

Learning Briefing 4

Synopsis of events that led to the case review

Poppy was a Looked after Child subject to a full care order and placed in a Secure Unit. Despite multi agency awareness of Poppy and her needs, agreement to funding an adult psychiatric placement and her approaching 18th birthday there was no placement found that was available for her to move to. It was necessary to assess Poppy under the Mental Health Act, when she attempted to leave the secure unit on the eve of her birthday, which found her to be detainable and this led to her spending her 18th birthday in a police cell awaiting a move to an emergency mental health placement that was not felt to be appropriate for her needs.

Key Messages- areas for development

- Key health organisations were not involved as they would be normally as a result of:
 - Out of Authority placements
 - Change of placements
 - The secure unit having its own arrangements
 - Poppy's refusal to engage and how we manage these situations in the future
- Lack of clear pathways from children to adults social care, including adult mental health
- A transition process/protocol is needed
- A joint planning meeting including all services was needed.
- Personnel/structure changes impact on relationships; this shouldn't be the case- we need to be more child focussed and creative in relation to this.
- Lay review panels role. Do they have the knowledge and understanding they need?



Key messages- good practice

- Poppy's assessment was very needs led however the issue was that nationally placements were saying they couldn't meet her identified needs.
- Consistent, committed IRO who made a difference to Poppy
- Good practice was that the MH practitioner was with Poppy during her day in a police cell
- There was good evidence of people communicating to progress Poppy's situation; however a meeting would have assisted this further

Recommendations for Practice:

To commission a review of process pathways and existing panels regarding transition in order to develop the 'Poppy Protocol'. This should clearly outline the protocol/process/escalation of the 'transition of complex cases' between the Clinical Commissioning Group and Social Care. This should include best practice guidelines.

To consider whether there could be a designated psychiatrist like there is a designated paediatrician for our Looked After Children. It has since been agreed that this will fall within the remit of the Designated Doctor for Looked After Children.

The Mental Health Code of Practice 2015 Chapter 19 should be available to non-mental health practitioners to enable them to have an understanding of the statutory guidance that needs to be taken into account when an assessment under the Mental Health Act is being proposed. This document can be located on the [South Gloucestershire Children Social Care Procedure Manual](#).

Multi- Agency meetings should be convened to share and plan for our children and young people

This review was commissioned by South Gloucestershire Serious Case Review Sub-Group and was undertaken in October 2015.