

Children in Care Policy

NHS Devon

Version	8
Policy Sponsor	Chief Nursing Officer
Policy Lead	Director of Women's and Children's Commissioning
Approved by	Chief Nursing Officer and Chief Medical Officer
Approved on	23/04/2026
To be reviewed by	22/04/2027

Document change history (to add rows, copy and paste)			
Date	Change	Version number of policy	Comments
21/05/2017	New Policy	1	
12/06/2017	Policy Amendment	1.1	Document reviewed
29/03/2018	Policy Amendment	2	Amalgamation of NEW Devon and SD&T CCG Policy
25/07/2018	Policy Amendment	2.1	Document Review
25/07/2019	Policy Amendment	2.2	To be reviewed
28/07/2019	Policy Amendment	3	Reviewed
16/09/2022	Policy Amendment	4	Reviewed
01/11/2022	Policy Amendment	5	Reviewed
20/11/2023	Policy Amendment	6	Transferred to new template
14/10/2024	Policy Amendment	7	Private Fostering removed. Contact arrangements strengthened.
16/12/2025	Policy Amendment	8	Reviewed and legislation updated

Equality, diversity, and inclusion statement

NHS Devon is committed to the promotion of equal opportunities, addressing health inequalities and fostering of good relations between people protected under the terms of the Equality Act 2010, the Health and Social Care Act 2012 and Human Rights legislation. We are equally committed to the elimination of unlawful discrimination, harassment, and victimisation. To demonstrate this commitment, we develop, promote, and maintain policies, strategies, and operating procedures. Every effort is made to ensure that patients, employees, contractors, or visitors do not

experience discrimination; either directly or indirectly, because of their vulnerability; disadvantage; age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief; sex (gender) or sexual orientation.

All staff must comply with this policy. Compliance must reflect our organisational commitment to and policy on, equality, diversity, and inclusion. In addition, each manager and member of staff involved in implementing this policy must give due regard to the needs of those protected under law.

If you, or any other groups, believe you are discriminated against under the terms of the Equality Act, the Health and Social Care Act 2012 or Human Rights legislation by anything contained in this document; or you need this document in an alternative format, for example, large print, Braille, Easy read or other languages; please contact our Patient Advice and Complaints Team (PACT):

Tel: 0300 123 1672

Email: pals.devon@nhs.net

Contents		
Section	Title	Page
1	Introduction	4
2	Purpose and objectives	4
3	Scope	5
4	Definitions	5
5	Context	6
5.1	Unaccompanied Asylum-Seeking children	7
5.2	Children placed out of area	7
6	Accountabilities, duties, and responsibilities	8
7	Governance	10
8	Approval and review	10
9	Monitoring compliance and effectiveness	10
10	Quality and Equality Impact Assessment	10
	Appendices	12

1. Introduction

- 1.1 This policy applies to all employees of NHS Devon Integrated Care Board.
- 1.2 As described in the statutory guidance [“Promoting the health and well-being of looked after children” 2015 \(Updated 2022\)](#) the NHS has a significant role in ensuring the timely and effective delivery of health services to children looked after.
- 1.3 The ICB is accountable for meeting the health needs of children in care (CIC) and care leavers.
- 1.4 This policy describes how NHS Devon ICB will meet its responsibilities for CIC and the action staff should take to promote and meet the health needs of CIC and care leavers.
- 1.5 This policy needs to be read in conjunction with the [NHS Devon Safeguarding policies](#) which are available on the NHS Devon intranet and the New CIC Escalation Policy for when there are delays in receiving statutory health assessments.

2. Purpose and objectives

- 2.1. The aim of this policy is to support NHS Devon in achieving its strategic objectives for Children in Care and Care Leavers.
- 2.2. This policy will:
 - Give an overview of the definition of children in care and care leavers.
 - Provide key lines of responsibility for all employed by the NHS Devon ICB and organisational duties.
- 2.3 This policy should be read in conjunction with national guidance, as listed below:
 - Promoting the Health and Wellbeing of Looked After Children. (2015 Updated 2022)
 - Intercollegiate document (2025) Safeguarding children and young people & children and young people in care: Competencies for health care staff
 - Working Together to Safeguard Children (2024) Statutory guidance on multi-agency working to help, protect and promote the welfare of children
 - Looked-after children and young people NICE guideline [NG205] (2021)
 - [NHS England » Safeguarding children, young people and adults at risk in the NHS](#)
 - The Children Act (1989) and (2004)
 - Children and Social Work Act 2017
 - Care of Unaccompanied Asylum Seeking and Trafficked Children (DfE 2014)

- Children (Leaving Care) Act (2022)
- Who Pay's NHS England (2022)
- Children's Wellbeing and Schools Bill - Parliamentary Bills - UK Parliament
- Support for care leavers (2025) House of Commons
- [Children's social care: stable homes, built on love - GOV.UK](#) (2023)

3. Scope

3.1. This policy applies to all staff of NHS Devon ICB.

4. Definitions

4.1. According to the Children's Act 1989 a child is "looked after" if they are in the care of the local authority for more than 24 hours. Legally this could be when they are:

- Living in accommodation provided by the local authority with the parents' agreement (section 20)
- Children subject to a care order (section 31) or interim care order (section 38)
- Children subject to an emergency legal order to remove them from immediate danger (section 44 and 46)
- Children compulsory accommodated, including children remanded to local authority or subject to a criminal justice supervision order with a residence requirement (section 21)
- Unaccompanied asylum-seeking children and young people - **see Section 11.**

4.2 The term 'children in care' is often used interchangeably with the term 'looked after children' and more recently 'care experienced.' Many young people have expressed a preference for the term "children in care" (CIC), therefore this will be used for the purpose of this policy.

4.3 It does **not** include those children who have been permanently adopted or who are under a special guardianship order, privately fostering regulations or on the edge of care. If staff are unsure whether a child is "looked after" staff can contact the Designated Nurses on their generic email, for support and guidance; d-icb.lookedafterchildren@nhs.net.

4.4 A child will cease to be looked after at the point of reaching their 18th birthday (their status changes from looked after to being a young adult eligible for help and assistance from the local authority (Care Leaver), or if a court revokes the court order and recommend alternative arrangements to their looked after status.

- 4.5 Care Leaver - The Children (Leaving Care) Act 2000 states that a Care Leaver is someone who has been in the care of the local authority for a period of 13 weeks or more spanning their 16th birthday. These young people are statutorily entitled to ongoing help and support from the local authority after they leave care.

5. Context

- 5.1. Most children come into care due to abuse and neglect. Although they have many of the same health issues as their peers, the extent of these is often greater because of their past experiences. Almost half the children in care have a diagnosable mental health disorder and two-thirds have special educational needs. Delays in identifying and meeting their emotional well-being and mental health needs can have far reaching effects on all aspects of their lives, including their chances of reaching their potential and leading happy and healthy lives as adults (DOH/DfE March 2015).
- 5.2. The NHS has a significant role in ensuring the timely and effective delivery of health services to children in care as part of their statutory responsibilities. The NHS Constitution for England make clear the responsibilities of NHS Integrated Care Boards (ICBs) and NHS England to children in care and care leavers. The NHS must cooperate with NHSE/I, Public Health England, and Local Authorities to commission effective services
- 5.3. The Children Act (2004), and Children and Social Work Act (2017), outline the corporate parenting responsibility of local authorities and creates a duty for relevant partners, including health, to cooperate with local authorities to improve the well-being of children in their local area. The corporate parenting principles include the requirements to act in the best interests, and promote the physical, mental health and wellbeing of children in care and as corporate parents ask, “whether this would be “good enough for my own child.”
- 5.4. The recent Government care review Stable Homes Built on Love (2023) clearly outlines that strengthened corporate parenting responsibilities will be extended to relevant public bodies, including ICBs, in the near future placing ICBs on the same statutory footing as local authorities in relation to CIC and care leavers. ICBs must prepare for and implement these responsibilities without delay
- 5.5. This policy anticipates the forthcoming extension of corporate parenting duties to the Integrated Care Board and its health partners. This may include recognition of ‘care experience’ as a protected characteristic. While care experience is not currently included within the Equality Act 2010, many local authorities now formally recognise it within their organisations. The ICB will proactively consider these developments in its approach to policy and practice.

5.6. NHS Devon ICB has a responsibility to:

	• Listen to and act upon the views of care experienced children and young people when commissioning services. • Maintain community focused leadership for CIC ensuring that their needs are at the forefront of local planning and service delivery. • Ensure all staff have an understanding of children in care and trauma awareness as part of NHS Devon's collective corporate parenting responsibilities to our cared-for population in Devon. • Ensure that all health providers from whom they commission services have a policy to promote the health and well-being of children and young people in care. These policies should be in line with national requirements and be easily accessible to staff at all levels within each organisation. • Ensure the health needs of children and young people in care are integral to contracts and service level agreements. • Ensure that all health agencies with which they have commissioning arrangements are linked into the relevant Corporate Parenting Board. • Ensure that appropriate time, funding, supervision, and support is in place to enable the Designated professionals to meet their responsibilities effectively. • Ensure every CIC has the required initial and review health assessments and health plan in place within the statutory time limits by commissioning appropriate health services. • Ensure support and services for CIC are provided without undue delay by commissioning appropriate health services. • Ensure the function of the organisation is aligned with any legislative changes that affect their duty to CIC and Care Leavers.
--	---

5.1 Unaccompanied Asylum-Seeking Children (UASC)

5.1.1 UASC are Children in Care and have the same rights to care as UK nationals.

5.1.2 An Unaccompanied Asylum-Seeking Child is a child who is applying for asylum in their own right; and is separated from both parents and is not being cared for by an adult who by law has responsibility to do so. A child may move

between the unaccompanied and accompanied categories whilst their asylum applications are under consideration, e.g., where a child arrives alone but is later united with other family members in the UK, or a child arrives with their parents or close relatives but is later abandoned, or a trafficked child, or one brought in on false papers with an adult claiming to be a relative.

- 5.1.3 The majority of UASC are aged between 15-17 years, although a small proportion are younger.
- 5.1.4 All agencies must be aware that UASC can also arrive with adults who allege to be their carers or family members. Professionals should not assume that children are safe within such arrangements, and a safeguarding referral should be considered.
- 5.1.5 UASC have significant physical and mental health needs. These may be caused by previous poor access to healthcare, their experience of hardship, including the witnessing and experiencing of traumatic events, and the duration of and conditions experienced on their journey to the UK.
- 5.1.6 Consultation with young people across Devon found that the preferred terminology is Asylum Seeking Young Person and is used within practice.

5.2 Children Placed Out of Area

- 5.2.1 NHS Devon is responsible for the health needs of CIC placed out of area. NHS England guidance, 'Who Pays? Determining responsibility for payments to providers,' provides the framework for establishing responsibility for commissioning an individual's care within the NHS. [NHS England » Who Pays? 2022](#).
- 5.2.2 On receipt of notification from the Local Authority that a CIC is placed out of area the Designated Nurse will ensure that the receiving ICB is notified, and that responsible commissioner arrangements are in place.
- 5.2.3 It is the responsibility of health providers, to contact and make arrangements for CIC moving out of their geographical area; with the new receiving health provider/s to ensure timely continuity of healthcare. Designated Professionals can offer support and advice as required, if there are any complications with the transfer of care.
- 5.2.4 For those CIC placed in the area by another LA, the Designated Nurses will ensure that effective communications are in place between placing and receiving ICBs to support health care provision, if notified that the child is placed in the County of Devon by the 'originating' ICB.
- 5.2.5 NHS Devon have a responsibility to ensure equity in access and unwarranted variation in commissioning and provision of services for care experienced people.

6. Accountabilities, Duties and Responsibilities

Chief Executive Officer	The Chief Executive Officer has ultimate accountability for the strategic direction and operational management of NHS Devon, including compliance with all legal, statutory and policy requirements for children in care and care leavers.
Chief Nursing Officer (CNO)	The Chief Nursing Officer is responsible: • ensure the policy is appropriate and robust. • Work with the Policy Lead to ensure procedures/protocols and other supporting documents for this policy are updated.
Policy Lead / Author Designated Professionals for Children in Care and Care Leavers	The Policy Lead is responsible: • ensure the policy is in line with Department of Health and Social Care guidance, legal requirements, and advice from clinical bodies. • complete a QEIA and Implementation Plan where required • undertake a fair and proportional engagement period with the relevant stakeholders as part of the document's development • ensure that the policy is in alignment with NHS Devon's strategy and values • ensure that the policy is developed, approved, disseminated and monitored with Policy Sponsors, maintaining and updating procedures / protocols and other supporting documents for this policy. • Review the monthly performance and exception reporting provided by the local Providers • Have a scrutiny and monitoring role and provide regular reports to the QPEC. • Report into the Corporate Parenting Board as per local arrangement, providing assurance and challenge on statutory responsibilities • Provide advice to ensure the range of services commissioned and contracted by the ICB take account of the need to promote the health and well-being of care experienced children and young people • Offer clinical expertise and support to ensure compliance with the statutory guidance, and leadership on the delivery of a quality service for CIC and care leavers • Ensure that the perspective and views of CIC and their carers inform the design and delivery of local health services • Provide advice, support, and clinical supervision to the Named CIC professionals

	• Membership of the Corporate Parenting Board in conjunction with other health service planners/commissioners as per local arrangement • Ensure there is a regular qualitative assurance of CIC health reviews undertaken by Providers • Review and evaluate the practice and learning in relation to safeguarding reviews or other management reviews, that involve CIC. This would include ensuring that opportunities for sharing relevant best practice and learning are maximised • Provide an annual report and regular assurance to the ICB • Deliver training to commissioners and the Governing Body to ensure that they understand their statutory responsibilities • Ensure all ICB staff receive CIC and Trauma Awareness training at the appropriate level for their role in line with the Intercollegiate Framework.
Commissioning and Contracting Managers	Ensure that the service specifications of all health providers from whom services are commissioned include clear standards and operating principles for promoting the health and wellbeing of CIC consistent with statutory guidance.
Finance, Performance and Quality Committee	Quality reports provided for assurance and updates on effectiveness and compliance.
Line Managers	Line managers have a responsibility to ensure their staff comply with NHS Devon policies and standards within their areas of responsibility.
All Staff	• Employed or engaged staff have a duty to comply with NHS Devon policies and standards as outlined in their contracts of employment and codes of conduct. • All employees should contribute to promoting the health needs of CIC and care leavers. • Be up to date with the appropriate level of CIC training as set out in the Intercollegiate Framework document. • Any risks around services for CIC should be escalated to the Head of Safeguarding, Chief Nursing Officer and Head of Women and Children's Commissioning, who will advise on further escalation procedures as required.

7. Governance

- 7.1. All staff will be informed of the approval of the Policy via the Staff Bulletin which will provide a link to the document on the NHS Devon Intranet.
- 7.2. NHS Devon Senior Managers, or their designated representatives, will implement this policy by:

- Notifying all staff of its existence.
- Destroying all superseded paper-based versions of the policy and electronic versions retained in their area.
- Having adequate knowledge of, and / or access to, all relevant legislation to ensure that compliance with such legislation is maintained.
- Discussing with staff as part of their regular one-to-ones how they seek to achieve their individual objectives around policy review and maintenance.
- Ensuring all staff complete the required level of training as indicated in the Training Matrix and the Intercollegiate Document

8. Approval and Review

- 8.1. CIC policy will be sent to the Chief Nursing Officer and Chief Medical Officer for approval.
- 8.2. This policy will be reviewed bi-annually, or sooner if required, to ensure that it is current, relevant and reflects the strategic aims, objectives, organisational structures, and responsibilities of NHS Devon.

9. Monitoring compliance and effectiveness

- 9.1. The policy will be monitored via the Designated CIC meetings to ensure that it is achieving what it said it would and updated in line with changes in strategic guidance.
- 9.2. The overarching policy will be reviewed bi-annually by the Designated Professionals alongside senior Commissioners.

10. Quality & Equality Impact Assessment (QEIA)

- 10.1. In line with the Developing and Managing of Procedural Documents Policy a QEIA has been completed.
- 10.2. The CIC policy is considered positive in all areas including its impact on quality and equality by raising staff awareness of CIC and care leavers.
- 10.3. It also has a positive impact on Core 20 and Core plus. Staff accessing the revised policy and working in partnership with Designated CIC colleagues will support the ICB to meet its statutory responsibilities.
- 10.4. There are no risks associated with this policy. There are no outstanding actions.

APPENDIX One – Glossary of terms:

Terms	Definition
CIC	Children in Care
ICB	Integrated Care Board
LA	Local Authority
UASC	Unaccompanied Asylum-Seeking Children

APPENDIX Two – References:

- Promoting the Health and Wellbeing of Looked After Children. (2015 Updated 2022)
- Intercollegiate document (2025) Safeguarding children and young people & children and young people in care: Competencies for health care staff [Home | Child health Safeguarding](#)
- Working Together to Safeguard Children (2024) Statutory guidance on multi-agency working to help, protect and promote the welfare of children
- Looked-after children and young people NICE guideline [NG205] (2021)
- [NHS England » Safeguarding children, young people and adults at risk in the NHS](#)
- The Children Act (1989) and (2004)
- Children and Social Work Act 2017
- Care of Unaccompanied Asylum Seeking and Trafficked Children (DfE 2014)
- Children (Leaving Care) Act (2022)
- Who Pay's NHS England (2022)
- [Children's Wellbeing and Schools Bill - Parliamentary Bills - UK Parliament](#)
- Support for care leavers (2025) House of Commons [CBP-8429.pdf](#)
- [Children's social care: stable homes, built on love - GOV.UK](#) (2023)