

National Institute for Health and Care Excellence

Stakeholder comments proforma – engagement exercise for quality standard on children’s attachment

Please enter the name of your registered stakeholder organisation below.	
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Would you like to express an interest in formally supporting this quality standard? / Yes <input type="checkbox"/> No	

Key area for quality improvement	Why is this important?	Why is this a key area for quality improvement?	Supporting information
Key area for quality improvement 1 Robust, high quality, evidence based assessments	Overall we agree with the key priorities for implementation outlined in NG 26 Children’s attachment. Our first priority would be the actions specified as	Completion of a comprehensive high quality assessment is a fundamental initial step in being able to offer an effective intervention based on the needs of the individual child. Recognising these issues from early childhood through to late adolescence and	See below

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	part of assessing attachment difficulties in children and young people in all health and social care settings.	adulthood are core aspects of implementation. However it needs to be recognised that many of the assessment tools recommended require professionals who are appropriately trained and supervised in order to ensure validity and reliability of the administration and interpretation of the results.	
<p>Key area for quality improvement 2</p> <p>Assessments that directly lead to identified issues that must be addressed in the child's care plan that directly and immediately impact of the quality of care provided by the carer whatever their status.</p>	Building capacity within health and social care is essential to implementation of these recommendations.	<p>The recommendations cannot be implemented unless there is sufficient capacity both in terms of expertise and numbers of professionals who can offer these services, as well as services which facilitate delivering the recommendations. There are critical issues in the early stages of a child's planning and decision making in ensuring that a child's attachment status is the focus of the preparation and support of carers whether they are temporary or intended to be permanent. It is also essential that these issues are addressed when children are moved from one carer to another. Some of these issues must be embedded in the preparation and training of carers and others in the focus on the detail of the child's current adjustment to adverse circumstances and the messages they convey about their needs in relation to their adult carers. The results of such assessments must be identified explicitly in the child's care plan and other related reports and delivered through supportive exploration of any proposed intervention.</p>	<p>In the experience of our members, in most regions there is a lack of capacity within social care, health and CAMHS to provide assessment services, as well as to offer training to birth parents and foster carers, special guardians and adopters and within education/schools.</p> <p>Some regions have had skilled expertise but with financial restraints many of these services have been reduced.</p>

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		<p>Implementing these recommendations will require a cultural change in addition to significant planned and ongoing investment in training and building capacity within social care, health and education over an extended period. In particular it is recommended that certain NHS CAMHS clinics are identified as resources for LAC and adopted children where professionals and carers can receive consultation and advice on how to respond to issues which have been identified.</p>	
<p>Key area for quality improvement 3 A strategic, fully resourced programme to implement the recommended interventions that also recognises the very limited availability of those programmes in the current structure of services.</p>		<p>Currently there a wide range of interventions being delivered with attachment as a focus. Some combine attachment with a range of other parenting concepts and these range for the poorly informed with extravagant claims to well balanced, appropriate interventions that are properly child and parent focussed. There is a particular lack of capacity to deliver the video feedback programmes recommended, with very few professionals currently trained in this intervention. Additionally, investment will be required to develop services to offer new interventions such as video feedback programmes, and to extend training to a hugely increased number of individuals such as teachers and foster carers.</p>	<p>The video feedback programmes offer an opportunity to maximise the adopters' or carers' capacity to strengthen the child's positive attachment to them as carers. However, the engagement with the adopters or carers, the videoing and then the interpretation of passages which are identified for discussion requires a highly trained workforce with access to appropriate professional supervision.</p> <p>Again it is recommended that professionals who are engaged in this work need to be located in and/or supervised by clinical professionals in NHS CAHMS clinics who can ensure that the intervention is conducted in accordance with the protocols and with the necessary sensitivity to the complex relationships involved.</p>
Key area for quality		Commissioners and CCG's within health are	

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improvement 4 Guidance for commissioners and clinical commissioning groups		critical in the delivery and development of services. They need to understand the NIHCE guidance and its significance.	
Key area for quality improvement 5 Parenting needs to be emphasised as the key component in attachment		It is essential that parenting is identified as the key component in attachment. Attachment is a relationship with parenting figures that the child has come to identify as their parents. Whatever their legal status it need to be the driver in the implementation at the heart of the quality standards as they are agreed and published.	Key research studies have identified that adoption is itself a powerful transformational intervention which increases the child's capacity to form secure attachments over time. Any attachment intervention needs to recognise the power of this relationship, and aim to support the adopters' (or other carers') ability to understand the impact of past experiences on their child's behaviour.
Additional developmental areas of emergent practice			

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Closing date: 5pm Friday 29th January 2016