

Fiona Smith

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By email: gareth.james@dh.gsi.gov.uk

15 October 2015

Dear Mr James

Draft National Framework for Children and Young People's Continuing Care & Draft Decision Support Tool

With a membership of over 423,000 registered nurses, midwives, health visitors, nursing students, health care assistants and nurse cadets, the Royal College of Nursing (RCN) is the voice of nursing across the UK and the largest professional union of nursing staff in the world. RCN members work in a variety of hospital and community settings in the NHS and the independent sector. The RCN promotes patient and nursing interests on a wide range of issues by working closely with the Government, the UK parliaments and other national and European political institutions, trade unions, professional bodies and voluntary organisations.

Thank you for the opportunity to comment. We have consulted widely with our members. Although areas for clarification have been highlighted by our members, many felt the framework and decision support tool were clear and comprehensive. Please find our detailed comments attached.

We hope that you will find our response helpful. Please do not hesitate to make contact should you require further information or clarification of the points made.

Yours sincerely



Fiona Smith

RCN Professional Lead for Children and Young People's Nursing





Department of Health

Consultation on the Children and Young People's Continuing Care Framework

Please note that responses can also be made at:

<http://consultations.dh.gov.uk/children2019s-health-and-well-being/children-and-young-peoples-continuing-care>

Introduction

1. What is your name? (please provide a name, even if you are responding on behalf of an organisation - the organisation name can be given under Question 3).

Fiona Smith
Professional Lead for Children and Young People's Nursing

2. What is your email address or other contact details?

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3. If you are responding on behalf of an organisation, what is its name and role?

This response is on behalf of the Royal College of Nursing

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Views on the framework

4. Does the framework adequately define the scope of children and young people's continuing care?

The opening statement is clear. Members stated it would be useful to have in bold as this is the baseline for all agencies when considering continuing care for children and young people.

Point 3 states that 'a child's needs are such that they can only be met through a package of continuing care'. Members have stated that this should not be the case when applying the 'universal and specialist' rule.

Point 6 – our members state that this point is required as the definition of challenging behaviour can cause confusion in professionals meetings and needed clarification.

5. Does the framework set out a clear process?

Points 10-25 are clear, comprehensive and read well.

Several members have enquired whether there might be the possibility of a flow diagram to cover the key stages in the process.

6. Does the framework provide clear guidance on the process for assessing needs and agreeing a package of care? Is there sufficient detail on practice?

Points 57&58 – our members agree that a quick pre assessment process is a useful tool in order to consider the necessity of carrying out a full continuing care assessment.

Point 59 – our members agree that the clock should start once the referral has been accepted as appropriate and that the time of 6 weeks is realistic.

Point 61 – our members have stated that they are unsure whether Medical Officers would be in a position to provide information on continuing care to local partners.

Point 66 – our members have reported that this statement contradicts the

Point made at 57/58 as every child may not be offered a comprehensive assessment depending on the quick pre-assessment check.

Point 72 – this is a valid point as there are examples of health assessors being asked to assess children and young people with complex behavioural and emotional needs

Point 76 – The four areas of assessment – point 2A members fully agree that carers assessment should be offered to all carers of children and young people referred for continuing care and that this should consider the family capacity for resilience.

Point 77 – our members have asked for clarification on this point.

Point 81-84 – our members have enquired whether there is a children and young people's sustainability protocol for continuing care

7. Are the domains of the Decision Support Tool appropriate? :

Point 121 – our members have asked for it to be clarified that this means the Decision Support Tool can be used for health assessments

Many of our members have also expressed concern with the concept of the decision support tool as it is felt that in practice the focus would move away from the child and his/her outcomes and unmet need to measuring the level of need as the priority.

Members have expressed a preference for a child centred approach to multi agency discussion in regard to continuing care (Child in Need, Team around the Child etc) and propose a change in title to 'Summary of need for children and young people's continuing care'. The health domains could still be used as a guide for discussion but instead of rating the child on a level of need, each domain would examine actual needs, how these are being met, what is working and what interventions or referrals must be made to facilitate unmet needs. The primary health needs approach of nature, intensity, complexity and unpredictability would be used to examine the level of skill needed to care for the child, whether tasks may be safely delegated, who would provide training and the risk management for decisions made. The 'summary of need' would then include an action plan to feed into the child's multiagency care plan. Only when all universal and specialist services have been explored would a child become eligible for children and young people's continuing care.

8. Is there sufficient information on the role of the Assessor?

Point 73/74 – our members indicate that they agree that these are the skills required for a health assessor and that the level would indicate a Band 6 upwards.

9. Does the framework provide enough support to professionals leading on, or participating in, continuing care assessments?

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10. Does the framework explain how the Education, Health and Care plan process relates to the continuing care process?

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11. Does the framework support an effective transition to adulthood and the NHS Continuing Care framework?

Point 9 – The framework covers ‘birth to 17 years’. For adults – age 18 and over the National Framework for NHS Continuing Health Care and NHS Funded Care and the supporting guidance should be used’

Members have commented that the above statement implies that there is a gap from 17 years to 18 years and may cause dispute when it comes to funding responsibilities, particularly when point 109 on transition states that at ‘18 years of age full transition to adult continuing health care or to universal and specialist services should have been made.....’

Point 119 states that young people should continue to receive their healthcare on an unchanged basis until they have been reassessed. Our members have asked for clarification on this point so as to be explicit in that children’s services would be expected to continue to provide and fund this care and clarification also on the point at which adult services would be expected to assume responsibility for the provision of care and funding.

12. Do you have any other comments you would like to make on the draft framework? Is there something missing, or something which needs to be changed?

Points 26-33 Our members have commented that quality assurance process and data collection should be in line with other countries such as Wales. They have also questioned whether national performance indicators will be published as part of this review so as to ensure national standards for children and young people’s continuing care and a national framework for audit.

Deprivation of Liberty Safeguards needs to be added

Responses to the consultation must be submitted before 23th October 2015

Please send either by e-mail to: gareth.james@dh.gsi.gov.uk

or by post to:

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