Report to: Public Board of Directors  
Date of Meeting: 28 June 2017  

Title of Report: Children’s Safeguarding Annual Report  
Status: For noting  
Board Sponsor: Helen Blanchard, Director of Nursing and Midwifery  
Author: Mike Menzies, Named Nurse Safeguarding Children and Young People  
Appendices: None  

1. Executive Summary of the Report
This report provides an overview of safeguarding children activity undertaken within the Trust between 1st April 2016 and 31st March 2017.

2. Recommendations (Note, Approve, Discuss)
The Board is requested to note report.

3. Legal/Regulatory Implications
As a NHS provider the Trust is required to comply with legislation and statutory guidance, this includes:

- Children Act 1989;
- Children Act 2004;
- Working Together to Safeguard Children 2015;
- Safeguarding Children & Young People: Roles and Competences for Health Care Staff (Intercollegiate Document 2014).

4. Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc)
Risks on Risk Register:

- Safeguarding children Level 2 compliance.
- Implementation of safeguarding supervision.
- Safeguarding out of hours paediatric cover.

5. Resources Implications (Financial/Staffing)
None.

6. Equality and Diversity
The Trust safeguarding arrangements reflect the ethnic, social, religious and sexual diversity of patients and families.

7. References to previous reports
The report is scheduled to be discussed at the Safeguarding Children and Young People’s Committee on 27th July 2017. The report will be circulated to Trust.

Author: Mike Menzies, Named Nurse Safeguarding Children and Young People
Document Approved by: Helen Blanchard, Director of Nursing and Midwifery
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Safeguarding Children & Young People Annual Report

1st April 2016 – 31st March 2017

Mike Menzies
Named Nurse Safeguarding Children & Young People
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1. Introduction
Safeguarding children – the action we take to promote the welfare of children and protect them from harm is everyone’s responsibility. Everyone who comes into contact with children and families has a role to play. Ultimately, effective safeguarding of children can only be achieved by putting children at the centre of the system and by every individual agency playing their full part, working together to meet the needs of our most vulnerable children (Working Together, 2015).

All NHS providers are expected to comply with legislation and statutory guidance, this includes:

- Children Act 1989;
- Children Act 2004;
- Working Together to Safeguard Children 2015;
- Safeguarding Children & Young People: Roles and Competences for Health Care Staff (Intercollegiate Document 2014).

This report provides an overview of safeguarding children activity undertaken within the Trust between 1st April 2016 and 31st March 2017.

The aim of this report is to provide assurance that safeguarding children activity:

- meets national and local safeguarding standards;
- demonstrates a model of continual improvement;
- highlights existing or potential risk in relation to statutory responsibilities.

The structure of this report incorporates all safeguarding children standards and performance indicators for key providers of health services 2016-17.

2. Governance and Commitment to Safeguarding Children
Local Safeguarding Children Boards (LSCBs) are the key statutory mechanism for agreeing how organisations will co-operate to safeguard and promote the welfare of children. The Trust is represented at the BaNES LSCB and Wiltshire Safeguarding Children Board (WSCB) by the Executive Lead for Safeguarding, the Director of Nursing and Midwifery or a nominated deputy. Attendance at the BaNES LSCB during 2016-2017 was 100%; attendance at the WSCB shared by our health partners at Great Western Hospital and Salisbury District Hospital was 100%.

The Safeguarding Team represents the Trust at the following LSCB sub groups:

**BaNES LSCB**
Child Sexual Exploitation Sub-Group, Procedure and Performance Monitoring Group. The Named Nurse and Adult Safeguarding lead share attendance at the BaNES LSCB Joint Training and Workforce Development sub group.

**Wiltshire LSCB**
The Named Midwife attends the Wiltshire LSCB Early Intervention Sub Group and shares the attendance at the WSCB Domestic Abuse Sub-Group with the Named Nurse.
The Director of Nursing and Midwifery is the executive responsible for safeguarding within the Trust; there is a nominated Non-Executive as safeguarding champion. Provider organisations are required to have named professionals in post; the focus of the roles are to provide assurance that the Trust meets national and local safeguarding standards, ensure delivery of the work plan, deliver strategic objectives, while providing professional leadership and expert advice to staff. The required named professionals are in post.

The new Named Nurse for Safeguarding children came into post in May 2016. The new Deputy Director for Nursing and Midwifery came into post in July 2016 and is the nominated Deputy for the Director of Nursing and Midwifery as executive lead for safeguarding children.

A review was presented to the Clinical Governance Committee in September 2016 to provide assurances in relation to the safeguarding activity, training compliance and supervision strategy. The focus remains on: Level 3 safeguarding children training compliance and embedding safeguarding supervision in identified areas, with a particular emphasis on Maternity Services.

Further monitoring against the Safeguarding Children: Standards and Performance Indicators for Providers of Health Services occurs through the Clinical Outcomes and Quality Assurance reports that are submitted to the Clinical Commissioning Groups (CCG) on a quarterly basis. The CCG Designated Nurse for Children provides supervision and oversight to the Named Nurse for Safeguarding Children and Young People within the Trust.

Ongoing discussions are currently underway between the Head of Medicine within the Trust and Virgin Care Community Paediatric Consultants in relation to the planned process for Paediatric safeguarding cover and the impact on the Paediatric team and the Trust. This is reported at the Safeguarding Children and Young People Committee. This remains on the Risk register.

**Children and Young People’s Safeguarding Committee**

The Children and Young People’s Safeguarding Committee is chaired by the Director of Nursing and Midwifery. The Committee ensures the Trust has a robust framework in place for providing an environment, working practice and suitable skilled workforce that will be safe for children and young people. The Committee also ensures procedures are in place that will ensure appropriate actions are taken if any member of staff has concerns about the welfare of a child or young person.

The Terms of Reference of the Committee were revised in May 2015; the Committee now includes the lead for Theatres. The Committee is accountable to the Operational Governance Committee. A report of the meeting is submitted and presented to the Operational Governance Committee quarterly, drawing their attention to any issues that require their attention, or need to be added to the Trust Risk Register.

**Maternity Services Safeguarding Committee**

In May 2015 the Maternity Services Safeguarding Committee was established to provide insurance to the Children’s Safeguarding Committee that Maternity Services has a robust framework in place for providing an environment, working practice and suitable skilled workforce that will be safe for an unborn baby/babies, and procedures in place that will ensure that appropriate actions are taken if any member of staff has concerns about the welfare of an unborn baby/babies. A quarterly quality report is received by the Children & Young People’s Safeguarding Committee.

**Safeguarding Children Lead Practitioner Network**

Author: Mike Menzies, Named Nurse Safeguarding Children and Young People

Document Approved by: Helen Blanchard, Director of Nursing and Midwifery

Date: 6 June 2017

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The Safeguarding Children Lead Practitioner Network meets quarterly. The Network is chaired by the Named Nurse; membership consists of 17 professionals from a number of specialties across the Trust. The network supports the delivery of the safeguarding children work plan, disseminates key learning from cases, incidents and audits, and supports the development of safeguarding leadership within services.

**Safeguarding Children Team**
The Safeguarding Children Team was established in December 2013 to provide a single point of contact for safeguarding children enquires. The team consists of a Named Doctor, Named Midwife, part-time Specialist Support Midwife, part-time Specialist Safeguarding Children’s Nurse and part time administrator; the Named Nurse manages the team. In June 2015 the team joined with the Adult Safeguarding Team to create a Trust safeguarding team; the team are co-located and provide a single point of contact for all safeguarding enquires. In 2016-17 the wider team are working towards a ‘think family’ agenda and joined up approach reflecting the wider nursing strategy.

**Safeguarding Supervision Implementation Group**
The Safeguarding Supervision Implementation Group meets quarterly, alongside the Lead practitioner network. This group was established to support the implementation of the supervision strategy, in the defined area described in the Supervision Policy. The group is chaired by the Named Nurse and has driven forward the supervision agenda, embedding 1:1 supervision, supporting the named supervisors in facilitating group supervision vision and developing their own skills as supervisors.

**Care Quality Commission (CQC)**
CQC visited the Trust between the 16<sup>th</sup>-18<sup>th</sup> March 2016 and the full report was published in August 2016. The report stated that effective safeguarding processes were in place; staff were knowledgeable about safeguarding, understood their responsibilities and had access to support in Maternity Services. Although safeguarding supervision was embedded across the services for Children and Young people it remained a challenge and required improvement. Supervision remains on the risk register and the Named Nurse is supporting the embedding, sustaining and development of the supervision agenda.

**Section 11 Audits**
An update to Wiltshire LSCB’s Section 11 Audit 2015-16 was completed, reviewed and submitted in June 2016.

The Trust and Named Nurse have completed and submitted a joint Section 11 Audit (2016) for BaNES, South Gloucestershire, Bristol and North Somerset after scrutiny by the lead member for the LSCB in Q1. An action plan has subsequently been developed by the Named Nurse and was presented to the Children’s Safeguarding Committee in November 2016. The updated Section 11 action plan has been shared with BaNES LSCB in February 2017.

**Joint Targeted Area Inspection (JTAI)**
Between 31st October 2016 and 4<sup>th</sup> November 2016 Ofsted, The Care Quality Commission (CQC), HMI Constabulary (HMIC) and Probation (HMI Prob) undertook a joint inspection of the multi-agency response to abuse and neglect in Wiltshire. This inspection included a ‘deep dive’ focus on the response to children living with domestic abuse.

A letter was sent to the Executive Lead for the Trust in December 2016, describing the strengths and areas for improvement. The letter highlighted the following strengths for the Trust:
• there was evidence of the Emergency Department completing detailed Domestic Abuse, Stalking and Harassment (DASH Risk assessments) and ‘thinking child’ when seeing adults;

• the inspection recognised that the investment in training health staff has resulted in good quality risk assessments and referrals from the Emergency Department;

• the Trust was specifically recognised for the role of the Independent Domestic Violence Advocate (IDVA), which is valued by the Emergency Department, Maternity Unit and named professionals;

• Processes were highlighted as showing good onward information sharing, including letters to GPs in which the concerns around domestic violence were highlighted.

The Named Nurse has developed an action plan which is being delivered across the organisation.

Safeguarding Children Audits 2016/17

Safeguarding children audits are included in the Trust Clinical Audit Programme. During the period the:

• Knowledge and Skills Audit;
• Did Not Attend (DNA) Audit;
• Emergency Department Quality of Referrals to Children’s Social Care Audit;
• Maternity Quality of Referrals to Children’s Social Care Audit;
• Maternity Spot Check Audit;
• Maternity Audit of Women with Complex Social Factors;
• Discharge Planning Audit with Wiltshire LSCB

have been completed. Audit reports and action plans were submitted to the Children and Young People’s Safeguarding Committee in 2016-17.

3. Policies, Procedures and Guidelines

During the period a number of policies have been written or revised to meet local or national requirements. The following policies and protocols have been written in this period:

New guidelines/protocols:

• Discharge Planning Protocol where there are safeguarding concerns for children and young people, and new-born babies.
• Chronology template protocol.

The following policies have been updated:

• Domestic Abuse Policy with impact of DV on children.
• Safeguarding Children and Young People policy re Early help, links to CSE screening tools.

4. Appropriate Training, Skills and Competences

In January 2015 a safeguarding children’s training trajectory and delivery options paper was presented to the Children & Young People’s Safeguarding Committee. The paper set out
trajectory options for Level 2 and Level 3 training to achieve 90% compliance. The Committee agreed a 12 month period for achieving Level 3 compliance and a 24 month period for achieving Level 2 compliance.

The external organisation commissioned to deliver training had completed their sessions in May 2016. The new Named Nurse presented a training strategy to the Children & Young People’s Safeguarding Committee in July 2016 and the Committee agreed with the plan for the Safeguarding Children Team to facilitate health specific Level 3 children’s safeguarding training sessions; these commenced in September 2016. Up to 31st March 2017 5 courses have been delivered to 127 staff by the Trust Safeguarding Team.

Table 1 shows compliance figures for all levels of training during 2016-17 for all staff including maternity.

(Table 1) Training Compliance Figures (Including Maternity)

<table>
<thead>
<tr>
<th>Subject</th>
<th>Compliance Requirement</th>
<th>Q1 2016/17</th>
<th>Q2 2016/17</th>
<th>Q3 2016/17</th>
<th>Q4 2016/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safeguarding Children Level 1</td>
<td>90%</td>
<td>92.12%</td>
<td>92.06%</td>
<td>91.36%</td>
<td>91.76%</td>
</tr>
<tr>
<td>Safeguarding Children Level 2</td>
<td>90%</td>
<td>81.44%</td>
<td>84.69%</td>
<td>85.99%</td>
<td>87.59%</td>
</tr>
<tr>
<td>Safeguarding Children Level 3</td>
<td>90%</td>
<td>86.78%</td>
<td>83.91%</td>
<td>79.80%</td>
<td>85.17%</td>
</tr>
</tbody>
</table>

Table 2 shows compliance figures for all levels of training during 2016-2017 for Maternity Services only. Figures demonstrate there has been significant improvement in training compliance during the period, maintaining Level 2 compliance at 90%, and Level 3 at 90% by Q4 2017.

(Table 2) Maternity Services Only Compliance Figures

<table>
<thead>
<tr>
<th>Subject</th>
<th>Compliance Requirement</th>
<th>Q1 2016/17</th>
<th>Q2 2016/17</th>
<th>Q3 2016/17</th>
<th>Q4 2016/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safeguarding Children Level 1</td>
<td>90%</td>
<td>96.80%</td>
<td>97.81%</td>
<td>99.30%</td>
<td>98.21%</td>
</tr>
<tr>
<td>Safeguarding Children Level 2</td>
<td>90%</td>
<td>95.7%</td>
<td>95.65%</td>
<td>100.00%</td>
<td>99.21%</td>
</tr>
<tr>
<td>Safeguarding Children Level 3</td>
<td>90%</td>
<td>88.1%</td>
<td>88.83%*</td>
<td>89.10%</td>
<td>90.58%</td>
</tr>
</tbody>
</table>

Trajectory Targets
In January 2015 the Children and Young People’s Safeguarding Committee agreed that 90% compliance should be achieved for Level 2 training by Q4 2016.

(Table 4) Level 2 Trajectory Figures (Including Maternity)

<table>
<thead>
<tr>
<th>Period</th>
<th>% To be Achieved</th>
<th>% Achieved</th>
</tr>
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<tbody>
<tr>
<td>Q4 2015/16</td>
<td>71.2%</td>
<td>76.1%</td>
</tr>
<tr>
<td>Q1 2016/17</td>
<td>77.5%</td>
<td>81.4%</td>
</tr>
<tr>
<td>Q2 2016/17</td>
<td>83.7%</td>
<td>84.6%</td>
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The Children and Young People’s Safeguarding Committee agreed that Level 3 compliance should be achieved by Q4 2016; Tables 5 and 6 show the figures for Level 3 training. Figures demonstrate the commitment to improve training compliance during this period.

(Table 5) Level 3 Trajectory Information (Including Maternity)

<table>
<thead>
<tr>
<th>Period</th>
<th>% To be Achieved</th>
<th>% Achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q4 2015/16</td>
<td>90.0%</td>
<td>91.7%</td>
</tr>
<tr>
<td>Q1 2016/17</td>
<td>90.0%</td>
<td>86.7%</td>
</tr>
<tr>
<td>Q2 2016/17</td>
<td>90.0%</td>
<td>83.9%</td>
</tr>
<tr>
<td>Q3 2016/17</td>
<td>90.0%</td>
<td>79.8%</td>
</tr>
<tr>
<td>Q4 2016/17</td>
<td>90.0%</td>
<td>85.1%</td>
</tr>
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The Level 2 children’s safeguarding training compliance for the Trust is 87.5%. The Named Nurse is working closely with the Adult Lead for Safeguarding and the Education Department to identify and address the areas that require support to meet the 90% compliance.

The current Level 3 children’s safeguarding compliance is 85.17% for the Trust and 90.58% for Maternity services. The Named Nurse has met with the compliance manager in the Education Department and worked closely with the HR Business Partner, managers and practice development leads in each area. This is to give assurances that measures remain in place to ensure the Level 3 training compliance will return to, and is sustained at, 90%

Training compliance remains on the Trust risk register.

5. Effective Supervision and Reflective Practice

Twenty seven members of staff have attended Level 4 safeguarding children supervision training; supervisors are now supported by the Safeguarding Team to facilitate safeguarding group supervision within a number of specialties. The annual Safeguarding Children Supervision Audit was presented in May 2016 to the Safeguarding Children and Young People’s Committee. The audit results show that there are several standards that have improved in comparison to 2014; planned supervision sessions were held at least quarterly in 83% of cases which is a 43% increase to last year. Unplanned supervision sessions included a record of discussions in 87% of cases which has improved since last year (71%); the audit shows more staff have access to group supervision and more staff have attended sessions.
The repeat Supervision Audit was commenced in Q4 2017.

Reporting one to one supervision remains a KPI requirement for 2017/19.

The current 1:1 compliance rates are as follows (standard 90%):

- Named Nurse 1:1 compliance is currently 100%
- Named Midwife 1:1 compliance is currently 95.5%

The Named Nurse will be supporting the Named Midwife to maintain the 1:1 compliance at 90%.

The Named Nurse presented an updated report to the Committee in April 2017, outlining the plans to support the continued implementation and embedding of group supervision in each of the identified clinical areas. The Named Nurse is ensuring a database is available in each area in line with the CCG contract standards for reporting group supervision in 2017/19. All named supervisors now have their own supervision in place to ensure compliance with the current CCG contract standards.

6. Effective Multi Agency Working

The Trust has been engaged in supporting our external partners in the following:

- The Safeguarding Children Team has supported the ongoing BaNES multi agency Female Genital Mutilation (FGM) Task Finish Group and the development of a partner wide response to FGM. This has included sharing the LSCB strategy and integrating agreed training within in-house packages.

- The Trust has developed an action plan in relation to the learning from the Baby J SCR, which is being delivered across the Trust. The Named Nurse and Named Midwife have supported the WSCB with developing their Baby J SCR Multi Agency action plan.

- The Safeguarding Team has supported the development of BaNES LSCB learning from Wiltshire’s Baby J SCR and an effective multi agency response. This has included the sharing of the Trust action plan in response to the Baby J SCR.

- An action plan related to a multi-agency case review for family E (BaNES) has been completed and the learning is being delivered across the Trust.

- The Named Midwife has represented the Trust Maternity Services in a Multi-agency review led by Avon and Wiltshire Mental Health services which is continuing through 2017.

- The Trust and Named Nurse has supported the development and progress of the Multi Agency Safeguarding Hub (MASH) within BaNES. The Deputy Director of Nursing and Midwifery represents the Trust on the Project Board. The Trust has also supported the ongoing reviews of the MASH.

- The Trust has been represented at the Domestic Abuse Multi-Agency Risk Assessment Conference (MARAC) in both BaNES and Wiltshire.

7. Reporting Serious Incidents

During the period no serious incidents have been reported related to safeguarding children.

8. Engaging in Serious Case Reviews (SCRs)

The report for WSCB SCR Baby J was published in July 2016 and an action plan has been agreed and delivered within the Trust.
In October 2016 the BaNES LSCB SCR panel requested reflective reviews for 4 cases currently underway and these were completed and submitted. The Named Nurse and specified staff took part in ongoing practitioner reviews in December 2016. The report is still to be published. The Named Nurse is creating an action plan and delivering on the actions in the relevant areas of the Trust.

In February 2017 the Trust received a request for information from the BaNES LSCB SCR panel in relation to a baby that presented to another organisation with significant injuries. The Named Nurse and Named Midwife have completed and returned chronologies and analysis, and are awaiting terms of reference and further instructions.

9. Safer Recruitment and Retention of Staff
The Disclosure and Barring Policy has been ratified and published; the policy sets out the requirements of the Trust on checks of criminal records obtained through the Disclosure and Barring Service (DBS).

A retrospective review of the RUH compliance with DBS has been completed by the Head of Human Resources and an options paper was presented to the Management Board for consideration; the decision has been made to maintain current practice as the Trust is compliant with NHS employer’s requirements.

10. Managing Safeguarding Children Allegations Against Members of Staff
There has been one allegation against staff during this period. This was raised to the Trust by the Local Area Designated Officer (LADO). The Trust policy was followed which resulted in the member of staff being dismissed.

11. Engaging Children and their Families
The Trust welcomes feedback from children and their families; a number of systems have been established to incorporate feedback: Family and friends’ feedback for the whole family is encouraged across the workforce. Children aged 16 plus are encouraged to complete family and friends’ feedback independently. Specialist nurses in the Diabetes Team run parents’ evenings to engage families in sharing experiences and feedback.

Compliments and complaints also provide information on users’ experiences.

12. Organisational Risks
There are 2 risks in relation to safeguarding children on the Trust risk register, each is clearly defined with controls and action plans in place to reduce risk. Risks that remain open are related to safeguarding training compliance, and implementation of safeguarding supervision. Actions related to the risks are reviewed at the Children and Young People’s Safeguarding Committee.

13. Independent Domestic Advisor Project
The second year of the pilot to base an Independent Domestic Violence Advisor (IDVA) in the Trust was funded by BaNES and Wiltshire CCG until 31st March 2016. An IDVA has been seconded from Southside and integrated into the Safeguarding Team. The IDVA has developed domestic abuse training packages and delivered domestic abuse training as part of the safeguarding children and adult mandatory training. The IDVA has represented the Trust at BaNES and Wiltshire Domestic Abuse Multi-Agency Risk Assessment Conferences (MARAC), and referred a number of high risk cases to MARAC. The IDVA has supported a number of very vulnerable patients who have disclosed domestic abuse and liaised with partner agencies to ensure safety planning has been completed prior to discharge. Funding has now been agreed for the IDVA to continue for 12 months until mid-June 2018.
14. **Achievements 2016/17**

- Close working with the Adult team to provide a ‘think family’ agenda to supporting families and staff.
- Level 1 training compliance remains above 90% compliance.
- Level 2 training increased to just below compliance rate of 90% for the Trust as a whole and over 90% for Maternity Services.
- Newly developed bespoke in-house Level 3 training developed and delivered by the Safeguarding Children Team.
- Level 3 maternity training compliance over 90%.
- Level 3 training for rest of the children’s workforce just below 90%; additional training will ensure this is achieved and sustained in 2017-18.
- Completed Section 11 Audit for BaNES, South Gloucestershire, Somerset and Bristol.
- Development of Bluebell team of midwives working with more vulnerable clients in the community maternity teams.
- Developed and published:
  - Discharge Planning Protocol
  - Chronology template
- Revised and published:
  - Domestic Abuse Policy
  - Safeguarding Children & Young People Policy
- Implemented and embedded 1:1 supervision for community maternity staff.
- Implementation of group supervision for maternity staff and specific staff groups as per the Supervision Policy.
-Updating the supervision strategy to include RNHRD staff, Outpatients, specialist nurses and paediatric therapists.
- Working with partner agencies in completion of the first Joint Targeted Area Inspection in Wiltshire.
- Continued work to support the integration of the Child Protection Information System (CPIS).
- Working with the Safeguarding Adult Team to deliver a workshop in October 2016, focusing on domestic violence, FGM, self-neglect and modern slavery/human trafficking.
- Review of restraint practice and procedures to inform business case for the Strategic Workforce Committee – the outcome being the commissioning of a pilot training programme for staff identified as working in high risk areas in the Trust. The paediatric areas will be part of the second phase (re Care Quality Commission Fundamental Standard 13 action plan).
15. Objectives for 2017/18

- Embed group supervision agenda across the organisation, including paediatric doctors and CFS/ME team.
- Working with the LSCB to deliver and integrate bespoke training on Child Sexual Exploitation (CSE), Domestic Violence and Female Genital Mutilation.
- To deliver bespoke training on making effective referrals to Children's Social Care.
- To continue working with education leads to ensure Level 3 children’s training compliance meets and sustains 90% target.
- Work with the Adult Lead and Domestic Violence Working Group to ensure the sustainability of support and learning should the IDVA role not continue after the current 12 months funding by the CCGs.
- Develop a 3 year strategy with the Adult Lead to reflect the nursing and midwifery strategy.
- Reporting on completed Maternity CAF Audit, Safeguarding Supervision Audit, Knowledge and Skills Audit and Referral Audit in 2017.
- Update the KPI dashboard to reflect the new CCG standards of 2017-19.
- To deliver a further ‘think family’ safeguarding team workshop in October 2107.
- To complete the integration of Child Protection Information Systems in the organisation.

16. Concluding Comments

This report has concentrated on the key safeguarding activity improvements and risks within the organisation. Whilst it has provided an opportunity to capture key activity, it is by no means a full report of achievements of the Safeguarding Children Team and others in the organisation. It is appropriate to acknowledge the achievements of the Safeguarding Children Team, the support of the Executive Lead for Safeguarding, the safeguarding activities of staff and the very positive direction of travel.

References

Intercollegiate Document: Safeguarding Children and Young People, Roles and Competences for Health Care Staff, London RCPCH, 2014