

Trust Board – Public  
29 September 2011  
Agenda item: 3.3

## Safeguarding Children Annual Report

<b>For:</b>	Information
<b>Summary:</b>	The annual report for safeguarding children enables the Board to review the activity across the Trust in relation to the Boards Statutory compliance with section 11 of the Children Act (1989, 2004)
<b>Action:</b>	The Board is asked to receive annual report
<b>Presented by:</b>	Jo Thomas, Chief Nurse
<b>Author:</b>	Michelle Mayhew (Named nurse For Safeguarding Children)
<b>Notes:</b>	
<b>Trust objective:</b>	Please list number and statement this paper relates to. Safe high quality care
<b>Legal:</b>	What are the legal considerations and implications linked to this item? Please name relevant act Children Act 1989, 2004 (section 11)
<b>Regulation:</b>	What aspect of regulation applies and what are the outcome implications? This applies to <u>any</u> regulatory body – key regulators include: Care Quality Commission, MHRA, NPSA & Audit Commission CQC, LSCB, Ofsted
<b>Reviewed &amp; Approved by Management Board</b>	<b>Date: 17/8/2011</b>
<b>Reviewed &amp; Approved by the Safety &amp; Quality Committee</b>	<b>Date: 14/09/11</b>

## Safeguarding Children Annual Report

<b>Date</b>	August 2011
<b>Author</b>	Michelle Mayhew (Named nurse For Safeguarding Children)
<b>Department</b>	Corporate
<b>Audience</b>	Trust Board Members

### 1.0 Introduction

1.1 This report demonstrates to the Trust Board this organisations compliance with the statutory and mandatory requirements relating to Safeguarding Children and Young People. All hospital staff have a responsibility for ensuring the children and young people in our care are protected and safe in line with the Every Child Matters guidance (The Green Paper, 2003)

- Be Safe
- Stay Safe
- Enjoy and Achieve
- Make a positive contribution
- Achieve economic wellbeing

1.2 During 2010/11 the Safeguarding Team continued to be involved in a number of activities. Namely Child Protection Conferences, Child Death Reviews, Strategy Meetings and Training. The Trust has not been requested to complete any individual management reviews since the date of the last report.

1.3 Additional Challenges for the Safeguarding team in 2010/11:

- Implications of the Munro review and the Government response on Safeguarding within health care
- There is an ever increasing number of children attending the emergency department, and with that the potential increase of those children whom require additional services
- The amalgamation of the Walk-in Centre under SaSH and its impact on the number of children accessing additional services.
- There is a continued challenge to provide staff training to meet the safeguarding and PCT commissioning requirements

### 2.0 The Safeguarding Team

2.1 The Childrens Act 2004 placed a requirement on each acute Trust to appoint Named professionals to take the professional lead on children and young people safeguarding matters within the Trust, and to advise all staff employed by the Trust on awareness and processes related to Child Protection,

2.2 The Named Professionals at East Surrey Hospital for 2011 are:



## **Safeguarding Referral Figures**

4.2

2010			2011			
Month	Information Sharing Forms	Referrals / Contacts with Social Services	Month	Information Sharing Forms	Referrals / Contacts with Social Services	Increase in information sharing form reporting
January	252	98	January	391	93	35%
February	222	108	February	332	73	33%
March	325	87	March	394	93	17%

There is an overall increase in reporting activity from 2010 -2011

4.3 The following table is a breakdown of the types of referrals received over a 3 month period March – May 2011.

Safeguarding Referrals	Total	Surrey	West Sussex
No. of information sharing forms received	866	613	253
No. of written referrals to Social Care	127	73	54
No. of children who have had a referral following concerns under section 47 (child protection)	14	8	6
No. Children/ families known to social care or in foster care	71	56	15
No. of Adults referred with concerns i.e.. Overdose, mental health problems, domestic abuse, death.	97	53	44
No. of children with self harm OD or risk taking behaviour	38	34	14
No. of children referred for concerns regarding parental capacity i.e. accidental ingestion	234	167	67

4.4 The identification and referral of Vulnerable Children, Young People and their Families to the safeguarding team, and when indicated Social care, continues to be a key role and duty of hospital staff to ensure that vulnerable children do not pass through the hospital undetected.

Training is essential to continue to raise staff awareness and enable them to recognise when a child may be being abused.

## 5.0 Training Figures for the Trust for April 2010- March 2011

### 5.1

Course	Trust Frequency	Government Recommendation	Compliance (%)
Child Protection Level 1	Annual	Refresher every 3 yrs	100% (against total workforce)
Child Protection Level 2	Annual	3 yr update	100% (of clinical staff and managers)
Child Protection Level 3	3 yearly session (sourced externally) Annual update (in-house)	Full session every 3 yrs with an annual update	10% (WACH & ED)

5.2 Level 1 & 2 continues to be delivered as part of Trust Statutory and Mandatory training and meets the criteria outlined in the Intercollegiate document (RCPCH, 2010).

There is also a move to design an e-learning package to allow staff to complete Level1 & Level 2 training online and this is for planned roll out in 2012

5.3 Level 3 training continues to be provided by either Surrey or Sussex Safeguarding Boards. There have continued to be difficulties accessing training due to lack of spaces available on courses, location of the course and capacity to release key staff to attend the training.

This has been addressed with the Designated Nurse for both Surrey and Sussex and raised as a risk due to continued low numbers of staff in key areas receiving this training.

Discussions are taking place to provide single agency Level 3 training to the areas that need it (WACH and ED) and several sessions have now been arranged for nursing staff as part of team days.

Surrey training group have offered to run Level3 training sessions at the hospital if we can release staff and identify a venue. This will assist in getting key staff trained providing that there is capacity to release them from the clinical areas.

5.4 Medical Staff receive training from the Named Doctor as part of their teaching programme, additional training dates have been provided to meet the needs of Medical staff and discussions are underway for the Surrey Safeguarding Children Board to provide a multi agency training day within the Trust.

5.5 Monitoring of the training plan continues to be complex as, whilst there is a central database of staff who have received trained, this only covers the last two years and compliance with the Safeguarding Children Boards is measured over a 3 year rolling period. Reporting still comes from a number of sources and is reliant on those sources to provide accurate data.

## 6.0 Criminal Records Bureau

6.1 As part of the recruitment process staff at East Surrey Hospital are required to have a CRB check. Compliance is currently 93.87%.

The Coalition Government placed a hold on the introduction of the Independent Safeguarding Authority checks that were due to come into force June 2010.

6.2 The Trust current compliance for high risk areas is as follows:

Total number of staff	865		
Current Cleared CRB's	812	=	93.87%
Number on Maternity Leave	36	=	04.16%
Number on a Career Break	1	=	00.12%
Long Term Sick	2	=	00.23%
CRB forms at the Agency	7	=	00.81%
CRB forms with staff to complete	5	=	00.58%
Number on suspension	2	=	00.23%
Total		=	100.00%

## 7.0 External Meetings

7.1 The Surrey and Sussex Safeguarding Children Board Health Groups are attended by the Trust Executive Lead. Sussex Safeguarding Board continue to hold quarterly meetings for the Named Professionals, and Surrey holds a South East Area meeting which the Named Professionals are invited to attend.

## 8.0 Named Staff Supervision and Training

8.1 The Named Nurse and Named Midwife receive formal supervision from the Designated Nurse for NHS Surrey and Sussex. The Named Doctor receives supervision from the Designated Doctor.

8.2 Following the changes to the Intercollegiate document (RCPCH, 2010) along with Working Together to Safeguard Children (2010) Named professionals are required to attend training at Level 4. The Named Doctor has attended External Multi agency Training at Level 4. The Named Nurse Has attended Multi Professional Update training at Level 4 and has organised further training at Level 4 later in the year.

## 9.0 Serious case reviews / Internal Management Reviews. (SCR / IMR).

9.1 There have been no SCR/IMR requests during August 2010-2011  
An SUI was conducted in July 2010 and an action plan was generated, this was submitted to Sussex SCR Review Board, who were satisfied with the response and action plan following the SUI. The case did not meet thresholds for SCR.

Action plans are continually monitored through the Trust Safeguarding Children Committee action plan and this includes any learning from other SCR to ensure best practice.

## **10.0 Audit**

10.1 There is an audit programme in place for safeguarding and the findings of these are fed back through the Trust Safeguarding Children's Committee and any actions identified are monitored through the action plan.

10.2 The Trust is also involved with audit through the Sussex and Surrey Safeguarding Children's Board and has submitted the Safeguarding Board Section 11 Review May 2011

## **11.0 Safeguarding Team Priorities for 2010-2011**

11.1 The Safeguarding Team was able to complete on most of the priorities for 2010 - 2011.

Administrative support has not been identified and the e- learning programme is still under construction.

## **12.0 Priorities for 2011-2012**

12.1 The following are the priorities for the coming year.

- Completion of the e-learning programme for level 1
- Review all policies in line with the Munro Report and the Government response
- To work with the Safeguarding Children boards to improve compliance in Level 3 Training.
- To continue working with the Training Department to ensure compliance for Level1 &2
- Identify admin support for the Safeguarding Team
- Work with social care to appoint a hospital social worker.

12.2 Safeguarding Children

### **Our Commitment**

- The organisation meets the statutory requirements in relation to Criminal Records Bureau checks.
- Child Protection policies and procedures are robust and reflect the updated "Working Together" publication ref. DH 2010.
- The rolling training programme continues to provide level 1 and 2 child protection training to all eligible staff.
- Named professionals are clear about their roles.

- There is a Board level Executive Director Lead for safeguarding. The Board reviews safeguarding across the organisation at least once a year and has robust audit programmes to assure itself that safeguarding systems and processes are working.

### **13.0 Conclusion**

The implementation of Safeguarding Children training on the statutory and mandatory training sessions continues to raise the profile of safeguarding children across the Trust, and helped to ensure staff feel empowered to highlight their concerns which is key to ensuring that a family do not 'slip through the net'.

This momentum must be continued with the support of the Training department to ensure that vulnerable families and children are identified and reported appropriately and that this hospital's safeguarding commitment is comparable to that of any other Foundation Trust.