Background

The case of YP is a complex one that spans a 4 year time period, covers 4 Local Authority areas and includes statutory and specialist interventions from a range of services.

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Safequarding Concerns

YP had an early history of bereavement, an eating disorder and in young adulthood a personality disorder. They were involved in abusive relationships and escalating sexual exploitation.

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The Incident

There were an accumulation of incidents over the years where YP presented as being extremely vulnerable due to their mental health and risk taking behaviour.

The Review

The review looked at:

Cross border working.

Children with mental health needs.

Treating 16 & 17 year old children as children.

Working with sexually active young people under the age of 18.

How services support children that have children and ensure their own needs are met

03 07 7 Minute **Briefing** 06 04

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Recommendations

06

Implementing Change

Reflect on the findings and discuss the implications for your service/practice.

Identify and outline the steps you and your

team will take to improve practice in line with the findings

and recommendations.

The CCG should consider the appropriateness and sufficiency of the current offer which sees 16 to 18 year old children directed to adult mental health services which treat them as adults.

The LSCP should undertake a mapping exercise of services available to children who have suffered bereavement. loss and trauma.

All children who themselves have children should have their own social worker and plan.

The use of the Greater Manchester Resolving Professional Disagreements/Escalation Policy, should be widely publicised to increase awareness of its potential to help resolution and agreement.

> CSC should develop regular forums to create opportunities for the sharing of professional expertise.

All CSC decisions on case transfer should be made by a manager who has an understanding of the proper use of the appropriate case transfer protocol.

> CAMHS should consider, on a case by case basis, how vulnerable children might best be enabled to participate in discussions about them.

Safeguarding Children Partnership

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The Findings

05

Transitional support for mental health aged 16-18 and for safeguarding post 18 leaves a gap in service provision

Child protection and transfer processes were not followed correctly

Services were insufficiently focused on YPs individual vulnerabilities and needs

There was a lot of good medical input from the hospital services and Healthy Young Minds (formerly CAMHS)

1111 Some elements of the multi-agency plan on discharge from a psychiatric unit were insufficient to meet YPs needs



YP - Action Plan

Name of Organisation	Team Manager

Contact Details

Identify the learning or recommendations that are relevant to your team and summarise your teams' discussion on those points

1.			
2.			
3.			



Please ensure you keep a copy of this discussion and plan for your records. Tameside Safeguarding Children Partnership will ask teams to provide evidence of the discussion, agreed actions and for evidence of improvements to practice.





What actions have been agreed to improve practice?

What needs to happen?	Who will do it?	By When?	How will you know when it has been done?	How will you know if it has worked?



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