

## Trust Board Report

<b>Meeting Date:</b>	24 <sup>th</sup> October 2011
<b>Title:</b>	Safeguarding Children – Health services' contribution to the Wolverhampton Safeguarding Children arrangements for 2010/11
<b>Executive Summary:</b>	Health services both acute and community play a significant role in the safeguarding of children in collaboration with partners. The Wolverhampton Safeguarding Children Board (WSCB) produced WSCB Annual Report 2010 / 2011 which outlines the progress made by health services in meeting the priorities for safeguarding in the city
<b>Action Requested:</b>	For the Board to note the details of the report
<b>Report of:</b>	Cheryl Etches, Director of Nursing & Midwifery
<b>Author: Contact Details:</b>	Designated Senior Nurse for Safeguarding Children WCPCT/ RWHT Via 01902 444348 mandy.viggers@wolvespct.nhs.uk
<b>Resource Implications:</b>	
<b>Public or Private: (with reasons if private)</b>	Public
<b>References: (eg from/to other committees)</b>	-Wolverhampton City Safeguarding Children's board
<b>Appendices/ References/ Background Reading</b>	-Working together 2010
<b>NHS Constitution: (How it impacts on any decision-making)</b>	In determining this matter, the Board should have regard to the Core principles contained in the Constitution of: <ul style="list-style-type: none"> <li>✚ Equality of treatment and access to services</li> <li>✚ High standards of excellence and professionalism</li> <li>✚ Service user preferences</li> <li>✚ Cross community working</li> <li>✚ Best Value</li> <li>✚ Accountability through local influence and scrutiny</li> </ul>

## 1. Background Details

1.1 The recent report which was submitted as local health care services' contribution to inform the WSCB Annual Report 2010/2011, took account of key areas of work which had taken place across local health care sites during the defined twelve month period and is summarised as follows:

### 1.2 Objectives for 2010/11

The work programme of local health care services between April 2010 – March 2011 was initially informed by the closure of the Joint Health Care Action Plan (May 2010) and more latterly by the feedback from the performance review of local Safeguarding Children business as conducted by the Strategic Health Authority (March, 2011). The emerging directives and requirements as associated with the Transforming Community Services (TCS) agenda late in 2010 demanded a local review of existing Safeguarding Children arrangements in light of change to the structure and organisation of health care service provision. The business priorities of WSCB as main board and sub-committee affairs continued to influence local work activities across the health economy.

### 1.3 Achievements against the Objectives:

- Accountability arrangements across the provider and commissioner arms of local health care services have been re-defined and made explicit having regard for TCS requirements.
- WSCB membership by health care personnel has been reviewed and adjustments made accordingly in light of organisation re-structure.
- The business activity of the Joint Health Safeguarding Children Committee, which serves to influence and oversee related work items as undertaken across the health economy, has been enhanced via adjustment to the frequency of meetings, extension of the business agenda and strengthening of the system for regular reporting to governance and quality assurance forums and to respective Trust Boards.
- The internal programme of training and education on Safeguarding Children matters has been further extended to broaden opportunities for learning across the various levels, taking into account the recommendations of more recent national guidance (HM Govt., 2010, RCPCH, 2010). A programme of training for Primary Care Services, predominantly to GPs and their Practice staff across the city has been delivered and opportunities for learning have been provided for Dental Practitioners.
- Internal policies and procedures have been reviewed according to need and in light of current national expectations regarding contemporary practice. New policies and procedures have been formulated and implemented in order to accommodate the recommendations of lessons learnt from local Serious Case Review.
- Monitoring of health care services activities with regard to inter-agency proceedings has improved via the regular production of reports as relating to referral activity and engagement by health care personnel in case conference activities. A programme of regular peer review by Paediatricians with regard to individual care provision to children in the context of concern relating to harm and abuse has become well-established. A programme of internal audit of policy and practice has taken place during the defined year.
- The appointment to a newly-created post of Named Nurse for Safeguarding Children for Domestic Abuse has enabled health care services to become more engaged in the direct work of the local Domestic Violence Co-located Team and to maintain regular participation in the work of the Multi-Agency Risk Assessment Conferences. Health care services' direct engagement in the business of the Missing and Compromised Children Sub-committee has been achieved during the year.

- The appointment to a newly-created post of Safeguarding Assurance Officer within the governance department has served to support the monitoring and measurement of performance as relating to Safeguarding Children activities within the hospital setting.
- A further appointment to the team of Consultant Paediatricians has strengthened the available resource for 24/7 on-call arrangements and to enable timely attention to the medical needs of local children and young people for whom there are concerns.
- Health care services have continued to fully engage in the operational and strategic work activities as associated with the Child Death Overview Panel.

#### **1.4 Improvement Plans where barriers have existed:**

Local service developments and successful action planning have served to support the increasing needs and demands that associate with health care services' contribution to safeguarding children. The local investment in new posts has enabled health care services to maintain and improve upon engagement in both internal and inter-agency activities in the interests of children and young people as hospital and community concerns. Financial investment in the Health Visiting Service by the establishment of the Support Worker role has served to enhance fieldwork capacity to support children, young people and their carers within the community setting and in the context of their experience of need, vulnerability and harm.

#### **1.5 Impact for Children and Young People:**

Local health care services are committed to safeguarding children and young people and to their fulfilment of statutory responsibilities as afforded in the context of strategic and operational business. The work that has been undertaken over the defined year has served to strengthen local Safeguarding Children arrangements in the interests of children, young people and their carers.

#### **1.6 Objectives for 2011/12**

The following are the agreed priorities for health in relation to safeguarding for 2011/12

- To embed and strengthen the accountability infrastructure and any associated systems and processes across local services in light of change to the structure of health care service provision and in the context of re-organisation at regional level.
- To attend to action planning requirements in response to the outcome of the performance review of Safeguarding Children arrangements (ref StHA, 2011).
- To attend to the local Safeguarding Children work programme as on-going business and as guided and monitored by the Joint Health Safeguarding Children Committee.
- To attend to the findings and recommendations of any external inspection and lessons learnt from case review.
- To maintain and enhance health care services' engagement in inter-agency safeguarding activities as operational and strategic business in the interests of children and young people.

It is understood that the WSCB Annual Report is due for publication in the near future, the contents of which will be considered by the Joint Health Safeguarding Children Committee in due course.

Associated key risks:

- Risk associated with non-compliance with Care Quality Commission and Ofsted requirements and as in accordance with legislation and national statutory directives (Children Acts 1989 and 2004; 'Working Together' 2010; CQC 2010; Ofsted 2011).
- Key risks are mitigated and assurance provided of the systems in place across health care

providers to support safeguarding children and Looked After children via execution of the Action Plan and performance monitoring of on-going programmes of work.

## 2. Options

-N/A

## 3. Recommendation

- To support the programme of work for children's safeguarding within the organisation
- To receive a progress report to the Board in February 2012