Looked after children’s health: Key official guidance documents

This interactive tool allows you to easily access key official guidance documents (published by government or government sponsored agencies) relating to looked after children’s health from one place.

How to use: Select one of the three headings which best describes what you require information on and click on the title of the documents listed below to view more information and link to the document.

Key: Statutory  Non-statutory

Processes for planning individual care

- Care planning, placement and case review (The Children Act 1989 guidance and regulations: Volume 2) [DfE]
- The NHS Constitution [DH]
- Guide to the Health and Social Care (Safety and Quality) Act 2015 [Information Governance Alliance]
- Revised Caldicott Principles [DH]
- Information sharing advice for safeguarding practitioners [DfE]

Working directly with looked after children and young people

- Promoting the health and well-being of looked-after children [DfE/DH]
  This guidance has been designed to refer to all key requirements in relation to looked after children’s health and should be used as the first point of reference, referring to other documents below where verification or more detail is required.
- Looked after children: knowledge, skills and competence of health care staff [Royal Colleges of Nursing, GPs, and Paediatrics and Child Health]
- Looked After Children and Young People (NICE Quality Standard QS 31) [NICE]
- Looked After Children and Young People (NICE Guideline PH 28) [NICE/SCIE]
- Children’s Attachment (NICE Guideline NG 26) [NICE]

Planning services at population level

- Special educational needs and disability code of practice: 0 to 25 years [DfE/DH]
- 0-18 years: guidance for all doctors [General Medical Council]
- Who Pays? Determining responsibility for payments to providers [NHS England]
Promoting the health and wellbeing of looked after children: Statutory guidance for local authorities, clinical commissioning groups and NHS England

Department for Education and Department of Health, 2015

This guidance has been designed to refer to all key requirements in relation to looked after children’s health and should be used as the first point of reference, referring to other documents where verification or more detail is required.

This guidance explains how local authorities and health agencies should go about carrying out relevant duties under a number of pieces of legislation including the 1989 and 2004 Children Acts, 2006 NHS Act (as amended in 2012) and the care planning and placement and case review regulations. As well as being formally issued to local authorities, CCGs and NHS England the guidance is also aimed at:

- designated and named professionals for looked-after children
- GPs, optometrists, dentists and pharmacists
- managers and staff of services for care leavers, and personal advisers
- teachers
- health visitors, school nurses and any other professional who is involved in the delivery of services and care to looked-after children.

The guidance highlights the overarching duties that local authorities and health agencies have in relation to the health and wellbeing of looked after children and their duties to cooperate (2-8) and what they should do to ensure that all looked after children have access to appropriate health services. It also advises on the process for planning individual children’s healthcare, including:

- The legal requirements for carrying out health assessments and reviews (40-43, 52-54)
- Principles of good health assessment and planning (44-48)
- The process for notifying of placement changes (34-36)
- Working out which commissioner is responsible for paying for a service (21-28)
- The roles of the designated doctor and nurse and named health; GPs and primary care teams (69-72); Foster carers and residential care workers (82-86); Social workers (62-66); Independent reviewing officers (68); Virtual school heads and designated teachers (67).

The Children’s Partnership has produced a summary briefing on this guidance setting out in more detail what the guidance has to say about key challenge areas such as information sharing and mental health and its relationship with other documents.
**NICE Guideline PH 28: Looked After Children and Young People**

National Institute for Health and Care Excellence and Social Care Institute for Excellence, 2010 (updated to reflect current policy, 2015)

The National Institute for Health and Care Excellence (NICE) is an independent public body that provides national guidance and advice to improve health and social care in England. NICE guidance offers evidence-based recommendations made by independent Committees.

Although not statutory, this guideline can help children’s services in social care and health meet their obligations to improve the health and wellbeing of looked-after children and young people meet their obligations to improve the health and wellbeing of looked-after children and young people.

The guideline aims to improve quality of life (that is, the physical health, and social, educational and emotional wellbeing) of looked-after children and young people. It has been written for all those who have a direct or indirect role in securing this. The recommendations cover local strategy and commissioning, multi-agency working, care planning and placements, and timely access to appropriate health and mental health services.
NICE Guideline NG 26: Children’s attachment: attachment in children and young people who are adopted from care, in care or at high risk of going into care
National Institute for Health and Care Excellence, 2015

The National Institute for Health and Care Excellence (NICE) is an independent public body that provides national guidance and advice to improve health and social care in England. NICE guidance offers evidence-based recommendations made by independent Committees.

This guideline covers the identification, assessment and treatment of attachment difficulties in children and young people up to age 18 who are adopted from care, in special guardianship, looked after by local authorities in foster homes (including kinship foster care), residential units and other accommodation, or on the edge of care. It aims to address the many emotional and psychological needs of children and young people in these situations, including those resulting from maltreatment.

The guideline is aimed at commissioners, providers and professionals in health social care and education as well as carers and children and young people themselves.
NICE Quality Standard QS 31: Looked-after children and young people
National Institute for Health and Care Excellence, 2013

NICE quality standards describe high-priority areas for quality improvement in a defined care or service area. Each standard consists of a prioritised set of specific, concise and measurable statements. NICE quality standards draw on existing guidance, which provide an underpinning, comprehensive set of recommendations, and are designed to support the measurement of improvement.

This quality standard covers the health and wellbeing of looked-after children and young people from birth to 18 years and care leavers (including young people planning to leave care or under leaving care provisions). It applies to all settings and services working with and caring for looked-after children and young people, and care leavers, including where they live.
0-18 years: guidance for all doctors
General Medical Council, 2007

This guidance is for all doctors and develops the duties and principles set out in Good medical practice and other GMC guidance. It focuses on (all) children and young people from birth until their 18th birthday. It is not a statutory document but doctors are expected to use their professional judgement to apply its principles to their work. It includes advice on making decisions, confidentiality, child protection and parental responsibility.

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The NHS Constitution brings together the existing legal rights and responsibilities of patients, the public and staff in relation to any service that is funded by the NHS. The Constitution was first published in 2009 and its legal status was strengthened by the Health and Social Care Act 2012. Every part of the NHS now has a duty to take account of the Constitution and promote and raise awareness of it to those who use health services.

The rights, commitments and pledges set out in the NHS Constitution cover issues such as provision of information and involvement in decision making which will be particularly relevant to those working with looked after children and young people to plan their care.

The National Children’s Bureau and the Council for Disabled Children have produced a suite of resources supporting implementation of the NHS Constitution for children and young people.
Around 70% of looked after children have some form of Special Educational Needs, and it is likely that a significant proportion of them will have an Education, Health and Care (EHC) plan as a result of this alongside other plans they must have by virtue of being looked after.

This Code of Practice is statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities. It explains the duties of local authorities, health bodies, schools and colleges to provide for those with special educational needs under part 3 of the Children and Families Act 2014.

The roles of health and social care services and professionals in relation to health needs are set out in Chapter 3 and information about joining up planning for children who are looked after is included in Chapter 10.
Information sharing advice for safeguarding practitioners
Department for Education, 2015

This (non-statutory) departmental advice is for front-line practitioners and senior managers providing services to (all) children young people and parents and carers thereof. It is designed to help practitioners and their managers decide when and how to share personal information legally and professionally. While the advice focuses on information sharing in the context of children at risk of abuse and neglect, it sets out principles which will inform the general approach taken to information sharing by professionals working with all vulnerable children.

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Revised Caldicott Principles
Department of Health, 2013

These revised principles form part of the Government’s response to a review into information governance in the health service. They are intended to guide how information is shared between health professionals and agencies, which will be particularly relevant for arranging continuation of healthcare provision when a looked after child is placed in a new area, for example. The Principles are set out in the beginning of this report, and further information about how recommendations from the review regarding children are being taken forward are set out in Chapter 10.
Two new duties came into force from 1 October 2015 as part of the Health and Social Care (Safety and Quality) Act: A requirement for health and adult social care organisations to use a consistent identifier (the NHS Number) for sharing data for direct care of a patient; and a legal duty requiring health and adult social care bodies to share information with each other for the direct care of a patient. The Act aims to address the ‘culture of anxiety’ with regards to data sharing that was identified by the 2013 Caldicott Report. This guidance note explains what this new legislation requires.
Who Pays? Determining responsibility for payments to providers
NHS England, 2013

This document sets out the framework for establishing responsibility for commissioning an individual's care within the NHS and determining who pays for a patient's care. This includes how to determine who pays for health services for a looked after child out of area at paragraphs 71-75.
Looked after children: knowledge, skills and competence of health care staff
Royal College of Paediatrics and Child Health, Royal College of GPs and Royal College of Nursing, 2015

This document provides a framework for healthcare staff to understand their role and responsibilities for meeting the needs of looked after children. It sets out the required knowledge, skills, attitudes and values that professionals require to carry out particular elements of support and planning in looked after children’s health, including particular roles and tasks described in regulations and statutory guidance.
Care planning, placement and case review (The Children Act 1989 guidance and regulations: Volume 2)
Department for Education, 2015

This statutory guidance sets out the functions and responsibilities of local authorities and partner agencies under Part 3 of the Children Act 1989 (‘the 1989 Act’), and related regulations. In particular it describes how local authorities should carry out their responsibilities in relation to care planning, placement and case review for looked after children.

While all key requirements in relation to health are covered in the guidance promoting the health and wellbeing of looked after children, it may also be useful to have access to relevant parts of this wider guidance, as social care professionals may use it more commonly. Key sections of the interest in relation to health planning include:

- Overview of legislation and regulations (page 19)
- Relationship between the care plan and health plan (p24)
- Care planning requirements in relation to health (p34)
- Out of Area Placements (p56)
- Placement plans (including decision making, delegated authority and parental responsibility) (p88).