

Minimum Data Set and Audit Quality Markers for UASC¹

The UASC Emotional Health and Wellbeing Network is looking to shape a model of care which can give account through audit the quality of service delivery from an evidence based perspective. These markers are designed to support commissioners in capturing principles of good practice and to help identify areas of practice and how they are being achieved.

These markers are designed to stimulate discussion and support informed judgement, yet they do not promote or presume any particular model or approach for how to achieve them, rather they support variety, innovation and link to a governance matrix which is already agreed.

The following are markers that act as indicators of clinical excellence and are based on research evidence, practice experience and statutory requirements. They also become the data set from which further evidence of clinical practice and excellence can be obtained.

These markers are in the following categories:

- Health assessment
- Health prevention and needs
- Emotional wellbeing and mental health

Health Assessment:

Health Assessment	Yes	No
Initial health assessment within 28 days:		
Informed consent:		
Social care notification to health care systems:		
Registered with GP:		
Age assessment with identified purpose and need		
Assessed for the presence and effects of malnutrition:		
Infection and injuries to include signs of:		
Torture		
Beatings		
War wounds		
Sexual exploitation		
Trafficking and referral into National Referral Mechanism		
If female:		

pregnancy possibility		
Female Genital Mutilation		

Health prevention and needs:

Health prevention and needs	Yes	No
Nutritional support		
Sexual advice		
Contraception		
Alcohol		
Smoking		
Illegal Substances		
Immunisation protocol explored		
Immunisation protocol followed		
Screening for:		
T.B.		
Hepatitis B		
Hepatitis C		
HIV		
Intestinal parasites		
Malaria		
Other tropical diseases		

Emotional wellbeing and mental health:

Emotional wellbeing and mental health	Yes	No
Screening for:		
PTSD		
Anxiety		
Depression		
Evidence of continuation of health treatment(S)		
Cultural sensitivity in treatment formulation		
Is child involved in formulation of care plan		
Child has access to interpreters		
Child has a home placement		
Child has a friendship network		
Child has a culturally relevant network that includes:		
Religious		
Dietary		
Dress beliefs		
Child has community networks:		
Has there been a revisiting of asylum application		

Clinical availability, abilities and competencies of staff	Yes	No
Allocated and named Social worker		
Allocated and named advocate		
Allocated and named legal representative		
Allocated and named school/educational structure		
Clinician(s) have advanced communication skills for UASC work		
Has training in the use of screening tools		
Has used the referral pathway for UASC		
Has regular clinical supervision/consultation from a level 3 or 4 clinician		

ⁱ These quality markers are taken from NICE EP23 - LAC 9.4 Unaccompanied asylum seeking children - John Simmonds & Florence Merredew: The Health Needs of Unaccompanied Asylum Seeking Children and Young People; John Simmonds, Director of Policy, Research and Development Florence Merredew, Health Group Development Officer *British Association for Adoption and Fostering*.