West Hertfordshire Hospitals NHS
NHS Trust

Agenda Item 111/11

Public Board, 28 July 2011

Safeguarding Children Annual Report

Presented by: Natalie Forrest, Director of Nursing

Purpose

The purpose of this Annual Report is to provide an overview of Safeguarding Children activity across the Trust in the last 12 months. This report sets out the work carried out by West Hertfordshire Hospitals NHS Trust Safeguarding Children Team. In addition this report will provide assurance to the Board that the Trust meets its statutory responsibilities in relation to Safeguarding Children.

Background

Safeguarding Children continues to have a high profile on a national basis. The change of Government in May 2010 generated a further review of safeguarding children arrangements. The Coalition Government commissioned Prof. Eileen Munro to undertake a review of Child Protection in England following on from the most recent Lord Laming recommendations. The Government are yet to respond to the recommendations made in the final report. There have also been changes to policy previously agreed under the Labour Party leadership; this includes discontinuation of Contactpoint and changes to the Independent Safeguarding Authority (ISA) vetting and barring arrangements.

In 2010 the revised "Working Together to Safeguard Children" (HM Government March 2010) was published which contains statutory and non-statutory guidance for agencies working with children. The Hertfordshire Safeguarding Children Procedures have been revised in light of the revised publication.

The Intercollegiate Document "Safeguarding Children and Young People: Roles and Competencies for Health Care Staff" has also been revised in 2010. This has significant implications in regard to which groups of staff require specific levels of safeguarding children training. This will be addressed later in this report.

In October 2010 the Trust were involved in the NHS Hertfordshire Ofsted/CQC inspection which focussed on safeguarding children arrangements and Children Looked After. The report following this inspection focussed favourably on the services provided by the Trust.

Statutory requirements for monitoring

- The National Service framework for Children and Maternity Services (NSF) incorporates the statutory duties within its core standard, standard 5 relates to safeguarding children.

- The requirement of Acute Trusts to safeguard and promote the welfare of children as set out in section 11 of the Children Act 2004 and Working Together (2010) are monitored by the Care Quality commission (CQC) and included within core standard outcome number 7.

Workforce

In line with Section 11 of the Children Act 2004 the trust has named professionals in post, these are:

- Named Doctor for Safeguarding Children
- Named Nurse for Safeguarding Children (commenced in post September 2010)
- Named Midwife for Safeguarding Children (temporary cover while being recruited into).

These roles are supported by 2 (1 WTE) experienced Safeguarding Children Nurses based at Watford General Hospital and effective safeguarding children practice is well established across the Trust.

Assurance

Ultimately the Trust board requires assurance that the trust is fulfilling it's obligations to make arrangements to safeguard and promote the welfare of children.

The Trust has an established Safeguarding Children Committee chaired by the Director of Nursing. The Committee has developed a core action plan (see appendix 1) based on strategic safeguarding aims for the Trust. This is closely monitored at each quarterly meeting. The Committee aims to ensure the Trust is aware of relevant changes within National Policy and to regularly review our policies and procedures in line with recommendations and guidance.

The Safeguarding Children Link Nurses Group has been established as a sub-group to support the Safeguarding Children Committee. This group is chaired by the Named Nurse has cross divisional membership to ensure that systems and procedures are in place to safeguard children in non paediatric areas such as the adult wards.

External reporting occurs at several levels. The Director of Nursing represents the Trust at the Hertfordshire Safeguarding Children Board. The Designated Nurse for Safeguarding Children NHS Hertfordshire carries out bi-monthly Section 11 visits. The Named Nurse Safeguarding Children attends NHS Hertfordshire Whole Systems Safeguarding meetings and presents updates/reports as required. Compliance and exception reports are supplied to the Trust as part of the CQC Essential Standards (outcome 7).

KEY ACHIEVEMENTS

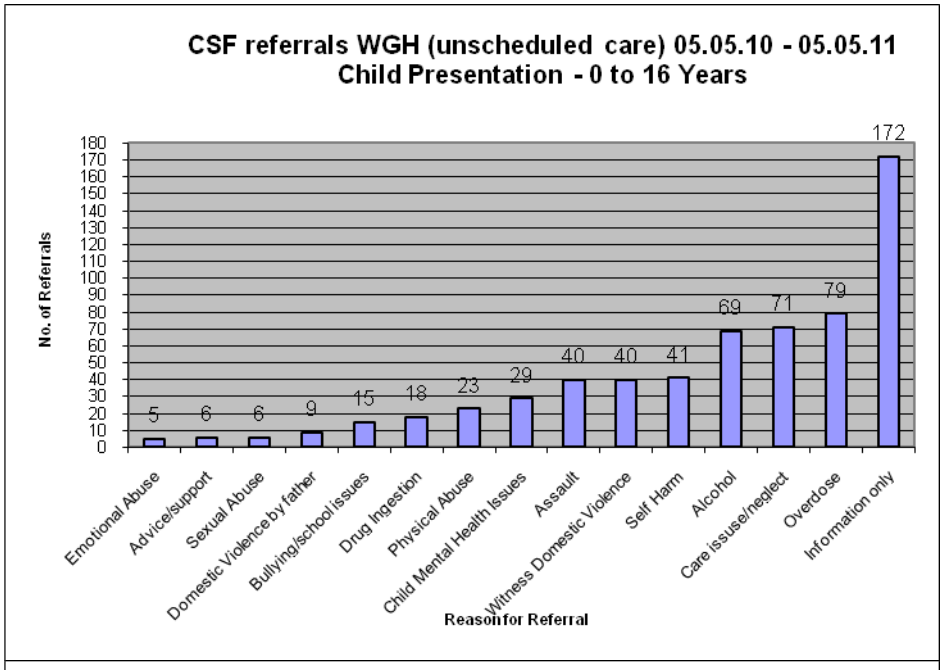
Over the past year safeguarding children work within the Trust has remained demanding. Safeguarding continues to have a high profile within the Trust, and there is on going work to develop staff awareness.

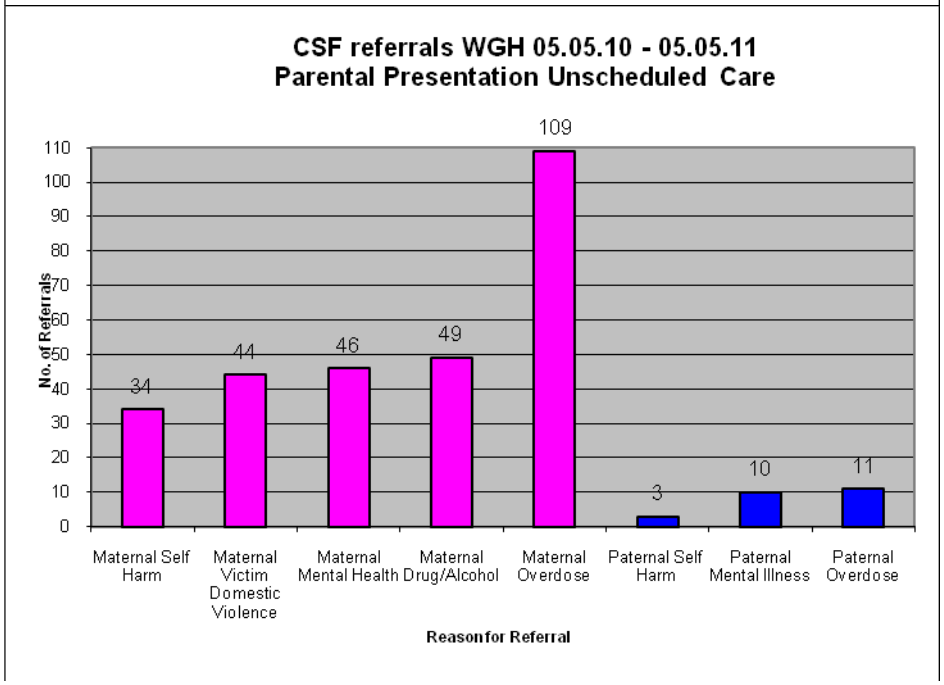
CQC/Ofsted Inspection

West Hertfordshire Hospitals NHS Trust (WHHT) was part of the CQC/Ofsted NHS Hertfordshire Safeguarding Children Inspection in October 2010. WHHT was inspected as part of the overall inspection, it was noted that procedures and practice to safeguard children across WHHT are "good". The inspection found the practice and support of the safeguarding nurses at Watford General Hospital to be "very good" with several examples of good practice cited in the final report.

This is further supported by the high level of safeguarding activity across the Trust. An average of 25 referrals to Children, Schools and Families are made, per week, from Watford

General Hospital and an average of 5 per week is made from Hemel Hempstead Urgent Care Centre. The following graphs show the number of referrals **(929)** to Children Schools and Families made from Watford General Hospital between May 2010 and May 2011:





A third of the referrals (33%) are originating from the main Accident and Emergency department. This is a clear indication that staff are recognising parental issues which may put children at risk.

In areas outside unscheduled care there is a reliance on discussion with members of the Safeguarding Children Team to ensure a consistency of approach. Work continues to raise awareness of safeguarding children in non paediatric areas.

Safeguarding Children Supervision

The Safeguarding Children Supervision Strategy 2011-2013 has been agreed by the WHHT

Safeguarding Children Committee. Any member of staff may access supervision as required. Weekly supervision takes place at Watford General Hospital in the form of multi-disciplinary meetings led by the safeguarding children team. Monthly supervision meetings take place at UCC. Nursing staff from the Minor Injuries Unit at St. Albans are also invited to attend. This ensures that all referrals to CSF are discussed/reviewed and staff are given feedback to promote good practice. Supervision meetings have been well received by staff, particularly at UCC.

Safeguarding Children Practice Audit

The Safeguarding Children Audit Strategy 2011 -2013 has been agreed by the Safeguarding Children Committee. This will ensure audits are in line with the WHHT Clinical Audit Strategy and that the audit cycle is completed. The strategy provides a rolling programme of essential audits for areas that have direct contact with children, including the maternity department. A bi-annual safeguarding children record keeping audit is currently underway.

Safeguarding Statement in Staff Contracts

A generic safeguarding statement has been added to all new staff contracts. The statement gives clear indication of the Trust's commitment to good and effective safeguarding practice.

Record Keeping

Accident and Emergency (including CED) documentation has been revised to include a specific safeguarding section. Clinical staff are expected to consider safeguarding for every child that attends CED. This aspect of documentation was seen as an example of good practice during the recent CQC/Ofsted Inspection. Following a serious incident at Urgent Care Centre (UCC) involving a young child who had multiple attendances at UCC, GP led Health Centre and the Medical Centre; an electronic version of the prompt has been added as a compulsory field to the Adastra record keeping system.

Serious Case Reviews

A serious case review is undertaken whenever a child dies or is seriously injured and abuse or neglect were a contributory factor. No Serious case reviews involving the Trust have been instigated by Hertfordshire Safeguarding Children Board over the last 12 months.

KEY CHALLENGES

Safeguarding Children Training

In September 2010 a revised version of the Intercollegiate Document, Safeguarding Children: Roles and Competencies for Health Staff was published. The Competency Framework tiers training into six levels based on the complexity and its target audience. The Trust is training staff up to level 3 and this is appropriate. The level of training required by each staff group is clearly indicated in the guidance:

- Level 1: Non –clinical staff working in health care settings
- Level 2: Minimum level required for clinical staff who have some degree of contact with children and young people and/or parents/carers
- Level 3: Clinical staff working with children and or their parents/carers and who could potentially contribute to assessing, planning, intervening and evaluating the needs of a young child or young person and parenting capacity where there are safeguarding/child protection concerns (Intercollegiate Document 2010).

A comprehensive training strategy has been written in line with the revised Intercollegiate Document. The Trust Mandatory Training Scrutiny Group is yet to fully endorse the strategy.
How safeguarding training is recorded across the Trust remains a challenge. It is anticipated that once the training strategy is agreed recording of training at each level will become clearer and more robust. Currently all staff receive level 1 training at Corporate Induction and this is effective. Level 2 is delivered at the mandatory clinical update; however uptake is less than 50%. The safeguarding team deliver the training, but other clinical leads will need to encourage their staff to attend. E-learning programmes are also available, but staff would need to be released to complete these.

Level 3 is offered to all paediatric staff, maternity staff and those working in unscheduled care such as Accident and Emergency and the Urgent Care Centre. Over 98% of staff who require level 3 have received training at that level over the last 3 years and annual updates are offered at level 3. Level 3 training has been revised to ensure it is in line with the intercollegiate framework 2010. All staff, including GP's at UCC will receive level 3 training this year.

The General Medical Council is in the process of producing updated guidance highlighting doctor's responsibility in relation to safeguarding. It is almost certainly going to increase the scope of responsibility by requiring doctors to identify and highlight adult behaviours that are potentially harmful to children. Whilst there are a number of referrals of this nature generated from A&E and Women's Services, there are very few from other adult specialties. This suggests a significant training need, and it is likely that in order to fulfil new requirements significant attention and resources will need to be deployed in this area, and all 'adult' doctors are likely to need more training than they currently receive.

The challenge of ensuring all staff are trained in safeguarding level 1 & 2 as appropriate, can be met by making use of the e-learning packages provided by the NHS' own e-learning programmes (NLMS). These packages meet the competencies as outlined in the Intercollegiate Document. An added bonus is that they are directly linked to the staff record.

Criminal Records Bureau Checks (CRBs)

There is a requirement under the Safeguarding Vulnerable Groups Act (Vetting and Barring Scheme 2009) to undertake CRB checks every 3 years. The Trust has a Recruitment and Selection Procedure in place which includes a CRB check on commencement of employment for all staff working directly with patients in line with NHS regulations. An enhanced check is carried out for staff that have regular contact with children (the procedure defines regular as more than 50% of their role). The challenge remains to ensure staff employed prior to 2002, when the new CRB check regulation was introduced by NHS Employers are CRB checked. The Trust does not currently have a 3 year re-check policy. The Safeguarding Children committee are currently working with Human Resources to risk assess this issue.

Conclusion and Recommendation
This report has identified that there are safe and effective procedures in place to safeguard children and young people who access services across the Trust. This is supported by a proactive and responsive annual work plan (see appendix 1) endorsed and monitored by the Safeguarding Children Committee.

Key challenges remain and the Board is asked to note and discuss the ongoing commitment to provide appropriate training to staff and volunteers across the organisation.

Ruth Vines – Named Nurse Safeguarding Children Anthony Cohn – Consultant Paediatrician, Named Doctor for Safeguarding Children

Natalie Forrest
Director of Nursing and Patients' Champion