

South Tees Hospitals 
NHS Foundation Trust

Meeting / Committee:	Board of Directors	Meeting Date:	31 July 2012
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This paper is for: (Only 1 column to be marked with x as appropriate)	Action/Decision	Assurance	Information X
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Title:	Safeguarding Children mid year update
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Purpose:	The purpose of this report is to provide the Board with an update of the trust position in relation to Safeguarding Children and detail the on going challenges faced by the organisation.
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Summary:	<p>The paper provides information on:</p> <ul style="list-style-type: none"> • Arrangements within the trust to support practitioners in Safeguarding Children • Section 11 requirements • PCT contractual requirements including for training, safeguarding supervision and responsibilities external to the organisation • External inspections • Serious Case Reviews
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Prepared By:	Bev Walker ADN Helen Smithies Lead Nurse Safeguarding Children	Presented By:	Alison Smith Assistant Director of Nursing – Children’s Champion
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Recommendation:	The Board is asked to note the contents of the report and continue to support the Safeguarding Children Team
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Implications (mark with x in appropriate column(s))	Legal X	Financial	Clinical X	Strategic X	Risk & Assurance X
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Safeguarding Children mid year update

Introduction

It is now six months since the Safeguarding Children Annual Report for 2011 was presented to the Board in January 2012.

This paper presents an update of the trust position in relation to Safeguarding Children and details the on going challenges faced by the organisation.

Safeguarding Children Team

The current establishment of the SGT is

Role	WTE
Lead/Named Nurse	2
Senior/Specialist Nurse/Midwife	3
Safeguarding Nurse/Trainer	0.6
Administrator	4.72

The team currently practices from two sites, JCUH and Challenor building Guisbrough. In these times of finite resources it is of concern that this is inefficient both in staff time and in duplication of effort. However, more importantly team members have expressed concern that it is necessary for them to make judgements on a child's safety without all information being available to them when they are not in the same venue as the safeguarding file. The Assistant Director of Nursing and Patient Safety (Community) and the Lead Nurse Safeguarding children are keen to address this issue as soon as possible and are actively looking for accommodation for the team,

Section 11 Children Act 2004

The trust has a statutory duty under Section 11 Children Act 2004 to discharge its duties with regard to the safety and welfare of children. Each year, each LSCB on which the trust is a statutory member requires the organisation to complete a comprehensive self assessment audit. Submissions were sent to both Middlesbrough and Redcar and Cleveland LSCB in spring 2012. As a result of the audit an action plan was drawn up which is attached as Appendix 1.

Changes in Primary Care Contract requirements 2012-13

Both NHS Tees and NHS North Yorkshire and York require the trust to meet contractual requirements in relation to Safeguarding Children. Whilst many of the requirements are unchanged from 2011-12 there are two major changes in both area's requirements.

Training. Both PCT's now require training to be delivered to the requirements of RCPCH 2010. This requires significantly increased training for all levels of staff

Level	Current provision	New requirements	Number of staff
Level 1	20 min alternate years	30 mins a year	3168
Level 2	20 min alternate years	2 hours in three years	5246
Level 3 Core	1 hour a year	4 hours in three years	166
Level 3+	1 hour a year	12 hours in three years	964

This level of training will undoubtedly have an impact on divisions in relation to increased requirement to have staff away from clinical duties. In addition the level of training provision is outside the current capacity of the Safeguarding Children Team Trainer. The trust has been advised that the training provision currently provided to the Division of Community services by NHS Tees will cease from 1 October 2012. As a result of which additional funding has been secured to provide additional training capacity for the Safeguarding children team which will go some way to making up the shortfall.

Safeguarding Supervision. Safeguarding supervision is one of the key roles of the Safeguarding Children Team identified in the 2011 Annual report. The requirements of NHS Tees and NHS North Yorkshire and York differ significantly and are not compatible with each other. As described in the Annual report a review of safeguarding supervision was undertaken following vertical integration following which a new supervision policy was drawn up and ratified by the trust. This trust policy has been in use since November 2011 and will be formally reviewed in August 2012. The policy requires supervision be accessed by caseload holders with the frequency being judged on a case by case basis by consultation between the supervisor and the practitioner.

NHS Tees. The supervision requirements of NHS Tees are based around the child. The contract requires that supervision be accessed by case load holders in relation to all children subject to a child protection plan, children in need or vulnerable children every three months. Given the large number of such children in the area this is a very significant requirement. Prior to vertical integration with STHFT, MRCCS had in place 1.6 WTE additional supervisors to take forward this work however, this funding was year on year. In 2011 it proved impossible to attract suitable applicants into temporary posts. Negotiation with Tees PCT has now secured funding on a recurring basis which will allow the recruitment of 1.6 WTE Specialist Nurses Safeguarding Children to assist in meeting the supervision requirements of the organisation

NHS North Yorkshire and York. The supervision requirements of NHS North Yorkshire and York are based around the practitioner. The contract requires that all practitioners who work with children or young people receive supervision three times a year. This requirement would include practitioners not required under the NHS Tees arrangements such as paediatric nurses, accident and emergency staff and hospital based midwives. NHS North Yorkshire and York have been made aware the trust is unable to fulfil these requirements at this time and is aware of the Safeguarding Supervision policy.

Ofsted/CQC inspection for Safeguarding Children and Looked after Children

As reported in the 2011 Annual report the Ofsted/CQC inspection for Safeguarding Children and Looked after Children took place for Middlesbrough in June 2011. A report on progress towards the action plan was presented to Risk and Assurance Sub group in March. This action plan has now been completed

The same inspection but for the Redcar and Cleveland area was expected initially by the end of April however, it actually took place between 21 May and 1 June 2012. The final report has not yet been received and will be the subject of a separate report in due course.

Safeguarding Children responsibilities outside STHFT

Following vertical integration with MRCCS the trust acquired responsibility for providing support to variety of professions and services outside of STHFT as a result of quality outcome schedules lasting till 2014 signed just prior to integration. As a result the Safeguarding Children Team provides advice and support to amongst others, General Practitioners, Dentists, and pharmacists. In addition regular safeguarding supervision is provided for the Fulcrum medical practice which provide services for Substance misusing adults and their families. The team are currently endeavouring to quantify the resource implications of this.

Serious Case Reviews

Serious Case Reviews (SCR) are always carried out by Local Safeguarding Children's Boards (LSCB) when a child dies and abuse or neglect is know or suspected to be a factor in the death and must be considered when a child sustains a life threatening injury or serious sexual assault and the case gives rise to concern about the way in which local professionals services work together. The trust completed a SCR towards the end of 2011 on the 'Smith' family which was reported to the board in spring 2012. To date there one action remains outstanding in relation to that SCR which is being taken forward by a consultant from Accident and Emergency Department.

Where the criteria for a SCR are not met the LSCB can request that a single agency or organisation carries out an individual management review (IMR) into the services offered to a child/family. North Yorkshire LSCB have requested this in relation to a child called 'Andrew' who was born at The James Cook site. This IMR has recently been completed and submitted to the Designated Nurse for North Yorkshire and York. A report will be submitted to the Board in due course on the findings.

Conclusion

This paper has provided the board with details of the Trusts current position in relation to its Safeguarding Children responsibilities. The board are asked to note the content of the report and continue to support the safeguarding children team in their work. A full annual report for 2012 will be submitted in January 2013.

Bev Walker

Assistant Director of Nursing and Patient Safety (community services)

Helen Smithies

Lead Nurse Safeguarding Children

June 2012

Appendix A

Section 11 Audit Action plan

Details of standard		Action needed	Lead officer and contact details	Timescales
No	Standard			
1	1.5) Senior managers promote a culture of listening to and engaging in dialogue with children and young people both when developing services and when making individual case decisions	<p>Full implementation of the Children and Young Peoples Strategy by 2017 Approved by Board of Directors 30 January 2012</p> <p>The Vision of the strategy is to deliver services that meet the health needs of children, young people, parents and carers and provide effective and safe care, through appropriately trained and skilled staff working in a suitable child friendly and safe environment. Children, young people, parents and carers will participate in designing NHS services that are readily accessible, respectful, empowering, follow best practice and provide effective response to their needs is one of the Key Strategic objectives.</p>	Assistant Director of Nursing - Children's Champion	As per strategy
2	<p>1.6/2.5) When commissioning a service from another organisation there are clear mechanisms in place to ensure that they are compliant with s11.</p> <p><i>(Essential requirement)</i></p>	<p>Assurance to be obtained from PFI providers on training and recruitment policies</p> <p>Letter to Director of Planning to seek assurance from PFI provider</p>	Assistant Director of Nursing and Patient Safety	February 2012

Details of standard		Action needed	Lead officer and contact details	Timescales
No	Standard			
3	6.7) There are acceptable use policies for staff that detail how staff and children/young people can use digital technology.	As detailed within the trust's E Safety Action Plan	Assistant Director of Nursing - Children's Champion	To be agreed
4	6.10) There are written procedures for handling allegations against staff and volunteers and all staff are aware of them.	Trust Policy under being developed to link with multi agency policy following vertical integration with community	Assistant Director of Nursing and Patient Safety & Assistant Director of Human Resources	July 2012
5	7.4) Staff are able to identify children who would benefit from additional services and require a CAF.	Review training needs for relevant staff re CAF following vertical integration	Assistant Director of Nursing and Patient Safety	March 2012