SCHEDULE 2 – THE SERVICES

A. Service Specifications

Service Spo	ecification No.	01_MRFH_0027	
Service		Medical Services for Looked After Children	
Commissioner Lead		Maternity Reproduction & Family Health CCP	
Provider Lead		Poole Hospital Foundation Trust	-
Period		01/09/2013 to 31/03/2016 November 2015	-
Date of Rev	New	November 2015	
1 Popula	tion Needs		
	tion needs		
1.1	National/local context and evidence base Statutory Guidance on Promoting the Health and Well-being of Looked After Children 2015 in conjunction with the Children's Act 1989/2004, Health and Social care Act 2012 and Nice Guidance Quality Standard 31; clearly outlines the importance for specialist services being integrated around the child's and young person's identified needs. To ensure colocation and multi-agency arrangements to support vulnerable children where improved prevention and earlier intervention can be provided. This approach is central to improving outcomes for children in care. The Looked After Children Service is to be delivered at a specialist level in addition to universal and primary care health provision.		
2. Outcon	nes		
2.1	NHS Outcomes	Framework Domains & Indicators	
	Domain 1 P	Preventing people from dying prematurely	*
		Enhancing quality of life for people with long-term	*
		conditions	
		lelping people to recover from episodes of ill- ealth or following injury	
		Insuring people have a positive experience of care	*
		reating and caring for people in safe environment	*
	a	nd protecting them from avoidable harm	
2.2	Local defined ou	utcomes	
2.2.1	Provide the Designated Doctor and Medical Advisor's post's in line with the Intercollegiate Role Framework 2015 and any subsequence updates.		
2.2.2	The Designated Doctor for looked After Children will carry out the strategic role as set out in the Looked after Children's, Intercollegiate Role Framework, Promoting the Health and Welfare of Looked After Children and any further updated statue.		
2.2.3	Implement and maintain systems Pan Dorset for completion of the statutory Initial Health Assessments (IHA) within the Statutory time frame of 20 working days, and any agreed subsequent Health assessments. (HA)		
2.2.4	Provide robust arrangements Pan Dorset, to ensure adoption agencies and panels secure access to timely medical advice and comprehensive information about the child's health to avoid unnecessary delay's for the child.		

2.2.5	Provide access to the service for all Looked After Children within community appropriate settings across Dorset.
2.2.6	Undertake collection and analysis of data to inform KPI's and Quality reporting to CCG within defined timeframes.
2.2.7	Have in place contracts with OOA providers for the implementation of IHA's and/or subsequent HA's as required.
3. Scope	
3.1	Aims and objectives of service
3.1.1	The objectives for the Designated Doctor and Medical Advisers for Looked After Children, working in collaboration with the Looked After Children and Young People Health service are but not conclusive:
3.1.2	To have an identified Designated Doctor to provide clinical and strategic leadership to Dorset Clinical Commissioning Group (CCG) in providing advice to local health providers on questions of planning, strategy, performance monitoring and audit in relation to health services for looked after children. Provide a link between Acute Trusts, Dorset CCG, Children Services and allied partners.
3.1.3	To ensure the health and wellbeing needs of children and young people in care are being met.
3.1.4	Provide Looked After Children and Young People access, with ease, to
3.1.5	health services for advice, prevention and treatment in a timely manner; To develop and maintain systems to plan, manage and monitor the delivery of health assessments for children and young people in care, including adoption;
3.1.6	Ensure that a medical advisor is available to act as a full Panel member of the Adoption Panel, ensuring the health needs of each child are recognised and understood.
3.1.7	To establish and maintain processes to ensure statutory time frames for IHA's are maintained;
3.1.8	Adhere to clinical governance and audit arrangements;
3.1.9	Maintain processes to ensure that children placed out of county have systems in place to provide continuity of the health assessment and planning process; so that they are not disadvantaged, ensure children placed in Dorset

	have access to have advice and assessments when requested.
3.1.10	Design implement and maintain systems to audit the quality and implementation of individual health plans;
3.1.11	Collate the monthly production and collection of data sets in line with statutory and contractual requirements;
3.1.12	To maintain regular evaluation and audit of trends and quality outcomes measures against local and national targets for LAC throughout the year culminating in an annual service review report and service delivery plan.
3.1.13	Ensure that expert health advice for looked after children, including on issues of medical confidentiality, consent and information sharing, is available to colleagues in health and other related services. Implement and contribute to multiagency training on the health needs of children in care.
3.1.14	Ensure all employed Medical Advisors delivering services to Looked After Children meet the competency requirements set out in the Intercollegiate Role framework.
3.1.15	Ensure all staff have access to appropriate training, development and supervision to enable them to fulfil their roles and responsibilities for Looked After Children.
3.2	Service description/care pathway The service delivers the medical component of the pan Dorset LAC service that co-ordinates and develops health services which are easily accessible. Provides training for local authorities, CCG and independent agencies professionals, foster carers, parents/relatives and prospective adopters, covering growth and development and the health needs of children in care, especially in relation to how the health needs for these children differ from their peers not in the care system. Provides timely medical advice to adoption agencies, including attending adoption panels to ensure the health needs of each child are recognised and understood
3.3	Population Covered Dorset Resident Population.
3.4	Any acceptance and exclusion criteria. Maintain implementation of contractual arrangements for all service users placed out of County and for Looked After Children placed in Dorset by other Authorities
3.5	Interdependence with other services/providers The LAC Medical Service will work closely with the wider health and multidisciplinary Looked After Children's, Fostering, Adoption and Education Services in each Local Authority across Dorset. In addition Police, Youth, Probation and Voluntary services where appropriate.
4. Applic	able Service Standards
4.1	Applicable national standards (eg NICE) All Prevailing statutory and national guidance for Looked After Children.
	Applicable standards set out in Guidance and/or issued by a competent
4.2	body (eg Royal Colleges) Health assessments will be recorded using the latest version the British Adoption and Fostering Association (BAAF) licence and access provided by

	the local authority.
4.3	Applicable local standards Ensure systems are in place to record, review and analysing data in evidencing local standards are being met as outlined in Schedule 4 Part C.
5. Applica	able quality requirements and CQUIN goals
5.1 5.1.1	Applicable quality requirements (See Schedule 4 Parts A-D) Requirement to evidence local standards are being met and improved health outcomes for Looked After Children are being achieved as outlined in Schedule 4 Part C.
5.2	Applicable CQUIN goals (See Schedule 4 Part E) N/A
6. Locatio	on of Provider Premises
6.	The Provider's Premises are located at: The Medical Service for Looked After Children requires flexibility to be able to deliver in various locations across Dorset which includes both Health and Social Care.
7. Individ	ual Service User Placement
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