

**HEALTH SCRUTINY PANEL
Foetal Alcohol Syndrome
– ACTION PLAN**

DATE: 01 August 2017

NB: If your response to a scrutiny recommendation is that the Council already does this, please can you comment on this in the action column by stating either that:

- i) The action has been implemented as a direct result of the findings of the scrutiny investigation; or
- ii) The service was already undertaking this action prior to the scrutiny investigation taking place.

In the timescales column do not use the phrase ‘ongoing’ as timescales should be as specific as possible.

| SCRUTINY RECOMMENDATION | PROPOSED ACTION | POST TITLE | BUDGET COST | TIMESCALE |
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| a) That the Director of Public Health brings together an expert group of professionals including appropriate representation from South Tees CCG, Public Health, South Tees NHS Hospitals Foundation Trust, Safeguarding Children’s Services, CAMHS, Community / LAC Paediatricians, Educational Psychologists and the FASD Network to take this work forward in 2017/18. | A task and finish expert group will be established with the recommended membership. The findings from this group will be reported to the Children’s Trust Board. | Director of Public Health Health Improvement Specialist (Best Start and Families) | None. | October 2017 |
| b) That a specific piece of research be commissioned by the Council and the CCG in Middlesbrough / Tees Valley on FASD. That collective effort is made to secure the appropriate funding | The scope of the research and how it will be progressed will be considered by the expert task and finish group. | Health Improvement Specialist (Best Start and Families) | £8,000 (study cost) | October 2017 (decision made re take-up of study) |

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| <p>requirements in order that a local research project on FASD can be undertaken. People with expertise are invited to secure external funding to invest in a study, which includes bloods being taken around a mother's 'booking in' appointment so prevalence rates in Middlesbrough can be established.</p> | | <p>Development Manager NHS South Tees Clinical Commissioning Group (CCG)</p> | | |
| <p>c) Given it is estimated that there are between 400 – 1,300 children in Middlesbrough with FASD there needs to be a pathway of care for all FASD spectrum disorders and this needs to be included in the Joint Strategic Needs Assessment. This should identify the commissioning responsibilities. For example that a service be developed where a child can have assessments undertaken by appropriate professionals which then make collective recommendations on the support that can be provided to the child.</p> | <p>The service was already undertaking work in this area. Middlesbrough's Children's JSNA is presently being finalised and will include FASD. This will inform the recommendations for the children and young people's plan and the work programme for joint commissioning and service improvement.</p> | <p>Health Improvement Specialist (Best Start and Families) JSNA manager MBC</p> | <p>None</p> | <p>September 2017</p> |
| <p>d) That the above pathway of care needs to ensure that appropriate support for families is also developed.</p> | <p>As above.</p> | <p>As above.</p> | <p>None</p> | <p>TBC</p> |
| <p>e) Clinical capacity in this field needs to be further developed. This is not a childhood condition and service provision needs to reflect the support required throughout an individual's lifespan. Adult social care need to review its response to those</p> | <p>Action to be reviewed by Children's, Adult Social Care and CCG as part of the work on SEND and transition from children to adult services.</p> | <p>Children's Care Adult Social Care South Tees CCG</p> | <p>None</p> | <p>TBC</p> |

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| <p>affected by FASD and plan for future service provision.</p> | | | | |
| <p>f) That the Council and its partners need to raise awareness in schools to ensure young people are fully aware of the dangers that drinking during pregnancy can have on an unborn child. The campaign material should be clear, precise and written in the strongest possible language.</p> | <p>The Council will look to develop and implement a toolkit for schools to use. The work will link to existing school programmes such as 'Respect yourself' 'Y-Risk It' and the public health offer for schools that is being developed.</p> | <p>Health Improvement Specialist (Best Start and Families) Risk Reduction lead (Children's Services).</p> | <p>Within existing public health budgets</p> | <p>October 2017</p> |
| <p>g) That appropriate training is available to relevant professionals on FASD in Middlesbrough. Including VCS organisations.</p> | <p>The service was already undertaking work in this area. Public Health have recently commissioned some additional training around FAS, this training will be reviewed to understand if it is effective to inform wider roll out.</p> | <p>Health Improvement Specialist (Best Start and Families)</p> | <p>Within existing public health budgets</p> | <p>October 2017</p> |
| <p>h) That the Council uses its powers as a licensing authority to further develop its Licensing Policy highlighting the damage that alcohol can cause to an unborn child. A condition for publicity material to be displayed at the point of sale be introduced. This influence should be used with other outlets including pubs, restaurants etc.</p> | <p>The service was already undertaking work in this area. This action will be included in the alcohol strategy implementation plan and further discussions with the Licensing Committee on how this could be rolled out.</p> | <p>Interim Service Lead – Public Protection</p> | <p>None</p> | <p>December 2017</p> |
| <p>i) That the Mayor write on behalf of the Council to the National Institute of</p> | <p>Director of Public health to draft a letter for the mayor to send to NICE for the</p> | <p>Director of Public Health</p> | <p>None</p> | <p>September 2017</p> |

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| <p>Clinical Excellence (NICE) for recognition, referral, diagnostic assessment and post diagnosis guidance on FASD to be issued for clinicians. The guidance would provide an evidence based clinical protocol for diagnosis.</p> | <p>guidance to be developed and issued to clinicians.</p> | | | |
| <p>j) That the Council continue to review and improve through children’s safeguarding services the support in place to adopters, foster carers and connected persons carers. As well as all parents and children in need.</p> | <p>Children’s services and safeguarding leads to progress the recommendation as part of service improvements in the early help and safeguarding service areas.</p> | <p>Director for Prevention and Partnerships Director for Children’s Services</p> | <p>TBC</p> | <p>TBC</p> |