



# **Telling health staff who is in care**

**Children's views  
Reported by**

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## Introduction

From 2001 until April 2014, the Children's Rights Director has been a statutory role with the duty to find out and report the views of children in care, getting help from social care services, living away from home in boarding schools, residential special schools or residential further education colleges, and care leavers. Other functions have included providing advice and assistance to individual children whose rights are being breached or are at risk of being breached, and providing advice on children's rights, especially to Ofsted and to government.

The Office of the Children's Rights Director has produced very many Children's Views reports over the years. Each of these gives the views of children themselves, without leaving out anything that I, professionals, the government, or adults generally might disagree with, and without adding adult comments or other research.

This is our report on what children thought about recent government proposals to put information from social care services on the NHS computer system so that health staff in hospitals or ambulance services could see whether a child they are seeing is in care or has a child protection plan.

A handwritten signature in black ink, appearing to read 'Roger Morgan', with a stylized flourish at the end.

Roger Morgan

Children's Rights Director

## The consultation

We consulted 40 children in care about the government proposals in December 2013, using a web survey which only the children we invited could access.

The youngest child was 7 and the oldest were care leavers of 18 or just over. Seventeen of the 40 lived in foster care, 10 were care leavers, 8 were living in children's homes, and four were in care but living at home with parents or relatives.

## Telling emergency health staff if a child is on a child protection plan

Most (30 out of the 40) supported emergency health staff knowing whether a child is on a child protection plan, so that they are aware and can help to keep the child safe and know the child is at risk.

But there were some concerns. Some were worried that health staff might overreact when it was not necessary, or make assumptions that the child was at risk from the person they were with in outpatients when that might be wrong. There were also concerns about privacy issues and about the computer data possibly being wrong or out of date.

Some direct quotes from children were:

*'It means emergency staff are aware of any issues immediately and can act accordingly'*

*'So that they keep the child safe'*

*'It may speed the process up and that child may be treated more sensitively'*

*'This must might be the thing to save a child's life'*

*'It makes professionals more aware of the situation, also they can assess the wound, accident etc quickly and ask the right questions. It's important information, it's confidential, but so are all medical records'*

*'if an older child walks out on something the staff need to watch the person'*

*'I'm not entirely sure about this idea as it's still in its early process and should be tested before use'*

*'It may not be kept up to date with correct information'*

*'Emergency staff may assume that the parents have done the damage to the child'*

*'The service is provided on an equal basis, circumstances should in no way affect this service'*

*'It may not work and it might crash'*

*'The child might not know and then the staff could tell them and then they could worry about their safety even more than usual'*

*'Just knowing a child has a child protection plan is not that useful information. How can a health care professional act on receipt of this knowledge?'*

*'I don't want my things on a computer.'*

## **Should other health staff be able to see if a child is on a child protection plan?**

There was strong support for doctors and nurses in Accident and Emergency departments knowing if a child was on a child protection plan, and support (though slightly less) for out of hours GPs and ambulance staff knowing.

36 out of the 40 children agreed that Accident and Emergency department doctors and nurses should be able to see if a child is on a child protection plan. 30 out of the 40 thought that out of hours GPs should be able to see this information, and 29 that ambulance staff should be able to see it.

## **Telling emergency health staff if a child is in care**

There was much less support for health staff knowing whether a child is in care. On balance (with 18 for and 12 against) the children consulted supported this in order to help get the right treatment for the child, keep the child safe, and know who to contact. They also thought that it might help health staff to understand and make allowances for some children because of their care background.

But more had concerns about this proposal. The privacy issues were greater because a child in care is much less likely to be at risk of any harm than those on child protection plans. There are lots of prejudices and misunderstandings about children in care, so labelling a child as in care could well lead to wrong assumptions being made, the child being stereotyped as 'child in care', and not being treated the same as other children would be.

Some direct quotes from children were:

*'You should not be treated any differently just because you are in care'*

*'So people know who to contact'*

*'To help the child and support them better and be more understanding'*

*'If a child/young person comes into hospital with mental health issues, nurses and doctors will be more understanding of their needs'*

*'It's good so that staff are aware, and they know that the child could be vulnerable, and that the next of kin is a guardian'*

*'Maybe they may be more careful with the case'*

*'They don't really need to know if a child's in care because it can be a private thing for the young person and they might not want a health worker to know'*

*'There are so many categories and a computer should not be allowed such responsibility'*

*'There are a lot of people who stereotype against young people in care'*

*'What's the difference? Every child that comes into hospital should be treated equally'*

*'It may subject the young person to discriminatory practice by health professionals due to their perceived status'*

*'Being in care doesn't affect your health'*

*'I wouldn't want anyone else to know I'm in care.'*

## **Should other health staff be able to see if a child is in care?**

There was still support for doctors and nurses in Accident and Emergency departments knowing who was in care, but less (though still overall support) for ambulance staff and out of hours GPs knowing this.

34 out of the 40 children agreed that Accident and Emergency department doctors and nurses should be able to see if a child is in care, 27 that ambulance staff should be able to see this information, and 26 that out of hours GPs should be able to.

Just over half the children consulted (22 out of 40) would also have supported health service emergency staff knowing if any child they were seeing in an emergency had a social worker.

## Final views from children

Here are final direct quotes from children and young people we consulted on the question of health staff being told on computer if a child is in care or on a child protection plan, and on the issue of training that health staff might need if they are going to be given this information:

*'They should see as it's their job to help if they need help'*

*'The only health staff that should know are the staff that are looking after the child'*

*'All health staff should follow confidentiality rules. The info must be seen like they're medical records'*

*'Only those who may be seeing the child regularly'*

*'The emergency staff don't need to know but your routine GP should know'*

*'They should have some basic training about the kinds of issues that affect children in care as these children may have often suffered trauma and may be very frightened'*

*'There should be a specialist on site to deal with looked after children'*

*'They need to have safeguarding training or similar so that they are aware of how to deal with any cases or issues that may arise with a child that either has a child protection plan or is in care'*

*'Not to make a big deal of it when they deal with the child but just make the child aware that they know about it'*

*'They should be stable in their job before they can look at children's care plans'*

*'They should be trained on different circumstances for reasons why children are in care (like loss of parents), to avoid quick judgements of bad situations like abuse, criminal records etc'*

*'They should just get told not to treat us any differently.'*