Ashford and St. Peter's Hospitals NHS
NHS Trust

TRUST BOARD
25th March 2010

TITLE	Child Protection Annual Report 2009/10
SUMMARY	The purpose of the Child Protection Annual Report is to provide details of the systems and processes in place within the Trust to ensure child protection. It also summarises the child protection work that has taken place in the year and outlines the ways the Trust works with other organisations to ensure consistency in the handling of child protection issues.
BOARD ASSURANCE (Risk) / IMPLICATIONS	This report gives assurance to the Trust Board on the standards that specifically focus on child protection set out by the Care Quality Commission and where we rate in these. These standards identify the need for health organisations to protect children following national child protection guidelines within their own activities and in the dealing with other organisations.
STAKEHOLDER / PATIENT IMPACT AND VIEWS	The Surrey Safeguarding Children's Board is attended by the Chief Nurse or her deputy and fosters an integrated process of managing child protection across different agencies in the county. Where ever possible there is learning from Serious Case Reviews so that agencies and individuals improve the way in which they work both individually and collectively to safeguard and promote the welfare of children. The ASPH Child Protection Steering Group has had its terms of reference reviewed during the last year and is now chaired by the Chief Nurse. A newly experienced Named doctor has been appointed Kate Brocklesby and an experienced named nurse of Child Protection Nicky Love has commenced employment in February 2010.
EQUALITY AND DIVERSITY ISSUES	Our child protection services are delivered at all times to reflect our diverse ethnic, social, religious, & sexual diversity of our children & their parents.
LEGAL ISSUES	None Identified
The Trust Board is asked to:	Make note of the Annual Report which was approved by members of the Child Protection Steering Group & by the Clinical Governance Committee on the 18th March 2010.
Submitted by:	Mrs Caroline Becher Chief Nurse & Executive Lead for Child Protection
Date:	3rd March 2010
Decision:	For Noting

Ashford and St. Peter's Hospitals NHS
NHS Trust

ANNUAL REPORT OF THE CHILD PROTECTION STEERING GROUP 2009-2010

Presented to the Board on March 25th 2010

Dr Kate Brocklesby
Consultant Paediatrician and Named Doctor for Safeguarding.

Nikki Love
Named Nurse for Safeguarding

Caroline Becher
Chief Nurse, Executive Director and Board Lead

Executive Summary

1. Overview.

2009 has seen child protection in the spotlight after the tragic death of Baby Peter in Haringey in 2008. This shocking case of child abuse has been subject to major investigations of the highest level and was followed with national initiatives to raise awareness & strengthen reporting systems. Despite these major initiatives unfortunately child abuse continues.

This area of work is extremely demanding and the scale of the numbers of children with safeguarding concerns can not be underestimated. Data from Surrey shows that the numbers of children with a child protection plan are at a historically high level. Referrals nationally of vulnerable young people to councils' children's services departments have increased significantly since “Baby P” and there has been a corresponding leap in the numbers of applications by local authorities to take children into care.

In November 2008, Lord Laming was commissioned to provide an urgent report on behalf of the Secretary of State for Children, Schools and Families after the tragic death of Baby Peter. In March 2009, The Protection of Children in England: A Progress Report was published.

Key findings were:

- Policies and procedures need to be implemented robustly and consistently.
- The need to improve interagency working
- The quality of training and support to front line staff needs to be improved.
- The quality of serious case reviews needs to be addressed.
- The inspection framework to scrutinise safeguarding practice needs to be more effective.

The Chief Executive of the Department of Health David Nicholson CBE wrote to all Chief Executives of health care organisations on the 16th of July 2009 (Gateway reference number:12228) on this important matter and asked the following:

“As a minimum, Boards should assure themselves that”:

- Their organisation meets statutory requirements in relation to Criminal Records Bureau checks.
- Child protection policies and systems are up to date and robust, including a process for following up children who miss outpatients appointments and a system for flagging children for whom there are safeguarding concerns.
- All eligible staff have undertaken and are up to date with safeguarding training at Level 1. In addition, a review of other training arrangements should be completed within 6 months, taking account of emerging messages from the national review of safeguarding training.
- Designated and/or named professionals are clear about their role and have sufficient time and support to undertake it.
- 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 it that safeguarding systems and processes are working.

All Trust boards have been required to publish a declaration locally on their websites as soon as they were satisfied these arrangements were in place. NHS trusts were then required to share their declarations with SHA's and the Department. This is as part of the build up to Registration with the CQC in April 2010.

Status Report ASPH NHS TRUST

- Meets its statutory requirements in full with regard to Criminal Records Bureau checks
- Revised ASPH NHS Trust Safeguarding Policies and procedures support the Surrey Safeguarding Children's Board (SSCB) procedures. Incorporated within this is a process for following up children who miss outpatients appointments. A system for flagging children for whom there are safeguarding concerns is currently being developed jointly with Surrey Social care. Any children who are identified as at risk are discussed directly with Social Care and this process is also followed out of hours.
- A programme of Safeguarding training has been organised with sufficient capacity for every member of staff through the organisation to attend.
- Designated named staff are aware of their responsibilities. We have a Named Doctor for the Trust and a new full time Named Nurse. In addition we have a Named Midwife.
- We have a Trust Board Executive Director for Safeguarding; Chief Nurse, Caroline Becher. Monthly monitoring meetings have been sent up to review safeguarding matters and all associated activity. The Safeguarding Annual Plan will be presented to the Trust Board in March 2010.

This status report was fed back to the board on the 24th of September 2009 by Caroline Becher.

The Board placed a declaration on the 4th January 2010 on the main page of the ASPH NHS Trust website, that is clearly visible and stating that we are compliant.

Key Achievements in 2009.

Over the last year, Safeguarding work within the Trust has been a highly demanding and challenging area with some significant new developments. We have raised the profile of Safeguarding within the trust and increased awareness of all staff to safeguarding concerns.

1. Safeguarding Training

Safeguarding training has been a key area we have developed throughout 2009 and 2010. Safeguarding training became mandatory for all staff to attend.

After the Laming recommendations in 2009, ASPH NHS Trust initiated a revision of all Safeguarding training within the Trust. A training module was developed which was compliant with the roles and competencies for health care staff as stated in Safeguarding Children and Young People: Roles and Competences for Health Care Staff, Intercollegiate Document, (2006) that specifies training levels for all staff within healthcare trusts. It also incorporated the "What to do if" guidance from the Department of Health.

An intensive training programme was developed throughout the Trust to enable all staff (clinical and non clinical) to attend a Child Protection training session to ensure compliance with Level 2 training. This ambitious training was launched in September 2009 and has since involved more than 45 separate 2 hour training modules delivered over a 2 hour period, delivered by all the Paediatric Consultants and lead Safeguarding staff. Separate sessions were held on both the Ashford and St Peter's sites to enable all staff to attend.
All training was advertised and booked though the intranet.

Since commencing the training programme in September 2009, we have been able to train

- **2844 ASPH NHS Trust staff**
- **81% of all staff (clinical and non clinical) are now trained to Level 2**

This is a significant improvement on our previous trust training figures. Some departments have been able to achieve the 100% target, however, certain areas have been identified with poor uptake and those areas with less than 75% of staff trained are highlighted in the attached training summary. This is frustrating as the number of training sessions offered should have enabled all ASPH staff members to have accessed the mandatory safeguarding training. Areas of low attendance include A&E, Surgical Assessment Unit, HDU and several adult wards.

We now have 41 (75%) of Consultant Anaesthetists and 21 (78%) of Consultant Surgeons trained to level 2 Safeguarding training, which is a significant improvement on the Children's Hospital Services follow up review March 2009.

Ongoing training sessions have been provided in 2010 to increase the proportion of all staff trained. However, unfortunately this training occurred when there were significant capacity issues within the Trust and also corresponded to the severe winter weather we had earlier in the year. This limited uptake of the training sessions and clearly patients' immediate care needs to come first.

Further training will need to be held within key areas that have not accessed the training to date. The fact that this is mandatory training will need to be stressed to all departments concerned. Consideration of formal action on staff that do not fulfil mandatory training is under consideration.

In addition, Level 3 training sessions have been provided within the Trust to ensure staff who work "*predominantly with children and parents"* as specified in the 2006 Intercollegiate training document have received further training. This has enabled 100% of all paediatric consultants and lead paediatric nursing staff to have attained this competency level. Additional Level 3 training sessions have been arranged within the Trust to enable all paediatric and neonatal staff to attend this year. Further Level 3 training has already occurred in Ophthalmology. We also have access to the SSCB Level 3 training modules and other SSCB training modules and information on this is provided on the intranet.

In 2009, we developed a single electronic database recording all safeguarding training within ASPH NHS Trust. This had been identified as a previous constraint in the 2008/09 Safeguarding Clinical governance report. The database is now linked to the Electronic Staff Record (ESR). Information is recorded by the Training Department for all Level 2 and 3 training throughout the Trust. This will enable accurate training statistics to be retrieved for the CQC.

All staff now receive Level 2 training (as per the 2006 intercollegiate document) on induction into the Trust. This was introduced in September 2009. Further training sessions are provided for Bank staff.

Further online safeguarding training programmes are being identified. We now have ESR within the Trust and we are now looking at accessing the National Learning Management System (NLMS) and the nationally developed Safeguarding Children and young people module this is delivered by e-Learning for Healthcare (e-LfH), (covering Level 1 and 2 training of the intercollegiate document). A pilot group is hoped to commence in the near future.

2. Staffing

ASPH NHS Trust has 3 named professionals for safeguarding work within the Trust.

- A Named Doctor
- A Named Nurse
- A Named Midwife

- In addition we have an Executive Director Board Lead

- The post of Hospital Social worker remains unfilled.

ASPH appointed a new named Doctor for Safeguarding in 2009. The post had previously been held by Dr Wajdi Nackasha.

The previous Named nurse left the Trust on the 19th June 2009. In the interim this position was taken on by the Matron for Paediatrics from June 2009 until February 2010, when the new named nurse Nikki Love came into post. The delay in the substantive post holder taking up the post was in part attributed to the development

of this post. Our new named nurse has now taken up this post on a full time basis (having only previously had a named nurse working within the trust for 0.8WTE) and we have been able to increase the post to a Band 8 in line with other Safeguarding Named Nurses working within Surrey. This will ensure systems can become developed and become more robust.

It is also hoped to develop a series of link safeguarding nurses throughout ASPH trust to enable a wider group

The post of paediatric Social Worker has been unfilled for over one year. This has clear safeguarding implications for the trust. Due to a shortage of social workers within the West Childrens locality social care team, this post has been unable to be filled. Liaison has occurred with social work managers to try to recruit into this post, however at present financial constraints by social care have prevented this. Discussions are ongoing to try to resolve this and enable this post to be once again recruited into. In the interim period we have been able to develop a “Link social worker” who is employed by the West Assessment social Care team and provides a point of contact between health and social care. Systems are in place for all children with safeguarding concerns, to be discussed directly with the Surrey wide contact centre in the interim.

We have a full time Named Midwife for Safeguarding and vulnerable women, Deirdre Race appointed by ASPH in October 2008. This is a full time post and she is based within our Maternity unit. She attends outreach antenatal clinics at HMP Bronzefield Prison in Ashford and provides safeguarding support, training and advice for colleagues within the ASPH maternity unit. She has a small caseload of vulnerable women including teenagers who substance abuse. She also attends the antenatal clinic at HMP Bronzefield Prison in Ashford which has a high caseload of safeguarding issues in pregnancy and postnatally. Deirdre teaches monthly on the mandatory ‘bonus’ days to all maternity staff. The teaching session covers mental health, domestic abuse and safeguarding.

Deirdre chairs the Midwifery/NICU which is attended by Theresa Spink, labour ward manager, antenatal clinic team leader, Joan Booker Ward team leader, neonatal community sister/ nurse and designated Doctor (time permitting), named nurse and paediatric social worker. The group discusses local issues related to safeguarding and to review pending cases to ensure appropriate and joint plan of care is in place.

In October 2009, The Safeguarding team moved into a new office off the link corridor. The lack of office space has previously been identified as a constraint, in particular for the paediatric social worker. This has now been resolved. The office has space for the hospital social worker, the named nurse, the health visitor liaison nurse and her administration support.

We currently do not have a paediatric social worker in post within the trust. This is a key position within the ASPH Safeguarding team. Due to difficulty recruiting children’s social care workers and this combined with financial constraints within the Surrey Social care team it has not been possible to recruit into this position and it remains unfilled. We have identified a link social worker from the West Assessment Social Care Team to attend some meetings at ASPH. In the meantime all children or parents with safeguarding concerns and referrals are discussed with the Surrey wide Contact Centre. Discussions are ongoing with social care.

3. **Safeguarding Children Steering group.**

The Safeguarding steering group has been developed significantly throughout 2009. The Trust Board Executive Director for Safeguarding is Chief Nurse, Caroline Becher who chairs this group. Monthly monitoring meetings have been sent up to review safe guarding matters and all associated activity. The group has developed clear terms of reference and lines of accountability within the trust for work on safeguarding and promoting the welfare of children.

4. **Records and record keeping**
   Implementation of single notes within the paediatric department.

As per Laming recommendations, we have successfully introduced joint nursing and medical notes in both the general paediatric (June 2009) and the neonatal notes (November 2009). Both doctors and nurses and all allied health professionals now write in one single continuous set of notes.

The paediatric casualty card has also been revised and is due to be implemented shortly. This has a significantly improved safeguarding section to ensure that all children who attend ASPH have safeguarding issues addressed and identified on triage.

5. **Improved A&E referal process.**

As a result of an audit looking at completion of paediatric alert forms within the trust, we have now revised our A&E referral process to social care. With the introduction of a simpler A&E safeguarding flow sheet and a new standardised surrey wide urgent Common Assessment Framework (CAF) form for all notifications to social care and a greater emphasis on who should be making the referral. A pack has been developed to simplify this process, and education and awareness will be provided.

6. **Development of the Child Protection website on the ASPH intranet.**

This site has been further developed and has all contact numbers for the safeguarding team clearly identified. In addition access to the ASPH and SSCB Safeguarding policies for all staff to be able to access, as well as all forms needed for the referral process. There are details for support service details for all staff to be able to access should they personally require support.

Other Safeguarding Governance Issues

1. Policies and procedures

- Safeguarding children in Surrey is co-ordinated by the Surrey Safeguarding Children Board (SSCB) and our trust has adopted the **Surrey Safeguarding Children's Board (SSCB) Safeguarding Children (CP) procedures**, in full.
- **Local ASPH Child Protection Policy** was ratified (October 2009) and is widely available on the intranet. A "DNA policy for children" is incorporated into this. Both are widely available on the intranet throughout the trust.
- **A&E Safeguarding Procedures** policy – Ratified October 2009.
- **Skeletal Survey Policy for Non accidental Injury**- Ratified October 2009.
- **Maternity Safeguarding Policy**- awaiting ratification, out for consultation.

2. Safer Recruitment and CRB checking

All staff, including volunteers at ASPH NHS Trust complete a criminal record disclosure check (CRB) on starting at the trust. All staff working within clinical areas get an enhanced CRB.

All staff at ASPH are subject to appropriate CRB checks and revision of these every 3 years. This is monitored by Human Resources.

A human resources representative is also now on the Trust safeguarding steering group for assurance of recruitment practice.

All staff need to be aware of their responsibility to keep children safe, in line with the trust 4 P's including Personal Responsibility. We are looking at developing a standard statement to be incorporated into all job descriptions as this responsibility relates to all staff, clinical and non clinical working within the trust. Safeguarding children is everyone's responsibility.

3. Child Death Overview

From April 2008, all safeguarding boards have been required to have procedures in place for all unexpected child deaths and ASPH NHS Trust follows the procedures and policies for the Surrey Safeguarding Children Board. All unexpected child deaths are referred to the Surrey wide child death coordinator on a surrey wide notification form. Information is collated and fed back to the Trust steering group.

4. Risk Management

All serious case reviews and other untoward incidents and their recommendations are communicated at the Safeguarding Steering group meetings, and directorate leads feedback to the appropriate areas. In addition, they are incorporated into all Safeguarding trust training.

- **Serious Case Reviews (SCRs)**

A serious case review is an important tool for learning lessons from the death of or a serious incident involving, a child. They are undertaken by the local safeguarding board and as a trust if we have had involvement in a case we would be asked to contribute.

ASPH has been involved in providing information to 2 serious case reviews over the last year.

1. The Trust participated in one serious case review during 2009, requested via Hounslow Safeguarding Children's Board. An Internal Management Review (IMR) was undertaken by the then ASPH Named nurse, and recommendations and an action plan were formulated and have been incorporated into the Maternity safeguarding action plan. The Serious Case Review overview report has not yet been received within the Trust. The Trust involvement in the case was limited to involvement by our gynaecology department after a referral from the GP for a young girl for contraception advice after a previous pregnancy. The recommendations from ASPH are attached in appendix ([1])

2. The Trust is currently participating in a second Serious Case Review that was requested via Surrey Safeguarding Children's Board in January 2010. An Internal Management Review (IMR) is being under taken by Susan Brown. The case involved a child being taken to ASPH NHS Trust A&E department with a suspected drowning. The baby unfortunately died. The case was referred to the Coroner and both police and social care have had involvement.

- **Serious Untoward Incidents**

This most recent SCR has also been subject to a Serious Untoward Incident (SUI), in view of the resulting media attention that ensued. The case has not raised any concerns provided by the paediatric department.

- **Critical Incidents**

ASPH had a grade 3 critical incident in May 2009. The case involved a young child attending ASPH A&E department with an injury and a concealed bite mark. This was completed in September 2009 and has been fed back to Trust Safeguarding board. All recommendations have been actioned.

5. Audit

Audit remains a high priority for the safeguarding team. We are currently undertaking an annual audit (Section 11) requested by the SSCB about Safeguarding within ASPH.

The paediatric department also has an active biannual audit competition and safeguarding features regularly among this. A recent audit of the use of our

paediatric alert form has raised significant concerns about the completion of the form throughout the Trust and has led to the development of a working party within the trust to develop a clearer referral pathway and adoption of the urgent Common Assessment Framework (CAF) form in line with other Surrey acute trusts.

6. Meetings

Internal Meetings

Child Protection Steering Group- Formal minuted minutes are held every 2 months. Terms of reference are attached. The group comprises:

Caroline Becher	**Chair** Chief Nurse
Dr Kate Brocklesby	Named Doctor
Nikki Love	Current Named Nurse
Elaine Welch	Previous Named Nurse until June 09
Dagmar Gohil	Paediatric Matron- Interim Named nurse (June 09-Feb 10)
Deidre Race	Named Midwife
Theresa Spink	Community Midwifery Manager
Helen Sibley	Business Centre Manager for Children's Services
Susan Brown	Divisional Head of Nursing Specialist Services
Michelle Wolfendale	Paediatric Liaison Nurse
Not currently appointed	Paediatric Social Worker
Harriet Stephens	Training Department Manager
Liz Guest	NICU sister
Judy Henville	Divisional HR Manager
Marcus Wootton	Paediatric A&E Charge Nurse

We also meet every 2 months inbetween formal child protection steering group meetings with a smaller group to discuss any concerns.

There is a weekly paediatric consultant meeting which all paediatric consultants attend and any Safeguarding concerns are discussed.

There is a monthly Midwifery/Neonatal Child Protection Liaison Group meeting chaired by the named Midwife to discuss any child protection concerns. Minutes are taken. The group discusses local issues related to safeguarding and reviews future maternity cases to ensure an appropriate and joint plan of care is in place.

We are also setting up a weekly General Paediatric Safeguarding meeting to discuss safeguarding issues from paediatric A&E and the general paediatric ward. It is hoped that this will also have attendance from social care. This will discuss referrals to social care and also enable feedback from social care and provide supervision to staff involved.

External Meetings.

- **Surrey Safeguarding Children's Board Health and Child meetings**

Local Safeguarding Children Boards (LSCBs) exist in all areas of the country and work locally to protect children. The Surrey Safeguarding Children Board (SSCB) is an inter-agency forum which brings together the Local Authority, police, health workers and all others in the community responsible for safeguarding to help them work more effectively to safeguard children from abuse and neglect.
SSCB Health and Child meetings are attended by our Trust Board Executive Director for child protection, our Chief Nurse, Caroline Becher. Meetings are held every 3 months. Information and actions are disseminated back to the ASPH Child Protection steering group

- Named Doctors and Named Nurse meetings for Surrey are now held on a regular basis, approximately 4 times per year.

Areas for future development

- A key position within the ASPH Safeguarding team remains unfilled with the absence of a children's social worker. Strategies are in place to accommodate this and discussions with social care are underway to improve the situation.

- Safeguarding training within the trust remains a high priority. Further training will need to be provided into certain areas which had poor uptake of the mandatory safeguarding sessions that were held within the trust. This will need to be reinforced by the requirement that this is mandatory training that all employees of ASPH NHS Trust need to have attended.

- Recent completion of the Department of Health children services mapping in February 2010 had a specific focus on Safeguarding. A new standard raised has highlighted the importance and need to ask all adults attending A&E departments about the presence of children below the age of 18 within their family setting, to ensure safeguarding issues are identified and therefore acted upon. At present the adult A&E cards at ASPH NHS Trust do not have this capacity and this needs to be explored.

- We are looking at developing a standard statement to be incorporated into all job descriptions as this responsibility relates to all staff, clinical and non clinical working within the trust. Safeguarding children is everyone's responsibility.

- To improve the ability to access childrens previous A&E attendances within the trust. At present if a child attends with safeguarding concerns and old A&E attendances are required to be reviewed, this is extremely difficult to obtain. Past attendances are not being fully scanned and therefore not available electronically and the hard copy of the casualty card is very difficult to retrieve. This remains an administrative challenge.

- To improve communication to all GP's for children that attend ASPH A&E department. At present more than 24,000 children attend ASPH Paediatric A&E department each year. A discharge summary to GP's is not currently generated on children who attend. A GP may be unaware of repeat attendances to our A&E and also of children whom present with safeguarding concerns. A hand written summary is available for junior staff to complete. Children with significant child protection concerns are usually admitted and all

children admitted to the ward are discharged with a typed discharge summary sent to their GP. We also have a health visitor liaison nurse who reviews all our Paediatric A&E cards and will feedback to the health visitor any children with whom concerns have been raised. If necessary the liaison nurse would also discuss any safeguarding concerns with the named professionals. However not all safeguarding concerns are immediately apparent in A&E and often the GP is a key figure to look at the wider picture and will have awareness of wider family problems and hence potential safeguarding issues. The need for improved communication amongst health professionals has been repeatedly raised by several safeguarding reviews and again by Lord Laming in 2009. We are in the process of trying to improve communication to GPs from the Paediatric A&E department.

- In line with the 2009 Laming recommendations, to develop an improved system to flag all children with whom there are child protection concerns or whom are subject to a child protection plan within Surrey , who attend ASPH A&E. We have procedures in place that any child with safeguarding concerns is discussed with social care and that no child is discharged whilst concerns for their wellbeing or safety remain. We are keen to build upon this and develop an electronic automatic system to ensure that all children attending ASPH A&E are automatically checked with social care, to identify it there are known concerns. Preliminary discussions have already been held with our IT manager, the safeguarding team and social care. This is an ambitious project and not yet available within any acute trust within Surrey.

Conclusion

The National Safeguarding Agenda continues to expand and pose new challenges. External scrutiny both by the Strategic Health Authority as well as the Care Quality Commission will increase as a result of the governments key initiatives. This area of work is extremely demanding and the scale of the numbers of children with safeguarding concerns within Surrey can not be underestimated.
ASPH NHS Trust needs to continue to keep Safeguarding on everyone's agenda to ensure that all children and young people attending ASPH receive the best possible start in life.

Key Policy Documents that Underpin the Safeguarding work at ASPH.

- Children Act 1999 and 2004.
- Working together to Safeguard Children: A guide to interagency working to safeguard and promote the welfare of children (2006)
- The Victoria Climbie Inquiry report of an inquiry by Lord Laming, 2003.
- The Protection of Children in England: A Progress Report by Lord Laming 2009.
- What to do if you're worried a child is being abused (2006)
- The Bichard Enquiry Report 2004
- Every Child Matters: Change for Children (2004)
- National Service Framework for Children, Young people and Maternity Services 2004.
- Safeguarding Children and Young People: Roles and Competences for Health Care Staff, Intercollegiate Document, (April 2006)
- Surrey Safeguarding Children's Board Procedures 2009.
- Sexual Offenders act (2004)

Appendix

1. Hounslow Serious case review recommendations
2. Terms of reference for Trust Safeguarding steering group.

Appendix 1.

Hounslow Serious Case Review Action Plan

Recommendations for Ashford and St Peters Hospitals						
	Recommendation	**Action**	**By Whom**	**Complete By**	**Evidence**	**Update**
1	Staff working with children and families to access recommended training as outlined in Trust Child Protection Training Strategy in line with Surrey Safeguarding Children's Board.	To review safeguarding training though trust	Named Doctor and Named Nurse			Trust wide training programme implemented in September 2009 to deliver Level 2 of the Intercollegiate guidance to ALL staff. This is underway and as to date we have trained 76% of all our staff at ASPH to level. Level 2. The training is ongoing with the aim of training over 95% of all our staff to level 2.Training also given to all staff on induction into ASPH trust. There is also a trust wide drive to ensure appropriate staff trained to level 3.
2	Staff to liaise with Named Professionals within the trust when concerns are raised regarding the possibility of sexual abuse.	To review current Safeguarding policy	Named Doctor and Nurse	October 2009	Policy reviewed	Safeguarding policy in place and education and training given to all trust employees as part of ASPH trust wide training strategy.
3	To review maternity and trust wide Safeguarding policy with referral to social care for all	Review policy	Named Midwife	February 2009	Ratification of Policy	Trust wide policy in place that all cases of children under the age of 13 years believed to be or

	pregnancies under the age of 13 years.					have been engaged in penetrative sexual activity must be referred to Surrey Children's Service. Working practice is to refer all pregnancies in under 15 years of age to Social care. Maternity policy to be updated to reflect this.
4	To review process for all children under 13 years of age attending sexual health clinics and gynaecology services at ASPH.	To review policies	Safeguarding steering group	February 2009.	Ratification of any changes required to policy	

Ashford and St. Peter's Hospitals NHS
NHS Trust

Appendix 2

Terms of Reference: SAFEGUARDING CHILDREN STEERING GROUP

Constitution

The Clinical Governance Committee hereby resolves to establish a sub-committee to be known as the Safeguarding Children Steering Group

Authority

The Group is authorised by the committee to promote good practice in respect of Safeguarding Children in the organisation to improve the experience for patients/carers and staff. It is authorised to seek information it requires from any employee and employees are directed to co-operate with initiatives to improve Safeguarding Children.

Membership

1. Chief Nurse (Executive Lead) (chair)
2. Non Executive Director
3. Head of Nursing (Operational Lead)
4. Named Doctor
5. Named Nurse
6. Named Midwife
7. Business Centre Manager Children's Services
8. Matron Paediatrics
9. Paediatric Liaison Nurse
10. Matron Emergency Services
11. Midwifery Clinical Manager Community
12. Sister/Charge Nurse Paediatric A&E
13. Paediatric Social Worker
14. Head of Quality & Integrated Governance
15. Human Resources
16. NICU Link Nurse

Attendance

Attendance at meetings is essential. In exceptional circumstances when a member cannot attend they must arrange for a fully briefed deputy of sufficient seniority to attend on their behalf. Members will be required to attend as a minimum, 75% of the meetings per calendar year.

Quorum

The number of members necessary to conduct the meeting to exercise all or any of the authorities, powers and discretions invested in, or exercisable, by the committee/group is 8 members.

Frequency and Conduct

The Committee will meet quarterly. Items for the agenda should be submitted to the Secretary a minimum of two weeks prior to the meeting. There will be a shorter meeting to discuss child protection issues on a monthly basis.

Membership and terms of reference will only be changed with the approval of the Committee and will be reviewed and agreed annually.

Duties

1. To oversee the development, implementation and monitoring of systems and processes to ensure Children are safeguarded whilst at ASPH.
2. To implement and monitor national/local standards, guidelines, legislation and policy in relation to Safeguarding Children in the Trust.
3. To lead on the development and revision of Trust Safeguarding Children Policy ensuring alignment with the Surrey Safeguarding Children Board Procedures.
4. To identify priorities in relation to Safeguarding Children for inclusion in the Trust Safeguarding Children action plan.
5. To develop a training strategy which supports sound arrangements for Safeguarding Children in the Trust
6. To identify and report risks, ensuring the risk register is updated.
7. To promote a multidisciplinary and multi-agency collaborative approach within the Trust and across external agencies.

Key Responsibilities

1. To ensure the Trust works collaboratively with paediatric Liaison, Social Services and other agencies with regards to safeguarding children in the Trust.
2. To ensure that Safeguarding Children is incorporated into Clinical Governance systems throughout the Trust.
3. To monitor and evaluate Safeguarding Children practice issues in the Trust.
4. To maintain links with the various child protection groups:

   Surrey Safeguarding Children's Boards

   Health & Child Safeguarding Sub-Group
5. To raise awareness and disseminate Safeguarding Children information within the Trust.
6. To produce an annual report to the Trust Board and the Clinical Governance Committee.
7. To review evidence in relation to the relevant Standards for Better Health and provide the Domain Lead with an informed opinion on compliance.

Reporting Lines

The Group will report to the Clinical Governance Committee

Monitoring

The Named Doctor/Named Nurse will produce an annual report to the Clinical Governance Committee.

The Group will use the templates for minutes, agenda and action points as identified in the Policy for the Working of Trust Committees and comply the reporting mechanisms as outlined in the document relating to risk identification and reporting and the quarterly reporting template for the Clinical Governance Committee.

Terms of reference updated October 2009