NHS Lincolnshire East Clinical Commissioning Group Clinical Commissioning Group

NHS South West Lincolnshire

NHS South Lincolnshire NHS Lincolnshire West Clinical Commissioning GroupClinical Commissioning Group

Appendix C

PROGRESS AGAINST THE LINCOLNSHIRE CQC ACTION PLAN:

JULY 2014

CQC FINDINGS:	REC REF:	ORGAN ISATION	PROGRESS	COMPLETION / REVIEW
Capacity of the designate professionals for safeguarding and looked after children for strategic leadership and commissioning planning.	Section 1.	LINCOLN SHIRE CLINICAL COMMISS IONING GROUPS	The external review of the roles and responsibilities of the designated professionals commissioned through NHS England Area Team and the Clinical Commissioning Groups across Lincolnshire is now completed and the final report for sign off is imminent. Therein the increased capacity for the safeguarding team is being finalised and is supported by all 4 CCGs to include: The Designated Consultant Nurse for Safeguarding Children and Adults (including Looked After Children) Deputy Designated Nurse for Safeguarding Adults Deputy Designated Nurse for Safeguarding Children (including Looked After Children) Safeguarding Practitioner for Safeguarding Adults (including Care Homes) Safeguarding Project Manager / Administration Increased capacity for the Designated Doctor for Safeguarding Children Increased Capacity for the Designated Doctor for Looked After Children All roles within the review have been benchmarked against the revised WT2013 and the Revised Intercollegiate Documents for Safeguarding Children and for Looked After Children. Job Descriptions are in draft form and ready for submission for JAQ purposes regarding Banding.	September 2014

CQC FINDINGS:	REC REF:	ORGAN ISATION	PROGRESS	COMPLETION / REVIEW
Paediatric expertise within unscheduled care / A&E settings	Section 3.	ULHT	The workforce profile for paediatric skill and competence has been requested from ULHT and is awaited. The level of training compliance in safeguarding children and adults has been requested from ULHT. ULHT Director of Nursing is aware, and meets regularly with the Designated Nurse. ULHT has recently faced challenges in safeguarding leadership to drive progress and has recently been successful in: Appointing a Named Lead for Safeguarding Adults Appointing a Named Midwife. Providing a secondment opportunity for the Named Nurse for Safeguarding Children, whilst the current position holder is on maternity leave. Interviews in early July for a replacement specialist practitioner in safeguarding children have proved successful. The Paediatric Liaison Nurse embedding into ULHT is under development with engagement from ULHT senior Management Team, Paediatric Clinicians and the unscheduled care team to ensure effective communication to safeguard children through transition from acute services into the community.	August 2014
The self- harm pathway is not embedded in practice	Section 3.	ULHT LPFT CCGs LA	 CAMHS are commissioned by the LA under a S75 arrangement The pilot of the Hospital Intensive Psychological Services (HIPS) at Lincoln Site ULHT has been independently evaluated. Due to poor outcomes the service will not be commissioned at Lincoln or Pilgrim hospitals. The Local Authority under the S75 agreement is leading a pathway review. The existing pathway remains in place with a protocol and escalation process to manage risks and issues identified and appropriate training is taking place to enable staff to manage patients admitted to secondary care who are self-harming. The pathway re-development is being overseen by the Director of Children's Services and the Children's Commissioner. The next meeting in July includes commissioners, and clinicians. The Clinical Directors from LPFT and ULHT are involved and ULHT have confirmed that the self-harm pathway practice will be standardised across both A&E sites. Access to T4 beds is a national problem, previously managed locally, 	September 2014

CQC FINDINGS:	REC REF:	ORGAN ISATION	PROGRESS	COMPLETION / REVIEW
			discussions of this aspect of specialised commissioning are ongoing, alongside the developments of T3+ services which operate well in NEL and support local service provision in the community.	
Variance in quality of the statutory health assessment for looked after children	Section 2.	CCGs	 An audit of Statutory Health Assessments has been undertaken and identified that all looked after children with health issues were referred to appropriate specialist services. The Designated and Named Nurse for LAC are meeting with Foster carers regarding their access to health services, especially equipment. Review Health Assessments, a KPI for the LA exceeded the target of 95% 2013/14 with 96.8% achieved and 2% refusal. The quality of Review Health Assessments has remained of consistent high quality delivered through LCHS Vulnerable Children and Young People Team which has recently recruited additional staff to expand the service to incorporate increased activity. The recent ability to report Initial health assessments being undertaken within the statutory timescale shows improvement at 48% but remains poor. A proposal to improve the achievement, quality and consistency of initial health assessments has been prepared by the Designated Nurse and Doctor for LAC and the Executive Nurse for SLCCG as Lead commissioner for children's services will deliver the proposal to the CCG collaborative in July: Initial health Assessments will be conducted by Consultant Paediatrician's (ULHT) (IHAs must be performed by a medically qualified person). The service will bring together the statutory health assessments of LAC and Adoption Medicals (LA) The service will be delivered within the national tariff. The current locally enhanced service (LES) arrangements with GPs with additional training will be served notice in accordance with contractual requirements. 	September 2014

CQC FINDINGS:	REC REF:	ORGAN	PROGRESS	COMPLETION /
		ISATION		REVIEW
The impact of	Section 2	CCGs LA	• Lincolnshire County Council are Corporate Parents for Lincolnshire Children	December 2014
externally placed		LSCB	placed in care.	
children in independent		partnership	• Externally placed looked after children are corporately parented by their	
care settings on local			placing authority – often many miles away.	
resources			• There are currently 384 children placed in Lincolnshire by external authorities.	
			Lincolnshire has approximately 30 placed externally.	
			• Despite the statutory requirement to do so, placing authorities do not liaise	
			with health services prior to placement to assess the suitability of the	
			placement for children, some with complex care needs.	
			• A number of children are placed in independent care homes that Lincolnshire	
			have no contractual relationships with.	
			• LSCB has included externally placed looked after children within its Business	
			Plan and quarterly reporting of their health issues is now required.	
			• Re-design of current document for the statutory health assessments for all	
			looked after children is in its final stages in this county and will have the	
			capability to be reported against through Public Health England, disaggregated	
			between those Corporately Parented within Lincolnshire and those externally	
			placed. The data will inform on the impact on health services these children	
			place and will be reported through the annual report.	
			• The placing authority can be invoiced for targeted / specialist services only,	
			e.g. CAMHS.	_

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