:
Strategic stakeholder journey mapping;
Parent / Carer 1-to-1s

Journey Mapping & Customer Experience Interviews



Approachcontd

What was missing?

- voice of the young people.
- statistics on mental health service referrals, service use or satisfaction.



2. Key Findings



"There should be a regular, at least twice a year, phone call to adoptive parents from somebody to say "how is the adoption going? How are you feeling about the adoption? How is the child settling into the home? Is there anything you need?"
(Adoptive parent)

In order for a comprehensive log of therapeutic support with adopted CYP to be developed, parents should be encouraged to bring the family back into the system.

[i] Communication and information sharing:

➤ Cascade awareness & understanding - e.g: do more with teachers; actively promote ASF.

➤ Develop a more integrated 'comms' strategy - e.g: between LAs; from LA to parents.

Key Findings

"The support offer includes an example of very good practice, with the support team having a higher level teaching assistant (HLTA) who works with schools to help them understand the needs of children who are adopted" (Ofsted Sept 2015).

..the training that teachers have needs to be greater because they aren't really aware
(Adoptive parent).
Recommend build on 22 school link pilots, emotionally healthy schools, HLTA training.

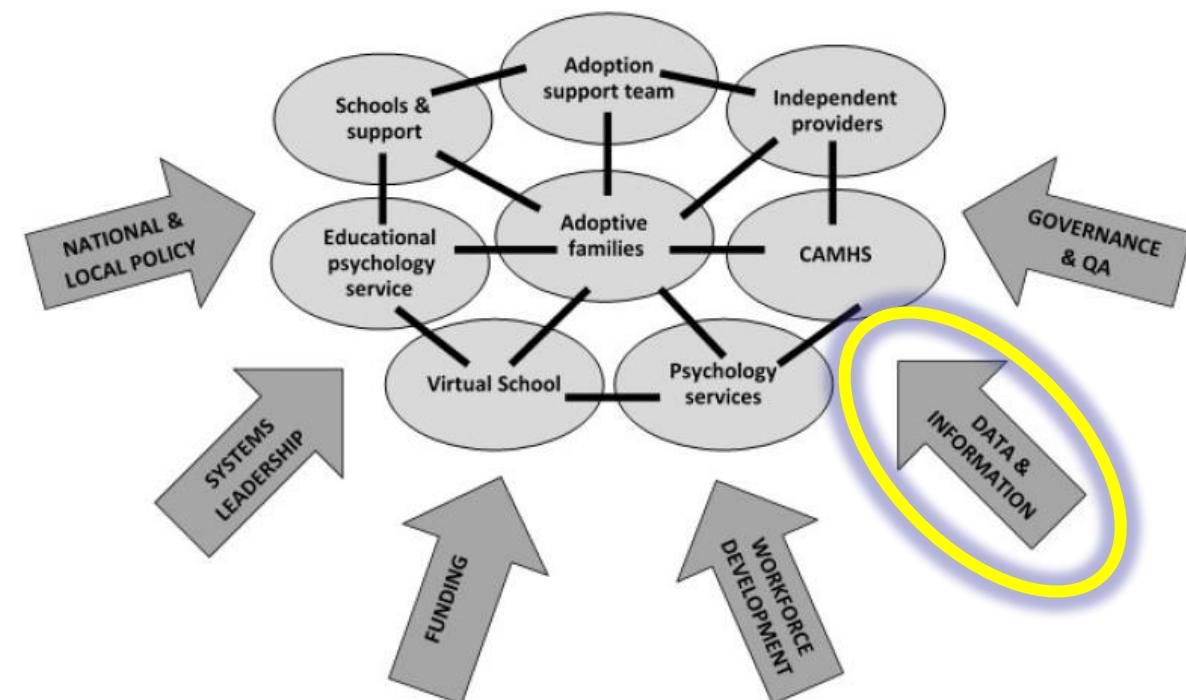


"parents need empowering but sometimes can go off on own and pick inappropriate solutions"
(stakeholder)

[ii] Promotion of training / learning resources:

- Build on notable practice - e.g: attachment course run by HLTA in Adoption Team.
- Promote the 'basics', as people self teach (!) - e.g: '5 minute tips'; MindEd, 'how to' guides.

Key Findings



[iii] Share more detailed monitoring data / intell:

- Multi-agency review of what's needed & when.
- Regionalisation requires better cross-border & cross-sector intell: right time to reassess use

3. Next steps

CCG -led review to follow on - fleshing out next steps.

Recommended gap filling in summer - to create a more integrated monitoring & evaluation plan.

- Why? Adopted CYP key group in statutory guidance on JSNA / JHWS.
- Ensure regular, systematic flow of customer intell to commissioners - to shape service provision.



Access the bespoke webpages for all reporting, research materials and infographics - here:

www.researchmlr.co.uk/adoptedcyp-mentalhealth/