

RCN position statement

The role of the Designated Nurse for Looked After Children and Named Nurse for Looked After Children in England

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This position statement by the Royal College Nursing (RCN) aims to clarify the roles and responsibilities of the Designated Nurse for Looked After Children and the Named Nurse for Looked After Children.

Clarification is necessary due to the current disparity between the roles and evidence from some areas that a conflict of interest exists (RCN survey of nurses working with looked after children 2015). Recent Care Quality Commission (CQC) thematic inspections have also highlighted the lack of a strategic function of the Designated Nurse for Looked After Children role (e.g. Care Quality Commission 2014a and 2014b).

What are conflicts of interest?

A conflict of interest occurs where an individual's ability to exercise judgement, or act in a role, is or could be impaired or otherwise influenced by his or her involvement in another role or relationship. The individual does not need to exploit his or her position or obtain an actual benefit, financial or otherwise, for a conflict of interest to occur (NHS England 2014).

In March 2015, two significant documents were updated – *Promoting the health and well-being of Looked After Children. Statutory Guidance for local authorities, clinical commissioning groups and NHS England* (DfE/DoH 2015) and the intercollegiate role framework *Looked After Children: Knowledge, skills and competencies of health care staff* (RCPCH 2015). In addition to these, *Working Together to Safeguard Children* (DfE 2015) was reissued and subsequently the NHS England Accountability and Assurance Framework was also revised (NHS England 2015).

Designated Nurse for Looked After Children

Working Together to Safeguard Children states that Clinical Commissioning Groups (CCGs), as major commissioners of local health services, should employ or have in place a contractual agreement to secure the expertise of Designated professionals, including Designated professionals for Looked After Children. This is supported by NHS England's Accountability and Assurance Framework which states that CCGs need to demonstrate that their

Designated clinical experts (for both children and adults) are embedded in the clinical decision making structure of their organisation, with the authority to work within local health economies to influence local thinking and practice and to give clinical advice in complex cases.

Promoting the health and well-being of Looked After Children. Statutory guidance for local authorities, clinical commissioning groups and NHS England, which must be followed unless there is a good reason not to, states that the Designated role is strategic and should support commissioners to fulfil their responsibilities for Looked After Children. The role is intended to be separate from any responsibilities for individual Looked After Children, being a monitoring and quality assurance role rather than a managing one. CCGs should ensure they have access to the Designated professionals for Looked After Children. Where the Designated professional is employed by another organisation then this will need to be set out in a contractual agreement.

Looked After Children: Knowledge, skills and competencies of health care staff defines the role and the competencies required for this post as:

- Effective strategically, raising key issues with service planners, commissioners and providers, providing expert advice, ensuring all services commissioned meet the statutory requirement to promote the welfare of Looked After Children and ensuring the needs of Looked After Children are taken into account locally including those placed out of the area.
- Takes a strategic and professional lead across the health community on all aspects of Looked After Children, including provider organisations which are commissioned to undertake this service.
- Provide specialist advice and guidance to the Board and Executives of commissioner organisations on all matters relating to Looked After Children including regulation and inspection.
- Provides expert advice to increase quality, productivity, and to improve health outcomes for Looked After Children and Care Leavers. Developing, leading and monitoring quality assurance processes and service improvement of health services.

- Able to lead innovation and influence change across internal and external organisations, and effectively challenge colleagues in health and social care about the health and wellbeing of Looked After Children.
- Able to provide an effective contribution to the strategic corporate parenting agenda and the wider children's plan.
- Be involved with commissioners, providers and partners on the direction and monitoring of looked after children standards and to ensure that Looked After Children standards are integrated into all commissioning processes and service specifications.
- Able to monitor services across the health community to ensure adherence to legislation, policy and key statutory and non-statutory guidance.
- Ensure robust governance arrangements are in place for commissioning of specialist placements where a child or young person is placed away from the responsible local authority to provide continuity of healthcare.

Named Nurse for Looked After Children

The statutory guidance and intercollegiate document support the Named Nurse role. The Named and Designated roles for Looked After Children are separate and should therefore have separate post holders.

Named Nurses have an important role in promoting good practice within the provider organisation. This is a high-level operational role bringing both expertise and extensive experience. They will work in, and are employed by, a health provider organisation. The Named Nurse is the principal health contact for Social Care, improving the health outcomes for Looked After Children and Care Leavers by working with the individual, their carers, the corporate family and the wider community.

The Named Nurse should work closely with the Designated professionals for Looked After Children to ensure the health assessment process is timely, robust and quality assured, ensuring that the health plan is actioned. The Named

Nurse should also work closely with the Designated Nurse for Looked After Children to ensure policies and procedures are in line with national guidance and legislation, and that an organisational training strategy in line with national and local expectations is in place.

Concluding Statement

The Designated Nurse for Looked After Children role is pivotal to strategic planning, quality assurance and performance monitoring and is essential in advising on the provision of services for vulnerable Looked After Children and Care Leavers within the health economy. Further to this, key elements of this essential role are preventing further harm to Looked After Children and ensuring that the complex needs of this transient group of vulnerable children and young people are understood across the health and social care economy.

The Named Nurse role provides a higher level of operational expertise which aims to improve the health outcomes for Looked After Children. This role provides a safe and effective operational service, supporting Looked After Children and young people to reach their full potential by ensuring that there are systems in place to meet health needs of children in care and Care Leavers in a robust and timely manner.

Key Recommendations

- CCGs should have access to the expertise of the Designated Nurse for Looked After Children and if not employed by the CCG they should have a contractual agreement in place.
- The Designated role is a strategic post with no responsibilities for individual children or young people.
- The Designated and Named Nurse roles are distinct and should have separate post holders.
- The Named Nurse should work closely with the Designated Nurse for Looked After Children.
- The Named Nurse role is a high-level operational role and should be based within a provider service.

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