11/8/23 - Children with emerging mental health needs

The practice group this morning was dedicated to 2 specific agency / child situations that were shared in the forum. NAFP sought permission from both agencies that shared the brief stories to write the session in this way. The member introduced the situation to the group and the group then offered support around the scenarios. No child has been identified in this process. (names used are not the child's real name, nor was this disclosed during the discussion)

Child 1 - Adam , Carer 1 - Cathy

Adam has been refusing to engage with services, he has not been attending school and is excluded fairly regularly and school does not appear to understand his needs. Adam's bedroom is in a poor hygienic condition, he collects rubbish from the street and brings it into his room, he urinates in bottles and leaves them in his room, he has dismantled the bed and now just has the mattress on the floor. Adam will not sit down and eat with the foster carer Cathy. Adam has one like, Cadets - he will engage, he will prepare his own uniform.

Cathy is struggling, she says his needs have been emerging over time, she is willing to work with Adam and happy to have him, but she feels she is being blamed for how he is presenting and there is a lack of understanding or support. Cathy talks about the local authority social worker saying that Cathy does not know how to communicate with Adam, and tells Cathy things she should be doing that clearly does not work with Adam, for example

- Cathy cleans Adam's room - the social worker does not feel this is appropriate
- Cathy removes the urine bottles
- Cathy and Adam do not sit at a table to eat together - the social worker says there should be a food plan and should sit together to eat - Adam's response is that he never sat with his own family to eat so why would he sit with Cathy
- Notice has been served - less about Adam but more about the carer feeling "blamed" and a constant criticism of her care
- CCSW does not read the logs to get a fuller understanding
- Adam will not go to school - there is no alternative suggestions for learning opportunities

Reflective thoughts from group discussion

Adam's behaviour could be reverting back to what he was used to in his home environment, something that was familiar to him, although may seem unusual or unacceptable to some - this was his "norm" - he may need time to regress, to revert back to "his comforts"

School environment - not all young people can conform and be in such a disciplined setting, or learn in the same way - Adam has a "connection" - he has shown with cadets that he is able to follow instruction, have a reason to prepare his clothing etc - this needs to be nurtured and this needs to be everyone's "way in" to build a stronger connection with Adam

Vocational studying - is there an alternative to school - somewhere he can go a few days a week to undertake a practical course - eg cookery, mechanics, outdoor pursuits etc as an alternative to school

Mumsnet - provide an example of children who hoard rubbish - might be worth reading

Living in chaos - appears to be Adam's safer space - what he is used to - he is maybe not ready for "a tidy life" someone else's ideas of what is acceptable

Connection - continue to build eg what is it about cadets that he likes, use this as a foundation- there appears to be too much time thinking about the negatives the problems with Adam - find the spark of what makes Adam a great young man

Identity / culture - our thoughts, our way of living life could be different - we are not all the same - how do we understand other cultures and important elements of identity (however this does not replace safeguarding concerns)

Our own guilt and thoughts of what is acceptable - what we see as the correct way - our expectations and clearly the LASW expectations of the foster carer - eg we will sit at a table and eat

Independence - appreciate that we teach children to manage chores, tasks - but we also have a duty of care and nurture - and it could be completely acceptable for the carer to go into Adam's room and do the things she is doing to get him through this difficult time, work with Adam on a safety plan - what does he think is acceptable and how does he see Cathy's role and intervention etc

Understanding patterns of behaviour - ensure recording - intervention meetings and evidence building that can only support any future assessments in relation to mental health - ensure recording is robust and sharing with appropriate people to inform

Escalation policy - senior manager from the agency to contact the LA child care lead and inform them of their concerns and why this has led to the breakdown of the care Cathy can continue to offer Adam - minute discussion and advise that will be writing the concerns down, evidence what the agency has done to support Cathy with Adam etc

Child 2 - Ben , Carer 2 - Mr and Mrs D

Ben is 14, his behaviour is becoming worrying, when heightened he says he "wants to kill everyone he sees" he describes it as "feels like his head has been hit with a brick" - he is making more threats and there are incidents of anger and lashing out. The agency is concerned about the safety of all, and made requests to the LA in relation to mental health assessments - which to date have not taken place. There have been a few incidents, but these are usually managed as Ben is with his carers 24 hours a day and they can see if he is triggered.

Ben is due to go on holiday with Mr and Mrs D and their other foster child to Turkey - The agency does not support this and feel the risks are too great, however the LA are saying that Ben should go on the holiday with his carers.

Reflective thoughts from group discussion

Should Ben be going on holiday abroad - most of the group shared the concern of Ben going abroad at this time. When children are taken out of their "comfort zone" it creates anxiety, they are faced with the unknown. Going on a plane can be a scary experience, holidays are fun but routines are likely to be different, sleeping arrangements are different, meal times and activities, sleep patterns are also likely to change - all could be a trigger.

LA risk assessment - the agency has been requesting this and it is now being completed, however, the group felt that this decision was not the LA's to make - the carers should not be put in this situation in a foreign country where support could be limited and if Ben is to lash out or become angry whilst away he could be arrested and there is likely to be a lack of understanding. If the agency is worried about this situation and can provide evidence that this should not be taking place then they should also voice that this holiday will not be happening. Either the holiday should be postponed for all, or a respite arrangement should be considered (this is also likely to trigger Ben, but the safety element needs to be considered fully) - respite arrangements are not considered as the carers say the safest place for Ben is next to them. They are clearly committed to him and he has been with them a long time, but his behaviour is escalating and there is a lack of support in relation to mental health services. The carers need to do the right thing for all and consider if this holiday should really be happening

Escalation - this must take place, a senior person from the agency must share with a senior person in the LA and really point out the risks and how they are becoming unmanageable - is it realistic to say he needs to be with the carers 24 hours a day - all agreed that it seems Ben requires some interventions / assessment of need

Additional fees - this is only helpful if it is to provide additional resources and support for Ben and the carers

Plane - can the airline be contacted, discuss the needs of Ben, can he get on the plane first or last - either to reduce any anxiety - the agency has done this and the first question was whether he should be flying or not - the airline were also very supportive.

Triggers - can Ben tell the carers if he feels he is becoming upset - do they notice a change, can they help him recognise the change and strategies to manage himself. What happens before and the feelings after

Safe place - Ben sits on the floor, also a word to indicate he is feeling heightened - "oranges"

Recording - robust and presented to the LA to ensure this cannot be ignored and supports the assessment - the LA may be doing their own risk assessment - but what is the carers risk assessment , what is the agencies risk assessment and have you got this on file / everyone clear of the strategies etc - the carers are more knowledgeable about the risks and the agency is likely to be more informed than the LA - ensure this goes into the LA risk plan

Duty to keep others safe - what about others on holiday, others on the plane etc - duty of care to all - is this fair on the other young person in their care

Safer caring - safety plans - also need considering - this is likely to be different if he goes on holiday and also how the additional young person is impacted (he is from a differing LA, are they fully aware of the situation)

Allegations - heightened risks around this and the possibility of restraints - has the carers been trained - and how will they be supported if there are allegations or Ben needs to be held etc

Plans - what if Ben needs to come home, what is the reporting and contacts whilst away, including the LA responsibility as corporate parents