

Safeguarding Children - Declaration of Compliance January 2010 Update

In July 2009 the NHS Chief Executive, David Nicholson, requested that all Trust Boards review their statutory obligations regarding Safeguarding Children and formally publish their compliance.

In August 2009 the Trust undertook a comprehensive benchmarking exercise to assess our compliance against relevant standards and the findings were presented to the Trust Board in September 2009.

In accordance with the National Safeguarding Children Review the Trust is compliant with all of the following statements:

- **The organisation meets statutory requirements in relation to CRB checks**

The Trust is a registered body with the Criminal Records Bureau (CRB) and adheres to the CRB Code of Practice established under section 122 of Part V Police Act 1997. As such the Trust is required to demonstrate compliance with the statutory duties set out in the Code including the demonstration of appropriate verification procedures when checking the identity of Disclosure applicants and the correct management of sensitive and personal data within Disclosures. The Trust participates in assurance audits/visits undertaken by the CRB. In addition the Trust's recruitment processes including the arrangements for CRB Disclosures are part of the internal audit programme (minimum 2-yearly). The Trust has a formal policy specifically relating to CRB Disclosures which sets out the responsibilities of the Director of Human Resources, appointing managers and current and prospective employees.

- **Child protection policies and systems are up to date and robust, including a process for following up children who miss outpatient appointments and a system for flagging children for whom there are safeguarding concerns.**

The Trust's Safeguarding Children Policy was reviewed in December 2009 and following consultation is due to be ratified in the New Year.

In addition, the Trust has adopted the local safeguarding children board's policies and procedures. All of these policies and procedures are available via the intranet, which includes guidance as to the triggers promoting referral to Children and Young People Service and when to enquire whether a child currently has a Child Protection Plan.

Specifically, the Trust has a procedure which details the action required if a child fails to attend an outpatient appointment. All child protection concerns are noted in the patient's healthcare records, and filed in the specific Safeguarding Children Section.

Staff report ("flag") concerns to the Named Nurse – Safeguarding Children, who would record all relevant details, and advise staff about case management and refer to other agencies as necessary. All concerns are notified to the named professionals who respond to the individual reporting the concern using an Acknowledgement and Advice sheet. This sheet is filed in the patient's record.

The Paediatric Liaison Nurse also reviews the notes of any adults seen in A&E, where staff identify potential concerns with regard to the children in their care.

• All eligible staff have undertaken and are up to date with safeguarding training at level 1. In addition, a review of other training arrangements should be completed within 6 months, taking account of emerging messages from the national review of safeguarding training.

The Trust's Safeguarding Children Policy states that all staff should receive level 1 training at corporate induction (regardless of which route they access induction) and then attend an update session every 3 years (minimum) delivered through e-learning, rolling programmes or ad hoc sessions. Currently 100% of the Trust staff have achieved Level 1 training. Through our recent Training Needs Analysis further training opportunities have been requested for staff requiring Level 2 & 3 training through the LSCB. Initially the SHA requested that all staff achieve Level 2 training, however following discussion this has been clarified to be 'eligible' staff only.

Designated and/or named professionals are clear about their role and have sufficient time and support to undertake it.

The Trust has in post:

- Named Doctor, with dedicated time in job plan,
- Part-time Named Nurse, Modern Matron for Safeguarding Children, post dedicated to safeguarding children
- Full-time Named Midwife, post dedicated to safeguarding children

Both the Child Health and Obs. & Gynae Directorate have acknowledged the need to increase the support to the Modern Matron and Named Midwife. The Modern Matron will be supported by 1.0 WTE to focus on the caseload work. This will allow the time required for the Modern Matron to concentrate on the increased requirements at a corporate level, including the provision of training, support and expert advice wherever necessary and will provide clear ownership for the collation and follow through of corporate action plans and the actions therein. The Named Midwife will be supported by 0.6 WTE midwives working on a rotational basis within the department.

• There is a Board level Executive Director lead for safeguarding, the Board review safeguarding across the organisation at least once a year and has robust audit programmes to assure it that safeguarding systems and processes are working.

The Director of Nursing, Midwifery & Patient Services is the Executive Lead for Safeguarding Children within the Trust. The responsibility for gaining assurance in relation to Safeguarding Children is through the Safeguarding Steering Group which is chaired by the Director of Nursing, Midwifery & Patient Services. The nominated non-executive lead is the Chairman of the Trust. The Trust Board receives quarterly updates on the progress of Safeguarding Children issues and if there were any major cases or issues with implications to the Trust then a further exceptional report would be written immediately for the Boards attention.

Audit and Monitoring

The effectiveness of the Trust Safeguarding Children Policies is monitored via a number of different routes, including:

- A continuous review of records by the Paediatric Liaison Nurse of all children who attend A&E to identify those where there may be child protection concerns.
- Paediatric Liaison Nurses attend the weekly A&E Paediatric Clinic to assist with the management of children with specific injuries and those children identified potentially at risk of significant harm. Adults who are parents or carers and who present in A&E with issues that may impact negatively on children in their care are also reported to Paediatric Liaison Nurse.
- All child protection medical reports are copied to the Named Nurse/Named Doctor to ensure that reports are of an appropriate standard and that procedures have been followed.
- All child protection referrals are copied to the Named Nurse; the case is not closed until appropriate procedures have been followed and outcome for the child is known.

- The Safeguarding Children's Steering Group meet monthly to:
 - ❖ Review progress with the Trust's rolling Markers of Good Practice.
 - ❖ Review any new local/regional/national publications
 - ❖ Review action plans from Serious Case Reviews.
 - ❖ Monitor progress against the Safeguarding Children Audit Plan.
- Any actions identified through the reviews of national guidance, serious case reviews or managements reviews are added to the action plan to ensure completion.

A significant amount of work has been undertaken by the Trust during the last 9 months to improve our current Safeguarding Children standards. However, to ensure our full compliance, the continued progress of the Trust-wide action plan will be monitored by the 'Named Professionals' within the Trust. The monitoring of our improvement will be on a monthly basis and reported through the Trust Safeguarding Childrens Steering Group bi-monthly, chaired by the Director of Nursing, Midwifery and Patient Services as the Executive Lead for Safeguarding.