

## Healthcare Specification for services for Children and Young People (under 18s) in Secure Settings: Physical Health Care

### CYPSS Standard 4 : Physical Health Care and Intervention

<http://www.rcpch.ac.uk/cypss>

**The Overarching specification should be read and incorporated in any tender, alongside this document**

<b>Relevant Outcomes frameworks</b>	<p><b>Children and young people’s health outcomes framework(Jan 2014)</b> (<a href="https://www.gov.uk/government/news/phe-publishes-children-and-young-peoples-health-outcomes-framework">https://www.gov.uk/government/news/phe-publishes-children-and-young-peoples-health-outcomes-framework</a>) Tool available at: <a href="http://fingertips.phe.org.uk/profile/cyphof">http://fingertips.phe.org.uk/profile/cyphof</a></p> <p><b>NHS Outcomes Framework(2013-14)</b> <a href="https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/256456/NHS_outcomes.pdf">https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/256456/NHS_outcomes.pdf</a></p>						
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	Domain 4	Ensuring people have a positive experience of care <ul style="list-style-type: none"> <li>4.5 Women's experiences of maternity services;</li> </ul>
	Domain 5	Treating and caring for people in a safe environment and protecting them from avoidable harm <ul style="list-style-type: none"> <li>5.4ii Incidence of medication errors for children and young people that reach the patient;</li> <li>5.5 Admission of full term babies to neonatal care.</li> </ul>
<p><b>Public Health Outcomes Framework(2013-16)</b> <a href="http://www.apho.org.uk/resource/item.aspx?RID=111721">http://www.apho.org.uk/resource/item.aspx?RID=111721</a></p>		
	Domain 1	Improving the wider determinants of health <ul style="list-style-type: none"> <li></li> </ul>
	Domain 2	Health improvement <i>Indicator/outcome:</i> <ul style="list-style-type: none"> <li>Low birth weight of term babies;</li> <li>Breastfeeding;</li> <li>Smoking status at time of delivery-Percentage of women stopping smoking during pregnancy;</li> <li>Percentage of women abusing alcohol or non prescription drugs at the time of booking with maternity services;</li> <li>Under 18 conceptions;</li> <li>Number of births to under 18s;</li> <li>Healthy weight in under 18 year olds;</li> <li>Hospital admissions and A&amp;E attendances for accidental and unintended injuries, and non-accidental injuries, neglect and maltreatment in children and young people.</li> </ul>
	Domain 3	Health protection <i>Indicator/outcome:</i> <ul style="list-style-type: none"> <li>Number of young people aged 15-19 presenting with HIV at a late stage of illness;</li> </ul>

	<ul style="list-style-type: none"> <li>• <i>Chlamydia diagnoses (15-24 year olds);</i></li> <li>• <i>Treatment completion for TB;</i></li> <li>• <i>Population vaccination coverage-Vaccination coverage of preventable notifiable diseases.</i></li> </ul>
Domain 4	<p>Healthcare, public health and preventing premature mortality</p> <ul style="list-style-type: none"> <li>• <i>Infant mortality;</i></li> <li>• <i>Mortality in childhood and young people (links to NHS Outcomes Framework Domain 1);</i></li> <li>• <i>Tooth decay in children and young people aged 5.</i></li> </ul>
<b>Outcomes</b>	<ul style="list-style-type: none"> <li>• The improvement of the physical health and well-being of children and young people whilst they are in the secure setting;</li> <li>• There is a comprehensive physical health strategy that outlines the contribution of all staff to supporting and improving the physical health and well-being of all children and young people, that acknowledges the close relationship between mental and physical health;<sup>1</sup></li> <li>• The existence of seamless care pathways that begin with the use of the Comprehensive Health Assessment Tool (CHAT) and that encompass treatment, liaison and reintegration into community services in line with the 'Healthcare Standards for Children and Young People in Secure Settings' (RCPCH 2013);</li> <li>• Children and young people know how to access a physical healthcare team appropriate to their needs and are able to access the following as appropriate to gender, need, confidentiality and legislation:</li> <li>• Immunisations and vaccinations, screening/treatment for sexually transmitted infections, appropriate contraception, midwifery, non judgemental counselling, and termination of pregnancy services.</li> <li>• The weight, height, body mass index of children and young people will be monitored.</li> <li>• High quality ophthalmic and auditory screening services are provided for the children and young people.</li> <li>• High quality dental and orthodontistry services (where appropriate) are provided for all children and young people.</li> <li>• High quality evidence based interventions and access to specialist practitioners are offered and delivered for</li> </ul>

<sup>1</sup> CYPSS standard 4.1

	<p>long term conditions, including for example asthma, diabetes and epilepsy, neurodisability and skin conditions, according to individual needs<sup>2</sup></p> <ul style="list-style-type: none"> <li>• There is a comprehensive health promotion strategy for the secure setting that is linked to the overall health strategy for the secure setting<sup>3</sup></li> <li>• All healthcare staff provide support to other staff working with children and young people in the secure setting to foster a culture of multidisciplinary working and partnership and ensure the whole secure setting operates as a health promoting environment.<sup>4</sup></li> <li>• Children and young people know how to <sup>5</sup> make a complaint or compliment the service.</li> </ul>
<p><b>Performance Indicators</b></p>	<ul style="list-style-type: none"> <li>• <b>Intentionally blank at this stage</b></li> </ul>
<p><b>Service principles (Aims and Objectives)</b></p>	<p>The children and young people are entitled to health care provision that is at least equivalent to that available for children living in the wider community;</p> <p>The secure setting has clear duties to the children and young people in its care: to safeguard and promote their welfare, to promote their good health and emotional well being, and to take account of their specific needs as children;</p> <p>Local Authorities have specific duties towards looked after children (LAC), including those placed in secure accommodation: to safeguard and promote their welfare; to make use of relevant services for these children in the same way that a parent would; to take into account the wishes and feelings of children and their parents/carers and to have regard to children's religion, racial origin and cultural and linguistic background before making any decision about them;</p> <p>Individual care and treatment plans should reflect national clinical guidance e.g. national guidance for immunisations</p>

<sup>2</sup> CYPSS standard 4.4

<sup>3</sup> CYPSS standard 3.5

<sup>4</sup> CYPSS standard 11.7

<sup>5</sup> CYPSS standard 3.2

	<p>and vaccinations;</p> <p>Services that are provided should be sensitive to the individual needs of the child and young person and should maintain their confidentiality, privacy and dignity;</p> <p>The rights of the child should be respected and they should be given choices about their care as they would be afforded in the community;</p> <p>Data collection relating to physical health care and interventions <b>and outcomes</b> should be collected in the setting; Providers should submit activity and outcomes data to commissioners on a regular basis for the purpose of contract monitoring and contribute this to the national audit process as well as case studies and quality audits. Healthcare providers will be expected to submit data in line with national requirements to measure throughput as well as quality;</p> <p>Considerations should be given to ensuring that links are made between those providing physical health interventions and those providing mental health and substance misuse interventions;</p> <p>There should be effective information sharing systems in place between those providing physical health services and other providers of mental health, learning disability and substance misuse services and the compilation of a single on- site health record.</p>
<p><b>Details on the establishment (secure setting capacity etc)</b></p>	<ul style="list-style-type: none"> <li>• For commissioner to fill in</li> </ul>
<p><b>Data on need</b></p>	<ul style="list-style-type: none"> <li>• For commissioners to fill in (via SystmOne or local data collection systems in the absence of SystmOne)</li> </ul>
<p><b>Service description</b></p>	<p>Time in a secure setting provides an opportunity to reach out to this vulnerable population and a chance to improve their health outcomes and to plan for their continuing care on discharge. There is a balance to be struck between the</p>

need to provide an appropriate secure setting and the aim of developing a child-centred, therapeutic service for children and young people<sup>6</sup>.

Over a quarter of young men and a third of young women in secure settings have a long standing physical complaint including respiratory problems, musculo-skeletal complaints, nervous system complaints, skin complaints, dental health problems, blood-borne viruses, sexually transmitted infections and epilepsy.<sup>7</sup> A number of the children will have missed routine screening and assessments, immunisations, vaccinations and dental and optical checks and if they have a long term condition may have missed routine follow up appointments. There is an opportunity while children and young people are in the setting, to rapidly assess for the routine screening and monitoring that may be needed and to catch up on immunisations and vaccinations, all with the consent of the young person (if they have the capacity and are willing to do so).

The services should deliver a year round child centred health service which meets the physical health and well-being needs of the children and young people whilst acknowledging the close relationship between mental health and physical health.

The CHAT (Comprehensive Health Assessment Tool) should be used as a reception health screen for all children and young people entering the secure estate to assess individual health needs within CHAT timeframes. An early and accurate assessment of health needs must be followed by prompt care and interventions and services must at least be equivalent to those in the community.<sup>8</sup> To include not only treatment of any physical illness but also promotion of health and well-being. The data from CHAT can also be used to populate a health and well-being needs assessment for the secure setting. The data from these assessments will enable data collection across the secure setting that can be used to better inform the commissioning of health services in future.<sup>9</sup>

Healthcare provision needs to encompass primary care services as would be provided in the community, whilst also offering screening and monitoring of physical health needs. Effective treatment and follow up of long term conditions with specialist/secondary care input should also be provided if required.

<sup>6</sup> Healthy Children, Safer Communities DH (2009)

<sup>7</sup> Evidence of Need about the Health and Well-being of Children and Young People in contact with the Youth Justice System - Ryan, Tunnard February 2012

<sup>8</sup> CYPSS standards 2013

<sup>9</sup> <http://www.ohrn.nhs.uk/OHRNResearch/CHATToolV3June2013.pdf>

	<p>The provider will be required to ensure that there is a service in place that can respond to routine primary care and to both urgent and emergency care. They will need to ensure that they have a good working relationship with the local A&amp;E department in line with local health care provision and subject to the secure setting security policies in relation to a child or young person being off site with security/care staff.</p> <p>Clear pathways and referral processes should be in place for both urgent and non-urgent referrals/advice, which is agreed by all those needing to use them and which is understood across the disciplines working in the setting. This can include processes for self referral.</p> <p>Staff working in the physical healthcare team will need access to external advice and support if a child/young person presents with a condition requiring specialist support.</p>			
<p><b>Core expectations for meeting the physical health care needs of children under 18 years.</b></p>	<ul style="list-style-type: none"> <li>• <b>Healthcare standards for Children and Young People in Secure Settings (2013):</b>  <a href="http://www.rcgp.org.uk/~media/Files/CIRC/Child-and-Adolescent-Health/RCGP-Healthcare-Standards-Secure-Settings-Report-June-13.ashx">http://www.rcgp.org.uk/~media/Files/CIRC/Child-and-Adolescent-Health/RCGP-Healthcare-Standards-Secure-Settings-Report-June-13.ashx</a> </li> </ul> <p><b>The full standard for Physical Health Care and Intervention (Standard 4) is detailed in full below.</b></p> <p>To meet all <b>Standard 4 Physical Health Care and Intervention:</b></p> <table border="1" data-bbox="492 877 1912 1383"> <tr> <td data-bbox="492 877 1912 946"> <p><b>Standard 4 - Physical Health Care and Intervention</b></p> </td> </tr> <tr> <td data-bbox="492 946 1912 1185"> <p><b>4.1 Each secure setting has a comprehensive physical health strategy outlining the contributions of all staff to supporting and improving the physical health and well-being of young people and acknowledging the close relationship between mental and physical health.</b></p> <p>4.1.1 The strategy incorporates a multi-disciplinary approach and is part of the secure setting's health strategy (see 9.1).</p> </td> </tr> <tr> <td data-bbox="492 1185 1912 1383"> <p><b>4.2 The secure setting has access to, and receives support from, a multidisciplinary physical healthcare team appropriate to the needs of the young people.</b></p> <p>4.2.1 The secure setting receives consultation, advice and training from a physical healthcare</p> </td> </tr> </table>	<p><b>Standard 4 - Physical Health Care and Intervention</b></p>	<p><b>4.1 Each secure setting has a comprehensive physical health strategy outlining the contributions of all staff to supporting and improving the physical health and well-being of young people and acknowledging the close relationship between mental and physical health.</b></p> <p>4.1.1 The strategy incorporates a multi-disciplinary approach and is part of the secure setting's health strategy (see 9.1).</p>	<p><b>4.2 The secure setting has access to, and receives support from, a multidisciplinary physical healthcare team appropriate to the needs of the young people.</b></p> <p>4.2.1 The secure setting receives consultation, advice and training from a physical healthcare</p>
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	<p>team.</p> <p>4.2.2 There is a named lead healthcare professional responsible for overseeing physical health provision within the secure setting.</p> <p><b>4.3 Before intervention begins, physical health need is assessed (see 1.5), a healthcare plan is developed (see 2.2) and consent is sought (see 2.3).</b></p> <p><b>4.4 A range of evidence-based physical health interventions is offered and delivered according to individual needs.</b></p> <p>4.4.1 Effective treatment and regular review, in line with evidence based practice, are in place for the management of young people with long-term conditions. Guidance: Young people have access to specialist clinics for long term conditions, for example, asthma, diabetes and epilepsy.</p> <p>4.4.2 There are formal arrangements with local health and social care agencies for the loan of occupational therapy equipment and specialist advice to ensure young people are able to access mobility, communication and health aids.</p> <p>4.4.3 Pharmacological treatment is delivered in accordance with clinical guidelines and local protocols and prescribing of drugs is audited annually.</p> <p>4.4.4 Young people with skin conditions, including acne, dry skin, dermatitis and eczema, receive appropriate advice and treatment from healthcare professionals.</p> <p>4.4.5 Young people's physical health is monitored including growth and nutrition and screening for defects of vision or hearing. <b>Guidance:</b> <i>The weight, height and body mass index of young people are monitored, looking for physical signs of nutritional deficiencies and young people who are under or overweight.</i></p>	
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	<p><b>4.5 Young people are cared for by a dental health service that assesses and meets their needs.</b></p> <p>4.5.1 Young people have timely access to dental checks and treatment including orthodontics where appropriate</p>	
	<p><b>4.6 The secure setting has a comprehensive policy on communicable disease control.</b></p> <p>4.6.1 The policy includes an outbreak plan, pandemic flu plan and vaccination policy.</p> <p>4.6.2 Young people are offered vaccinations appropriate to their age and need, as set out under national guidance for immunisations and vaccinations.  <b>Guidance:</b> <i>UK routine childhood immunisation programme, 'Immunisation Against Infectious Disease: the Green Book' Department of Health, 2013.</i></p>	
	<p><b>4.7 Young people have access to confidential advice and education about safer sexual practices and contraception within the context of relationships.</b></p> <p>4.7.1 Young people have access to appropriate contraception in the secure setting.</p> <p>4.7.2 Young people have access to screening and treatment programmes for sexually transmitted infections.</p>	
	<p><b>4.8 Young women are provided with a choice of sanitary products to meet individual needs</b></p> <p><b>4.9 Antenatal and postnatal services equivalent to those provided in the community are available for pregnant young women.</b></p>	

	<p>4.9.1 Pregnant young women have access to a midwife.</p> <p>4.9.2 Non-judgmental counselling regarding options is provided for pregnant young women and, where appropriate and within relevant legislation, access to termination of pregnancy services.</p> <p>4.9.3 Pregnant young women receive information about avoiding substances (drugs, alcohol and smoking), healthcare professionals document in the young person's health record if there is a history of substance misuse in pregnancy and appropriate interventions are offered.</p>	
<b>Dependencies</b>	<ul style="list-style-type: none"> <li>• Health commissioners and providers need awareness of the requirements of the relevant legislation and guidance governing particular secure settings e.g. STC Rules 1998, National Minimum Standards for Children's Homes, Legal Aid Sentencing and Punishment of Offenders Act 2012; Prison Service Orders/Instructions (applicable to Young Offender Institutions but not to other settings) and YJB National Standards for Youth Justice Services (see references below) in relation to this specification;</li> <li>• Prescribing should be based on national guidance but may need to be adapted for use in a secure setting where medicines are open to abuse or where they may pose a high risk of overdose</li> </ul>	
<b>Rights of the Child</b>	<p><b>The United Nations Convention on the Rights of the Child (UNCRC)</b> should underpin the specification.</p> <p>This is an international agreement that protects the rights of children and provides a child-centred framework for the development of services to children. The UK Government ratified the UNCRC in 1991 and, by doing so, recognises children's rights to expression and receiving information.</p> <p>Children have said that they need:</p> <ul style="list-style-type: none"> <li>• Vigilance: to have adults notice when things are troubling them</li> <li>• Understanding and action: to understand what is happening; to be heard and understood; and to have that understanding acted upon</li> </ul>	

	<ul style="list-style-type: none"> <li>• Stability: to be able to develop an on-going stable relationship of trust with those helping them</li> <li>• Respect: to be treated with the expectation that they are competent rather than not</li> <li>• Information and engagement: to be informed about and involved in procedures, decisions, concerns and plans</li> <li>• Explanation: to be informed of the outcome of assessments and decisions and reasons when their views have not met with a positive response</li> <li>• Support: to be provided with support in their own right as well as a member of their family</li> <li>• Advocacy: to be provided with advocacy to assist them in putting forward their views</li> </ul>
<p><b>Safeguarding children and young people (Working Together to Safeguard Children, 2013)</b></p>	<p>Effective safeguarding arrangements in every local area should be underpinned by two key principles:</p> <ul style="list-style-type: none"> <li>• Safeguarding is everyone’s responsibility: for services to be effective each professional and organisation should play their full part; and</li> <li>• A child centred approach: for services to be effective they should be based on a clear understanding of the needs and views of children.</li> </ul> <p>Safeguarding is everyone’s responsibility.</p> <p>Everyone who works with children..... has a responsibility for keeping them safe. No single professional can have a full picture of a child’s needs and circumstances and, if children and families are to receive the right help at the right time, everyone who comes into contact with them has a role to play in identifying concerns, sharing information and taking prompt action.</p> <p>All those working with children should be alert to risk factors and signs and symptoms of child abuse, and follow local</p>

	<p>safeguarding procedures where there is cause for concern. Schools have a duty to safeguard and promote the welfare of their pupils. Working Together to Safeguard Children<sup>10</sup> sets out how organisations should work together and the actions to be taken when abuse or neglect is known or suspected.</p> <p><a href="http://media.education.gov.uk/assets/files/pdf/w/working%20together.pdf">http://media.education.gov.uk/assets/files/pdf/w/working%20together.pdf</a></p>
<p><b>USEFUL LINKS AND GUIDANCE</b></p>	
<p><b>Relevant overarching legislation links to health services for children and young people</b></p>	<ul style="list-style-type: none"> <li>• <b>Working Together to Safeguard Children (2013)</b>  <a href="http://media.education.gov.uk/assets/files/pdf/w/working%20together.pdf">http://media.education.gov.uk/assets/files/pdf/w/working%20together.pdf</a> <p>-Compliance with <b>Children Act (2004) Section 11</b> duty to co-operate to improve well-being and to safeguard and promote the welfare of children.</p> <p><b>-Section 11 of the Children Act 2004</b> places duties on a range of organisations and individuals to ensure their functions, and any services that they contract out to others, are discharged having regard to the need to safeguard and promote the welfare of children.</p> </li> <li>• <b>Healthy Child Programme 0-5 (2009)</b>  <i>Pregnancy and the first 5 years</i>  <a href="https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/167998/Health_Child_Programme.pdf">https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/167998/Health_Child_Programme.pdf</a> </li> <li>• <b>Healthy Child Programme 5-19 (2009)</b>  <a href="http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_108866.pdf">http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_108866.pdf</a> <p>-Young people 11-16 Healthy Child Programme schedule-universal and progressive programme provides an evidence-based programme detailed as a good practice outline.</p> </li> </ul>

<sup>10</sup> DfE 2013

	<ul style="list-style-type: none"> <li>• <b>You're Welcome (Quality criteria for young people friendly health services) (DH 2011)</b></li> </ul> <p><a href="https://www.gov.uk/government/publications/quality-criteria-for-young-people-friendly-health-services">https://www.gov.uk/government/publications/quality-criteria-for-young-people-friendly-health-services</a></p> <p>NB Guidance for children with Special Educational Needs is currently under development and will need to be considered when published</p>
<p><b>Relevant Inspection Frameworks for secure settings:</b></p>	<p><b>HMIP Inspections for Young Offender's Institutions framework:</b></p> <p>Her Majesty's Inspectorate of Prisons is an independent statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, immigration detention facilities and police custody.</p> <p>All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel Inhuman or Degrading Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.</p> <p>All Inspectorate of Prisons reports include a summary of an establishment's performance against the model of a healthy prison. The four tests of a healthy prison are:</p> <p>Safety: children and young people, particularly the most vulnerable, are held safely;</p> <p>Respect: children and young people are treated with respect for their human dignity</p> <p>Purposeful activity: children and young people are able and expected to engage in activity that is likely to benefit them.</p> <p>Resettlement: children and young people are prepared for their release into the community and helped to reduce the likelihood of re-offending.</p> <p>Under each test HMIP makes an assessment of outcomes for children and young people and therefore of the establishment's overall performance against the test. In some cases this performance will be affected by matters outside the establishment's direct control which need to be addressed nationally.</p> <p><b>Joint Inspections for Secure Training Centres.</b></p>

	<p><b>The existing standards for Ofsted, CQC and HMIP inspection of Secure Training Centre's (STC's) are available at:</b>  <a href="http://ofsted.gov.uk/resources/inspections-of-secure-training-centres-framework-for-inspecting">http://ofsted.gov.uk/resources/inspections-of-secure-training-centres-framework-for-inspecting</a></p> <p>These existing standards will be revised and updated when convenient following consultation, resulting in a revised framework. The new standards framework will include a separate health section. The intercollegiate healthcare standards for children and young people in secure settings and how the STCs are meeting these standards will be considered within the inspection evaluation.</p> <p><b>Ofsted Inspections for Secure Children's Homes with YJB places and welfare only homes:</b></p> <p>The inspection judgements and what they mean:</p> <p>Outstanding: a service of exceptional quality that significantly exceeds minimum requirements  Good: a service of high quality that exceeds minimum requirements  Adequate: a service that only meets minimum requirements</p>
<p><b>References for commissioners</b></p>	<p><b>Healthy children, safer communities (2009)</b>  <a href="http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_109772.pdf">http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_109772.pdf</a></p> <p><b>Securing excellence in commissioning for offender health (2013)</b>  <a href="http://www.england.nhs.uk/wp-content/uploads/2013/03/offender-commissioning.pdf">http://www.england.nhs.uk/wp-content/uploads/2013/03/offender-commissioning.pdf</a></p> <p><b>The Legal Aid Sentencing and Punishment of Offenders Act 2012 (LASPOA)</b> simplified the previous remand framework. All children now 12-17 are subject to the same remand provisions and all remanded children treated as looked after by the local authority designated by the court when remanded securely. More details can be found here:  <a href="http://www.justice.gov.uk/youth-justice/courts-and-orders/legal-aid-sentencing-and-punishment-of-offenders-act-2012">http://www.justice.gov.uk/youth-justice/courts-and-orders/legal-aid-sentencing-and-punishment-of-offenders-act-2012</a></p> <p><b>The STC Rules 1998</b> at <a href="http://www.legislation.gov.uk/uksi/1998/472/contents/made">http://www.legislation.gov.uk/uksi/1998/472/contents/made</a></p> <p><b>National Minimum Standards for Children's Homes</b></p>

- <http://webarchive.nationalarchives.gov.uk/20130401151715/https://www.education.gov.uk/publications/standard/publicationDetail/Page1/DFE-00030-2011>

### **Public health functions to be exercised by NHS England**

Service specification No.29

Public health services for people in prison or other places of detention, including those held in the Children & Young People's Secure Estate

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/256509/29\\_public\\_health\\_services\\_for\\_people\\_in\\_prison.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/256509/29_public_health_services_for_people_in_prison.pdf)

### **Evidence of Need about the Health and Well-being of Children and Young People in contact with the Youth Justice System (Ryan, Tunnard February 2012) [www.chimat.org.uk/resource/view.aspx?RID=111768](http://www.chimat.org.uk/resource/view.aspx?RID=111768)**

Afza M et al. Schedule for vaccination of prisoners and young offenders

[http://www.hpa.org.uk/webc/HPAwebFile/HPAweb\\_C/1209023458513](http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1209023458513)

Health Protection Agency. Use of combined hepatitis A and B vaccines in injecting drug users and prisoners.

[http://www.hpa.org.uk/webc/HPAwebFile/HPAweb\\_C/1221722411163](http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1221722411163)

Offender Health, Health Protection Agency. Feb 2008. Guidance on Chickenpox & Shingles Infection Control in Prisons, Places of Detention & Immigration Removal Centres.

[http://www.hpa.org.uk/webc/HPAwebFile/HPAweb\\_C/1204186195209](http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1204186195209)

Tuberculosis in prisons

<http://www.hpa.org.uk/Topics/InfectiousDiseases/InfectionsAZ/Tuberculosis/NationalKnowledgeServiceTB/ResourcesDevelopedByNKSTB/007tbknowinformationresourcesforTBinprisons/>

Oral healthcare in prisons and secure settings in England (BDA February 2012)

[http://www.bda.org/Images/oral\\_health\\_in\\_prisons\\_eng.pdf](http://www.bda.org/Images/oral_health_in_prisons_eng.pdf)

Attention is drawn to NICE guidelines as a source of evidence based practice:

Prevention of sexually transmitted infections and under 18 conceptions (PH3)

Promoting physical activity for children and young people (PH17)

Physical activity and the environment (PH8) NICE guidance

Available here: <http://guidance.nice.org.uk/PHG/Published> (public health guidance) and

<http://guidance.nice.org.uk/CG/Published> (clinical guidelines)

- **YJB Standards for Youth Justice Services**

<http://www.justice.gov.uk/downloads/youth-justice/yjb-toolkits/victims/national-standards-youth-justice-services.pdf>