



Somerset
Clinical Commissioning Group

**SAFEGUARDING CHILDREN AND CHILDREN LOOKED
AFTER ANNUAL REPORT
2017 / 2018**

September 2018

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1 PURPOSE OF THE REPORT

1.1 Safeguarding children and protecting them from abuse and neglect is every child's fundamental right. Effective safeguarding of children can only be achieved by putting children at the centre of the system, and by every individual and agency playing their full part¹.

1.2 This Safeguarding Children and Children Looked After (CLA) annual report will inform the Somerset Clinical Commissioning Group (CCG) Governing Body of the arrangements in place for all of Somerset's 110, 00 children including those who are in the care of the Local Authority (approx. 510).

1.3 The report will:

- Set the context for safeguarding children in Somerset
- Provide an overview of the arrangements in place to safeguard and protect children across the health services in Somerset
- Demonstrate how Somerset CCG is fulfilling its safeguarding and Children Looked After statutory responsibilities
- Report on governance and accountability arrangements within the CCG, including representation and involvement with the Somerset Safeguarding Children Board (SSCB)
- Identify significant changes both locally and nationally ascertaining if there are any specific implications for health staff
- Highlight achievements in safeguarding children practice across health providers
- Provide assurance that the Safeguarding Children and Children Looked After Team have achieved their objectives for 2017/18
- Highlight the Safeguarding Children and Children Looked After Team objectives for 2018/19.

1.4 The report will cover the period from 1st April 2017 to 31st March 2018.

2 SAFEGUARDING CHILDREN CONTEXT

2.1 National Context

2.1.1 **Working Together to Safeguarding Children:** Safeguarding and promoting the welfare of children² is defined in this statutory guidance as:

- protecting children from maltreatment
- preventing impairment of children's health or development
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- taking action to enable all children to have the best outcomes

2.1.1.1 Effective safeguarding arrangements in every local area should be underpinned by two key principles:

¹ Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children 2015

² In this statutory guidance, a child is defined as anyone who has not yet reached their 18th birthday

- Safeguarding is everyone’s responsibility: for services to be effective each professional and organisation should play their full part; and
- A child-centred approach: for services to be effective they should be based on a clear understanding of the needs and views of children.

2.1.1.2 Section 11 (s11) of the Children Act (2004) places duties on a range of organisations and individuals to ensure their functions, and any services that they contract out to others, are discharged having regard to the need to safeguard and promote the welfare of children. The s11 duty is placed on all NHS organisations, including NHS England, CCGs, NHS Trusts and NHS Foundation Trusts.

2.1.1.3 All NHS organisations, including CCGs should have in place arrangements that reflect the importance of safeguarding and promoting the welfare of children, including:

- A clear line of accountability for the commissioning and/or provision of services designed to safeguard and promote the welfare of children
- A senior Board level lead to take leadership responsibility for the organisation’s safeguarding arrangements
- A culture of listening to children and taking account of their wishes and feelings, both in individual decisions and the development of services
- Clear whistleblowing procedures
- Arrangements which set out clearly the processes for sharing information, with other professionals and with the Local Safeguarding Children Board (LSCB)
- Designated professional leads for safeguarding must be in place with sufficient time, funding, supervision and support to fulfil their safeguarding responsibilities effectively
- Safe recruitment practices for individuals employed by health organisations
- Appropriate supervision and support for staff, including undertaking safeguarding training
- Clear policies in line with those from the LSCB for dealing with allegations against people who work with children.

2.1.2 The Children and Social Work Act 2017

2.1.2.1 The Children and Social Work Act (The Act) received Royal Assent on 27 April 2017 and sets out how agencies must work together by placing new duties on the police, clinical commissioning groups and the local authority to make arrangements to work together and with other partners locally to safeguard and promote the welfare of all children in their area. The revised statutory guidance ‘Working together to Safeguard Children’ is due for publication shortly and will give more of a steer on what the new multi-agency safeguarding arrangements should look like.

- 2.1.2.2 It is essential that the development of new multi-agency safeguarding arrangements are strongly led through the commitment of chief officers in all organisations and agencies, in particular those representing the three safeguarding partners. These are Directors of Children’s Services, Chief Constables of police and Accountable Officers and/or Chief Nurses of CCGs.
- 2.1.2.3 In 2017 the Chief Officer for the CCG agreed to the proposal that the Avon and Somerset Safeguarding Consortium can provide the forum for the scoping and development of the new multi-agency safeguarding arrangements, which will be required as a result of the implementation of the new legislation and statutory guidance. The CCG are a key partner within the Avon and Somerset Safeguarding Consortium, represented by the Executive Lead for Safeguarding and the Designated Professionals for Safeguarding Children, and are working together to ensure the new arrangements are safe, effective and equitable across the region.
- 2.1.2.4 This represents a significant change to safeguarding children arrangements across all agencies within Somerset and is a priority for the CCG for 2018-2019.
- 2.1.2.5 Under the Children Act 2004 (the Act), as amended by sections 24-28 of the Children and Social Work Act 2017, ‘child death review partners’ must also make arrangements to review all deaths of children normally resident in the local area, and if they consider it appropriate, for those not normally resident in the area. The CCG are a key partner in the development of the new Child Death arrangements.

2.1.3 Safeguarding Children and Young people: roles and competences for health care staff: Intercollegiate Document.

- 2.1.3.1 The Intercollegiate Document was published by the Royal College of Paediatrics and Child Health in 2014. This document outlines role requirements for Named and Designated safeguarding children posts and training compliancy requirements.

2.1.4 Looked after children: Knowledge, skills and competences of health care staff: Intercollegiate Framework:

- 2.1.4.1 The Intercollegiate Framework was published by the Royal College of Paediatrics and Child Health in 2015. This document outlines role requirements for Named and Designated Looked After Children posts and training compliancy requirements.

2.2 Local Context

- 2.2.1 Health services in Somerset are commissioned by Somerset Clinical Commissioning Group (CCG), NHS England and Somerset County Council. Somerset CCG has responsibility for commissioning the majority of

healthcare services for the 555,195 people who live in Somerset (July 2017), with 110,00 of the population being under 18 years.

2.3 Safeguarding Children Professionals

2.3.1 Somerset CCGs Safeguarding Children team consists of the following full (FT) and part time (PT) professionals:

- Designated Nurse Safeguarding Children and Children Looked After (Dual role / FT)
- Deputy Designated Nurse Safeguarding Children (FT)
- Interim Designated Doctor for Safeguarding Children (3 PAs a week)
- Designated Paediatrician for Child Death - East Somerset (1.5 PAs a week)
- Designated Paediatrician for Child Death - West Somerset (1.5 PAs a week)
- Designated Doctor for Children Looked After (1 PAs a week)
- Named GP for Safeguarding Children (2 PAs a week)
- Safeguarding Children Team Administrator (0.4 wte)

2.3.2 Currently the Safeguarding Children and Children Looked After Team hold a vacancy for a Designated Doctor Safeguarding Children (5 PAs a week). This is currently mitigated by the employment of the interim Designated Doctor for Safeguarding Children.

3 GOVERNANCE AND STATUTORY ARRANGEMENTS

3.1 Somerset CCG are the commissioners of local health services and are responsible for safeguarding quality assurance through contractual arrangements for services which they commission. Designated Professionals, as clinical experts and strategic leaders, are a vital source of advice to the CCG, NHS England, the Local Authority and to partners through the Somerset Safeguarding Children Board. They also provide advice and support to multi-agency professionals.

3.2 The ultimate accountability for safeguarding children sits with the Chief Officer and the Chair of the CCG. The Executive Lead for Safeguarding Children within the CCG is the Director of Quality, Safety and Engagement and is responsible, alongside the Chief Officer and the Chair for ensuring that the health services' contribution to safeguarding and promoting the welfare of children is discharged operationally and effectively across the health economy via local commissioning arrangements.

3.3 Throughout 2017/18 the Safeguarding Children and Looked After Children Team produced quarterly Safeguarding and LAC reports for each of the Clinical Governance Committees (or equivalent) which included safeguarding and LAC work across the CCG and Somerset health system.

The Designated and Named Professionals also highlighted concerns and positive practice by exception to the Committees. The reports have provided assurance to the CCGs in relation to meeting the safeguarding and LAC statutory requirements of the CCGs and escalated challenges as appropriate.

3.4 The Designated and Named Professionals for Safeguarding Children, Children Looked After and Child Death provide support and assurance that safeguarding children arrangements, training and supervision is in place across the health community.

3.5 Throughout 2017/18, the Designated Safeguarding Children Professionals provided formal individual and / or group safeguarding children supervision for:

- Named GPs for Safeguarding in primary care
- Named Professionals for safeguarding children within NHS provider organisations
- Safeguarding leads for safeguarding children within NHS provider organisations
- Public Health safeguarding lead

3.6 In addition the safeguarding Children and Children Looked After team provide informal safeguarding children supervision and advice to contracted services (such as dental and pharmacy services), CCG teams and department, primary care staff and staff within partner agencies.

4.0 SOMERSET SAFEGUARDING CHILDREN BOARD (SSCB)

4.1 The Somerset Safeguarding Children Board (SSCB) is the statutory, multi-agency partnership with responsibility for coordinating, monitoring and challenging all activity relating to safeguarding children and young people living in the County. Safeguarding Children Boards were set up as a result of the 2004 Children Act and are regulated by that law.

4.2 Somerset CCG is a key partner of the SSCB. The Director of Quality, Safety and Engagement / Executive lead for Safeguarding and the Designated Nurse Safeguarding Children and Children Looked After are members of the safeguarding children board. The following Somerset providers are also expected to provide Director-level representation on the SSCB:

- Yeovil District Hospital NHS Foundation Trust (YDH)
- Taunton and Somerset NHS Foundation Trust (TST)
- Somerset Partnership NHS Foundation Trust (Sompar)

4.3 The CCG's safeguarding children team are a member the following SSCB subgroups and during the last year have significantly contributed to the work generated by these groups:

- CDOP (Child Death Overview Panel)
- Quality and Performance sub group

- Audit sub group
- Health Advisory sub group (Chaired by Designated Nurse)
- Child Exploitation sub group
- Learning and Improvement sub group
- Business Planning Groups (for chairs of all sub groups)
- Neglect sub group
- Training and Development sub group

4.4 Safeguarding leads from within NHS provider organisations are active members of the Somerset Safeguarding Children Board sub groups and the CCG have worked to ensure the providers are represented equitably. Through the sub groups the Named Professionals for safeguarding children participate in the work streams identified as a priority for Somerset within the Board's business plan. As key partners of the Somerset safeguarding children board, the CCG and the NHS providers it commissions have made a significant contribution to the work of the SSCB and its subgroups.

4.5 The CCG's safeguarding children team priorities are outlined in Section 11 of this report and align with the following SSCBs priorities:

1. Early Help
2. Multiagency safeguarding
3. Neglect
4. Child Exploitation / Children missing

4.6 Serious Case Reviews (SCR)

4.6.1 Local Safeguarding Boards are required to undertake reviews of serious cases when:

- (a) abuse or neglect of a child is known or suspected; and
- (b) either - (i) the child has died; or (ii) the child has been seriously harmed and there is cause for concern as to the way in which the authority, their Board partners or other relevant persons have worked together to safeguard the child.³

4.6.2 The SCR once complete and ratified by the SSCB will be published unless there are extenuating reasons not to. There have been 2 serious case reviews (SCR) published in by Somerset safeguarding Children Board (SSCB) in the last 12 months, with the following themes:

- Child sexual exploitation (Fenestra published October 2017)
- Non accidental injury (Child Sam published September 2017)

4.6.3 There are currently a number of reviews at varying stages being progressed by the SSCB. All of the current and published reviews have had

³ Working Together to Safeguard Children, March 2018

significant involvement and support from the CCG's Safeguarding Children Team. The quarterly safeguarding children and children looked after reports submitted to the CCG's Patient Safety and Quality Assurance Committee (PSQAC) provide detailed updates regarding the progress of each review.

4.2.2 Progress with the health element of Serious Case Reviews (SCR) for Somerset CCG, and for each of the providers for which the CCG is the lead commissioner, are monitored through the following forums:

- The Serious Case Review panel convened for each of the SCRs
- The Learning and Improvement sub group of Somerset Safeguarding Children Board (SSCB)
- Somerset Safeguarding Children Board and sub group meetings
- NHS Provider safeguarding committees.
- The CCG's safeguarding adult and children commissioning forum

4.2.3 The SCRs published by Somerset safeguarding Children Board can be found here: <https://sscb.safeguardingsomerset.org.uk/working-with-children/serious-case-reviews/>

5 SAFEGUARDING MONITORING OF SOMERSET PROVIDERS

5.1 All health providers are required to have safe and effective arrangements in place to safeguard and protect children. The CCG ensures that processes and systems for identifying, protecting and supporting children & young people are embedded within the commissioned arrangements for provider organisations. The providers provide assurance to the CCGs by producing an annual safeguarding report which is scrutinised by the Designated Professionals for Safeguarding Children and Children Looked After. The quality and safety of Somerset CCG commissioned health services' safeguarding children systems and processes is further scrutinised through the following routes:

- Clinical Quality Review Meetings
- Provider's safeguarding committee meetings
- SSCB Board and sub groups
- Safeguarding element in contracts
- Safeguarding children element of quality assurance visits

5.2 Safeguarding children element of contractual arrangements

5.2.1 The Safeguarding Children Schedule currently includes assurance regarding the following:
Standard 1: Governance and Commitment to Safeguarding Children & Young People
Standard 2: Policies, Procedures and Guidelines Adults
Standard 3: Training, Skills and Competences
Standard 4: Supervision and Reflective Practice
Standard 5: Multi-Agency Working

Standard 6: Reporting Serious Incidents
Standard 7: Engaging in Serious Case Reviews
Standard 8: Safe Recruitment and Retention of Staff, including Volunteers
Standard 9: Managing Safeguarding Children Allegations Against Members of Staff

5.2.2 In the last 12 months the CCG's safeguarding children team have been working closely with the contract and quality leads for each of the NHS providers commissioned by the CCG, to review and update the following aspects of the full and shortened versions of the NHS standard contracts currently in use:

- Annual safeguarding children report
- Key Performance Indicators for safeguarding children
- Local Reporting Requirements
- Local Quality Requirements
- Local Agreements, Policies and Procedures
- Safeguarding Children: Standards for Health Service Providers

5.2.3 In March 2018 the CCG's safeguarding children team developed a draft safeguarding children dashboard, which requires the provision of detailed safeguarding children data to the CCG on a monthly, quarterly and annual basis. This dashboard is being developed in partnership with the NHS Provider's safeguarding children leads, with the hope that it will be embedded throughout the CCG's contract, performance, quality and safeguarding children assurances processes. It will be launched in June 2018.

6 CHILDREN LOOKED AFTER (CLA)

6.1 Somerset CCG continues to work in partnership with Somerset County Council (SCC) in discharging its statutory duty for CLA in their care by supporting the health needs of children. The term children in care includes all children looked after by the Local Authority who are subject to a care order or accommodated under section 20 of the Children Act 1989.

6.2 The numbers of CLA continues to increase slightly over the year. At the end of March 2018, there were 510 children looked after in Somerset, compared with 503 in March 2017.

6.3 Corporate Parenting Board (CPB)

6.3.1 The Designated Nurse Children Looked After represents the CCG at this board, and provides feedback on the work undertaken by the CPB Health and Wellbeing sub group as Chair. The CPB meets on a bi-monthly basis and includes membership from all agencies who have a statutory responsibility in relation to Children Looked After and Care Leavers. The CPB reviews the work plan and feedback from each of the sub groups:

- Leaving Care

- Health and wellbeing
- Education
- Voice of the Child

6.3.2 The four task group priority areas remain aligned to the overarching Somerset Children and Young People's Plan which are:

- promoting healthy outcomes and giving children the best start to life
- improving emotional health and wellbeing
- providing help early and effectively
- achieving effective multi-agency support for more vulnerable children and young people

6.4 **Corporate Parenting Board (CPB) Health and Wellbeing Sub Group**

6.4.1 The Designated Nurse Children Looked After chairs the CPB Health and Wellbeing Sub Group. This group meets on a bi-monthly basis and includes membership from all agencies who have a statutory responsibility to work together to meet the health and wellbeing needs of Children Looked After and Care Leavers.

6.4.2 The Health and Wellbeing (HWB) Sub Group action plan is aligned with the Children and Young People's Plan for Year 2 and progress on the implementation of the action plan is reported back to the CPB on a bi-monthly basis. The HWB sub group action plan includes the following areas for development:

- Strengthen the timeliness and quality of health assessments for children and young people placed out of county.
- Through the implementation of the CAMHS transformation programme, ensure there is timely access to emotional health support.
- Ensure CLA have a Strengths and Difficulties Questionnaire (SDQ) which is analysed, informs their individual care plan and is updated regularly.
- Children Looked After (CLA) have access to emotional support through the Emotional Health and Wellbeing (EHWB) Team
- Ensure that individual health practitioners are supported in their skills and competencies to deliver effective and coordinated care for each young person
- Provide support to the Leaving Care Staff and Managers in identifying where to sign post young people to, utilising existing resources currently in place in relation to sexual health services, emergency contraception, dental health services and urgent care
- Consider how the unique health and wellbeing needs of the Unaccompanied Asylum Seeking Children are met

6.4.3 **Timeliness of health assessments:** The levels of Initial Health Assessments (IHAs) being completed for children who have been looked after for more than 28 days have steadily increased, and is now at 85% as of March 2018, compared to 80.3% in April 2017. The levels of IHAs completed by day 28 is an area for development for 2018 / 2019, requiring

involvement of all agencies to address the reasons behind IHAs completed late. An audit of Children Looked After (CLA) records where the 28 day deadline wasn't met was completed in January 2018 to determine what further multi-agency actions are required to address the identified delays. This audit was undertaken by the CCG's Designated Nurse Children Looked After and Safeguarding Children in partnership with the Operational Manager for Public Health Nursing / Manager of the CLA nursing team, and formed part of a CLA audit that also looked at the quality of Health Care Plans and the use and analysis of SDQs as part of this process. (Please see section 8.2 for further information).

- 6.4.4 **Timely access for children looked after and care leavers to support with their emotional health and wellbeing:** The Health and wellbeing (HWB) sub group is working collectively together to ensure that the emotional and mental health needs of care leavers and children looked after (CLA) are recognised and addressed through the following:
- Prompt response to a child's emotional needs when they first become looked after.
 - Use of Strengths and Difficulties Questionnaires (SDQs) to inform the health assessment and CLA review process.
 - Children Looked After (CLA) have access to the emotional health and wellbeing team.
 - Developing greater awareness and understanding of the existing resources and tools in place to support children and young people's emotional health and wellbeing at Tiers 1 to 3.
 - The development of a pathway between the Emotional Health and Wellbeing Team to Tier 1 to 3 children and young people (CYP) mental health service.
- 6.4.5 **Health Assessments for Children Looked After placed out of county:** In 2017 / 2019 funding was provided by Somerset CCG for a small cohort of children looked after who were placed in surrounding counties and had an overdue Review Health Assessment. The funding was provided to allow the CLA nursing team to work the additional hours needed to travel across counties to the CLA and complete the outstanding RHAs.
- 6.4.5.1 There has been a noticeable increase in the amount of out of county CLA teams reporting they have no capacity to complete the Health Assessment for Somerset children looked after placed in their area. The lack of completion of out of county health assessments is classed as an unwarranted variation in the health delivery and commissioning arrangements for this group of vulnerable children. In March 2018 NHS England published the "Guide to Meeting the Statutory Health Needs of Looked After Children through a Standard Approach to Commissioning and Service Delivery". The Standard Approach document has been developed with the aim to improve the health outcomes of Looked After Children (LAC) across England by reducing the unwarranted variation in completion go out of county health assessments across England. Somerset CCG supported the Designated Nurse SGC and CLA to attend the launch of this guidance.

6.4.5.2 In March 2018 NHS England published the Out of County Escalation process. The Designated Nurse Safeguarding Children (SGC) and Children Looked After (CLA) is following this process when advised of delayed out of county health assessments for Somerset children. Further work will be undertaken in 2018 / 2019 to embed both the guidance and the escalation process into practice.

6.5 **Children Looked After (CLA) Health Team**

6.5.1 Somerset CCG commission the Children Looked After (CLA) team. The CLA nursing team is hosted by Somerset Partnership NHS Foundation Trust. The Designated Doctor for Children Looked After is hosted by Taunton and Somerset NHS Foundation Trust.

6.6 **Care Leavers**

6.6.1 A care leaver is a young person aged 16 or 17, who has been looked after for at least 13 weeks since the age of 14. The quality of support for care leavers nationally has been identified as inconsistent for this vulnerable group.

6.6.2 Statutory guidance requires CCGs to ensure that care leavers are properly supported during their transition into adult health services. It recommends that wherever possible, care leavers should be equipped to manage their own health needs and be provided with a summary of their health information such as immunisation history. In Somerset this was originally provided in the form of a health passport, but has been phased out and replaced with the Blue Book.

6.6.3 It is imperative that care leavers know what health services, advice and support is available locally to meet their needs. Through the CPB's Health and Wellbeing sub group, the CCG have worked in partnership with the leaving care team and other partner agencies, to support care leavers in accessing their health history, and understanding where they can seek advice and support in relation to a wide variety of urgent and non-urgent health issues. This includes providing support to the Leaving Care Staff and Managers in identifying where to sign post young people to, utilising existing resources currently in place in relation to sexual health services, emergency contraception, dental health services and urgent care

6.7 **Unaccompanied Asylum Seeking Children (UASC)**

6.7.1 Work is ongoing to ensure the health and wellbeing needs of the UASC population are met by all partner agencies, from date of arrival in Somerset onwards. The Distress Screening Tool (DST) is routinely completed by Kent for Unaccompanied Asylum Seeking Children prior to transfer and the Fitness to Transfer health assessment, which includes the DST score, is completed by staff within Kent prior to moving to Somerset. Timely assessment and intervention into the emotional health and wellbeing of

UASC is a key element of the CLA emotional health and wellbeing pathway currently being developed

7 SAFEGUARDING AND PROMOTING THE WELFARE OF CHILDREN IN PRIMARY CARE

7.1 The CCG's Safeguarding Children have the following processes in place to ensure effective support of the GP practices within Somerset:

- **Development of safeguarding children webpages on the CCG website:** These provide a wealth of information and resources in relation to early help and safeguarding on unborn babies, children, young people and their families. Additional resources include safeguarding children training information.
- **The CCG's safeguarding children policy:** This was reviewed, updated and then published on the CCG website in July 2017. Many GP Practices within Somerset have adopted this as their practice's safeguarding Children policy.
- **Primary Care Safeguarding Children forums:** In May 2017 the CCG's safeguarding children team set up a quarterly safeguarding children forum, aimed at supporting all staff working within primary care in safeguarding and promoting the welfare of children. The forums have been well attended, with a wide variety of issue covered:
 - Actions to be taken by primary care staff to be compliant with national mandatory safeguarding children training requirements
 - GP engagement with MARAC
 - Use of the EHA form for an assessment, early help referral or Level 4 / child protection referral.
 - Raising awareness of the role of the CCG's safeguarding children team
 - Raising awareness of the GP and safeguarding leads consultation line and the Early Help Advice line.
 - Embedding lessons from Somerset Serious Case Reviews (Fenestra and Sam)
 - Safeguarding issues arising within Primary Care
- **'The Safeguard' newsletter:** These are published by the CCG's safeguarding children team, with the invaluable support and skills of our team administrator, on a monthly basis and are shared widely across Primary Care and the CCG. For accessibility these are also published on our website and a link to the newsletters is included in the CCG's GP Bulletin. The newsletter was developed following feedback from GPs that they felt isolated in relation to new developments within safeguarding, and dissemination of a wide variety of information via emails did not work. Launch of local and national guidance and toolkits and information regarding local and national safeguarding children

training opportunities are just a few of the items included in the monthly newsletter, which has been well received.

- **Opportunities for primary care staff to be involved in completion of multi-agency safeguarding audits:** This includes audits that have led from completed serious case reviews (See section 8.4 of this report) and audit that are undertaken through the Audit sub group of the safeguarding children board. This is to ensure that 'health' is appropriately represented in all audits.
- **Opportunities for primary care staff to be involved in the development of local toolkits, policies and procedures:** Particularly through the work of the Somerset Safeguarding Children Board and the sub groups. The CCG's safeguarding children team have worked on behalf of, and actively encouraged the participation of, primary care staff in the development of development of multiagency procedures such as the neglect toolkit and revised pre-birth toolkit. These can be viewed on the SSCB website

<https://sscb.safeguardingsomerset.org.uk/working-with-children/local-protocols-guidance/>

- **Attendance at Practice Manager and Health Coach:** A member of the CCG's safeguarding children team has attended practice manager forums in all four localities, as well as the Health Coach Forum. In addition to supporting practice managers and health coaches with their safeguarding children practice, it was an opportunity to raise awareness of the work undertaken by the CCG's safeguarding children team, share key information and developments around safeguarding and promoting the welfare of children, and improve communication between primary care, Somerset CCG and partner agencies.
- **Provision of group Safeguarding Children Supervision sessions:** In January 2018 the Designated Professional for Safeguarding Children started delivering group supervision sessions to safeguarding leads within Somerset. Top facilitate attendance by primary care staff these are held in practices across Somerset.
- **Provision of ad hoc advice and support:** The CCG's safeguarding children team respond to requests for support and advice in relation to a wide variety of issues from primary care staff, via telephone, face to face and via email. As all of the team are responsible for providing support, this ensures that concerns related to safeguarding and CLA which arise in Primary Care can be answered as quickly as possible. The CCG's safeguarding children team's names and contact details have been included in 'The Safeguard' newsletter, and are routinely shared at GP safeguarding leads training days, through the CCG's safeguarding children webpages and through the Primary Care safeguarding children forum.

7.2 **GP Safeguarding leads training**

- 7.2.1 The safeguarding children team facilitated two GP safeguarding children lead training days this year with the theme 'Learning from Serious Case Reviews'. In July 2017 and January 2018, the training focused on SCR Fenestra (published November 2017) and SCR Child Sam (October 2017). These training days were aimed at the following:
- Supporting GP safeguarding leads in achieving compliancy with their Level 3 mandatory safeguarding children training requirements
 - Embedding learning from these SCRs across primary care
 - Provide GP safeguarding leads with safeguarding children training tools and resources they can use within their practices.
- 7.2.2 Ensuring staff are compliant with mandatory safeguarding children training is a shared remit between each practice, NHS England and the CCG. The CCG's safeguarding children team are working with the Primary Care contract leads to embed safeguarding children throughout the NHS standard contracts for enhanced GP services, which includes the requirement for each practice to complete an annual safeguarding report template. This will provide significant assurances that systems and process put in place by each practice to safeguard and promote the welfare of children is in line with Working Together to Safeguard Children 2015 and meets requirements under Section 11 of the Children Act 2004.
- 7.2.3 Additional support has been provided by the CCG's safeguarding children team in signposting primary care staff to the existing safeguarding children training opportunities available within Somerset and this information has been included on the improved safeguarding children webpages on the CCG website <https://www.somersetccg.nhs.uk/about-us/how-we-do-things/safeguarding-children/> Further work is needed in 2018 / 2019 to develop a sustainable training programme for primary care in all four localities, jointly provided by the GP safeguarding leads and members of the CCG's safeguarding children team.

8 REVIEWS, AUDITS AND INSPECTIONS

8.1 SEND Peer review May 2017

- 8.1.1 The CCG's safeguarding children, Patient Engagement and SEND teams participated in the multi-agency Peer review of Somerset services for children and young people with Special Educational Needs and Disability (SEND). The review team consisted of Gloucestershire staff across education, social care and health services and the independent consultant who had supported Gloucestershire County Council on preparing for the SEND reforms and for their own Local Area SEND inspection.
- 8.1.2 In line with the Ofsted/CQC framework, three primary questions were identified for review:

- How effectively does the Local Area identify children and young people (CYP) who have special educational needs and/or disability (SEND)?
- How effectively does the Local Area assess and meet the needs of children and young people (CYP) who have SEND?
- How effectively does the Local Area improve outcomes for children and young people (CYP) who have SEND?

8.1.3 The following key lines of enquiry (KLOEs) were proposed by Somerset County Council:

- How effectively do CYP with SEND achieve in Somerset?
- Do parents and carers of CYP with SEND have confidence in the local area's leaders and services?
- Is there timely and accurate assessment of, and planning for, their children's needs? How engaged are parents in the process?
- How effective is the local offer?
- How effective are the local area's information management systems?
- How do they enable more effective and efficient provision?
- How effective is the provision at post 16 and post 19?
- Have the absence and exclusion rates for CYP with SEND been recognised by the local area as a priority for action?
- What is the provision in terms of DMO plus and how effective is it?
- How effective is CAMHS in supporting the SEND agenda?
- What is the experience for CYP across the county in terms of health and therapeutic provision?

8.1.4 Formal feedback was provided by the multi-agency peer review group, which has been embedded into the multi-agency SEND agenda overseen internally through the Patients Safety Quality Assurance Committee (PSQAC) and externally by the SEND board and its sub groups.

8.2 GP referral audit

8.2.1 The Fenestra Serious Case Review health action plan placed a requirement on the CCG to seek assurances from all health care providers in relation to the robustness of early help and safeguarding referrals. The GP referral audit was undertaken to verify the conversion rate for Level 4

child protection referrals made by staff in primary care to the First response Team. The cohort of referrals audited was chosen from a specific time period. The final audit report will be shared with GP safeguarding leads and the Primary Care Safeguarding Children forum and actions will be agreed by the group, aimed at improving the quality of referrals from primary care staff.

8.2.2 In the interim the following actions have been taken by the CCG to address the learning that the audit identified:

- The SSCB Effective Support guidance / Threshold Document was referenced throughout the CCG Safeguarding Children Policy ratified in July 2017.
- An Early Help and Child Protection referral page is being developed on the CCG website.
- Information on early help and safeguarding referral forms and tools have been included in the monthly Safeguard newsletters.
- Training and advice provided by the CCG includes use of the effective support guidance in completion of early help and child protection referrals.
- Promoted the use of Children Social Care's consultation line for GPs and Safeguarding Leads within Somerset.

8.3 Somerset Safeguarding Children Board (SSCB) Early Help Audit

8.3.1 In light of the action plan arising from the Child Sam Serious Case Review (SCR) a multi-agency Early Help audit was completed in October 2017. The focus of the audit was the need for SSCB to be assured that thresholds for intervention at level 2 are being understood and applied. The audit panel looked at 8 randomly selected young parents from Somerset Partnership NHS Foundation Trust who were receiving a universal plus (enhanced) Health Visiting Service offer. The rationale behind this cohort was to replicate (as closely as possible) the presenting factors within the Child Sam Serious Case Review (SCR), and seeking assurance through audit of practice that the needs of the young parents and their unborn babies / children were being appropriately addressed.

8.3.2 The CCG's safeguarding children team met with staff in each of the practices the 8 young parents were registered with, auditing the service provided to the young parents and their families in partnership with leads from each of the practices. Anonymised summaries of audit findings for each of the families were provided to the multi-agency audit panel. The CCG's safeguarding children team have contributed to the development of a draft audit report, with the final audit report due to be presented to the Somerset Safeguarding Children's Board Quality and Performance sub group in the next quarter. The CCG will share the learning from this audit with primary care staff through 'The Safeguard' newsletters, the GP Safeguarding Children Forum, GP safeguarding leads training days and feedback direct to practice leads who participated in the audit.

8.4 Ofsted Inspection of Somerset County Council

- 8.4.1. In November 2017 Ofsted returned to carry out an inspection of local authority services for children in need of help and protection, children looked after and care leavers. A review of the SSCB was not included but partner agencies including the CCG were involved in a number of the inspection meetings. In February 2018 the inspection report was published and a briefing was provided to the CCG Senior Leadership team by the CCG's safeguarding children team. The briefing outlined recommendations and actions within the report that relate to the CCG, primary care and health services the CCG are lead commissioner for. In addition it provided assurance as to the work being undertaken by the CCG, its members and commissioned providers to address the recommendations that relate to 'health' agencies.
- 8.4.2 In 2018 / 2019 the work needed to further address the recommendations for 'health' will be embedded into the safeguarding children and children looked after work plan; which is overseen internally through the Patient Safety and Quality Assurance Committee, and externally through the Health and Wellbeing sub group of the Safeguarding Children Board and Somerset Corporate Parenting Board

8.5 Children Looked After (CLA) annual audit

- 8.5.1 In January 2018 the Operational Service Manager Public Health Nursing and the Designated Nurse Safeguarding Children (SGC) and Children Looked After (CLA) completed a small audit into Children Looked After Initial Health Assessments, reviewing the rationale behind Children Looked After (CLA) initial health assessments that hadn't been completed by day 28. The most common delays for the late IHA's (Initial Health Assessments) included:
- Late notification to the CLA team that a child has become looked after, by social workers within the safeguarding and children looked after teams.
 - Lack of consent for children accommodated under section 20, which impacted on requests for out of county IHA's.
 - Lack of confirmation of current demographic details; needed to identify who (as in what service) should undertake the IHA and where (as in what county).
 - Combination of delay in requesting out of county IHA's (because of lack of demographics and / or lack of consent) combined with delay in the provision of an appointment.
 - Delay in outpatient appointment offered by paediatricians in and out of county
- 8.5.2 These findings mirror those from similar CLA audits undertaken by multi-agency partners in 2016 (Strategic Manager for CLA and Care leavers, Operational Manager Public Health Nursing and Consultant in Public Health) and by the Operational Manager Public Health Nursing in 2017.

The findings in relation to late completion of IHA's in 2018 have been shared with the Corporate Parenting Board's (CPB's) Health and Wellbeing (HWB) sub group and immediate actions for each agency aimed at improving the timeliness of health assessments were agreed by members. These actions will be embedded into the CPB's Health and Wellbeing sub group action plan for Year 3 and further developed in 2018 / 2019. The progress of this will be monitored internally by the CCG through the Patient Safety and Quality Assurance Committee (PSQAC) and externally through the Corporate Parenting Board.

8.6 GP safeguarding leads audit

8.6.1 This audit was conducted using survey monkey in March 2018 and aimed to assess the current practice of GP safeguarding leads, in relation to safeguarding and promoting the welfare of children, as well as identify areas of development that the CCG's safeguarding children team could support them with. The final audit report is due to be completed in May 2018 and the CCG will share the learning from this audit with primary care staff through 'The Safeguard' newsletters, the GP Safeguarding Children Forum, GP safeguarding leads training days and feedback direct to practice staff who participated in the audit.

8.7 NHS England Safeguarding Assurance

8.7.1 An NHS England South West quarterly reporting tool is completed quarterly by the CCG safeguarding team. This provides assurance to the regional and national safeguarding leads in relation to the following areas:

- key progress against national safeguarding priorities
- new emerging local priorities
- performance and case reviews

8.7.2 Quarterly updates in relation to key safeguarding children work streams such as the following are also required:

- Prevent
- FGM RIS (Female Genital Mutilation Risk Indication System)
- CP – IS (Child Protection Information System)
- CSE (Child Sexual Exploitation)
- CLA (Children Looked After)
- MCA (Mental Capacity Act) and DoLS (Deprivation of Liberty Standards)
- Domestic Abuse
- Neglect
- GP networks
- IICSA (Independent Inquiry Into Child Sexual Abuse)
- Modern Slavery
- Safeguarding Reforms

9 SAFEGUARDING CHILDREN WORKSTREAMS

9.1 Throughout 2016/17 the safeguarding children and CLA team have contributed to the local, regional and national safeguarding children and CLA agenda, which is detailed within this report. Examples of their involvement include:

- Development of an SSCB Neglect toolkit to support practitioners working with families to identify and respond to neglect, through the Neglect task and finish group and Health Advisory Group; both of which are sub groups of Somerset Safeguarding Children Board
- The multi-agency pilot of the SSCB neglect toolkit.
- Provision of expert safeguarding advice and support to primary care, health providers and partner agencies
- Resolving professional differences of a safeguarding children nature, between health providers and other organisations.
- Undertaking both single and multi-agency audit of safeguarding children practice as outlined in Section 8 of this report.
- Contributing to both single and multi-agency safeguarding children reviews, including Somerset Serious Case Reviews, such as those detailed in Section 4.6 of this report.
- Working with local authority colleagues to ensure Primary Care staff are routinely included in multi-agency meetings for vulnerable and at risk unborn babies, children and young people; specifically related to team around the child (TAC) meetings, child in need (CIN) meetings, child protection case conferences, MARACs (Multi agency risk assessment conferences), and strategy meetings or discussions.
- Ensuring that the recommendations from the Child Sexual Exploitation/Sexual Exploitation Project for Somerset and North Somerset Health Community, commissioned jointly by Somerset CCG and North Somerset CCG, has been widely disseminated to all agencies and embedded into the work plan overseen by the SSCB Child Exploitation sub group.
- Leading on the development of the SSCB's CSE strategic action plan for effective interagency working.
- Working in partnership with leads within the NHS providers to develop the revised multiagency Child Exploitation screening and assessment tools for practitioners.

- Production of a CCG Safeguarding Children Strategy (awaiting ratification)

10 AREAS OF CHALLENGE

10.1 During 2017 / 2018 the following have been key areas of challenge for the CCG's safeguarding children and children looked after team:

10.2 **Capacity of the CCG's CLA team:** The capacity of both the Designated Doctor for Children Looked After and the dual role Designated Nurse Children Looked After and Safeguarding Children is an issue for the CCG and has a direct impact on the delivery of the Safeguarding Children (SGC) and Children Looked After (CLA) agendas. The duty placed on the CCG in relation to Designated Professionals, including the Designated Nurse Children Looked After (CLA) is clearly documented in statutory guidance and legislation. Somerset CCG is supportive of a business case for a separate Designated Nurse Children Looked After (CLA) Nurse, which is currently in draft format.

10.3 **The Designated Doctor Safeguarding Children (SGC) vacancy:** This post has been vacant since April 2015 and is currently placed on the CCG's Risk Register, with the control measures in place reviewed regularly. In April 2017 the CCG leadership team approved the business case put forward by the Director of Quality, Safety and Engagement / Executive lead for Safeguarding and the Designated Nurse SGC and CLA, resulting in funding for the Designated Doctor SGC sessions being increased from 3 to 5. The previous Designated Doctor for Safeguarding Children was employed in November 2017 as the Interim Designated Doctor Safeguarding Children and this is working well as a temporary measure. The remainder of the safeguarding children workload is being overseen by the Designated Nurse SGC and CLA, supported by the Deputy Designated Nurse for Safeguarding Children.

10.3.1 The CCG are working in partnership with Taunton and Somerset NHS Foundation Trust in relation to the advertisement of a joint Designated Doctor for Safeguarding Children / Consultant Community Paediatrician post, with the hope that 5 sessions for each of the roles will be more attractive to applicants.

10.4 **Child Protection Referral process in Somerset:** Since June 2017 health professionals have been highlighting concerns regarding the use of the Early Help Assessment form as a child protection referral form. The form is called "Somerset Early Help Assessment (EHA) including the multi-agency request for involvement form" and is used for multiple purposes: completion of an early help assessment with a family, referral to multiple CYP services, referral for early help (Getset) and referral for Tier 4 child protection concerns. Health professional's concerns regarding the EHA form being used as a child protection referral form have been discussed at the following forums:

- Somerset Safeguarding Children Board (SSCB) Health Advisory sub group
- Somerset Safeguarding Children Board (SSCB) Business Planning sub group
- Somerset Safeguarding Children Board
- Somerset Operational Group

10.4.1 The Designated Professionals with the CCG have escalated these concerns to Children's Social Care and as a result a meeting between children's social care and health leads is scheduled in April 2018. Safeguarding leads for the CCG, YDH, TST, Sompar, SWASFT, Primary Care and Vocare have been invited.

11 **PROGRESS AGAINST OBJECTIVES FOR 2017 / 2018**

11.1 The CCG's Safeguarding Children and CLA Team have made substantial progress against the team work plan in 2017 /2018, examples include:

- Development of a draft safeguarding children data dashboard in partnership with Public Health, supported by safeguarding leads from all of the NHS Providers in Somerset.
- Development of detailed webpages in relation to safeguarding and promoting the welfare of children on the CCG website
- Development of the Primary Care Safeguarding Children Forums
- Provision of group safeguarding children supervision to primary care and safeguarding leads within Somerset
- Development and ratification of a revised CCG Safeguarding Children (SGC) Policy, which has been adopted by a significant number of primary care practices as their own SGC policy.
- Significant improvement in engagement with primary care through monthly newsletters, safeguarding children webpages on CCG website, quarterly GP safeguarding children forums and bi-annual GP safeguarding lead training days.
- Monitoring and quality assuring the action plans from 'health' agencies for Somerset serious care reviews, learning reviews and safeguarding audits; ensuring the lessons are embedded into practice.
- Ensuring an audit is undertaken by the Children Looked After team to review the quality and timeliness of health assessments and health care plans.
- Contribution to the development of the revised [Somerset Pre Birth Planning Toolkit](#)
- Training and development of the CCG's Named GP for Safeguarding role, who came into post in November 2017.
- Supported the GP safeguarding leads in the development of safeguarding children training resources that can be used in the delivery of in-house training.
- Worked in partnership with Somerset Partnership NHS Foundation, Yeovil District Hospital NHS Foundation, Taunton and Somerset NHS Foundation and Somerset County Council to improve the timeliness of initial health assessments for children looked after.

- Mechanisms are in place to provide robust assurance to NHS England, Somerset CCG and Somerset Safeguarding Children Board in relation to how Somerset CCG promotes and safeguarding the wellbeing of unborn babies, children and young people across all commissioned healthcare services, and within partner agencies.
- Formalised cover arrangements currently in place in the absence of a Designated Doctor for Safeguarding Children
- The Designated / Deputy Designated professionals have provided progress reports on reviews, audits and inspections to the Patient Safety and Quality Assurance Committee (PSQAC) as part of the CCG's quarterly safeguarding children report.

12

OBJECTIVES FOR 2018 / 2019

- Ratification of the CCG's Safeguarding children strategy
- Setting up systems to capture SGC training compliancy for staff within the CCG: The CCG's safeguarding children team are working in partnership with the safeguarding adult team and the human resources department to identify how safeguarding training compliancy data for CCG staff can be captured.
- Provision of safeguarding children training to staff within the CCG: A safeguarding children update has been arranged for the Governing Body for July 2018.
- Embedding safeguarding children throughout NHS standard contracts issued by Somerset CCG
- Alignment of Children and Young People plans being developed and implemented through the Children's Trust Improvement Programme 3 (Improving emotional health and well-being), Improvement Programme 2 (Promoting healthy outcomes and giving children the best start in life) and the Corporate Parenting Board's HWB sub group.
- Further work needed to address the recommendations for 'health' from the Ofsted Inspection of Somerset County Council in 2017 is to be embedded into the safeguarding children and children looked after work plan
- Monitor and quality assure the arrangements in place for prevention, identification and management of Child Sexual Exploitation in health care settings through the reporting requirements for NHS providers to the CCG.
- Continue to work with local authority colleagues to ensure GPs are routinely included in multi-agency meetings for vulnerable and at risk unborn babies, children and young people; specifically related to team around the child meetings, case conferences, MARACs (Multi agency risk assessment conferences), and strategy meetings / discussions.
- Continued participation to the SSCB Sub-Groups and Board
- Implementation of the Children and Social Work Act 2017; which includes new multi-agency arrangements in relation to Child Death arrangements and multi-agency safeguarding arrangements; aligned with the soon to be published statutory guidance Working Together to safeguard Children 2018.

- Completion of business case for the recruitment of the CCGs band 8b dedicated Designated Nurse for Children Looked after post.
- Alignment of Adult and Childrens safeguarding teams within the CCG to support shared and integrated working to drive the “Think Family” approach which Somerset CCG has embraced.

13 CONCLUSION

- 13.1 Commissioners of health services have a duty to ensure that all NHS Trusts recognise the importance of robust and effective arrangements in place to safeguard and protect children and young people across Somerset, and to provide assurance that they are fulfilling its statutory responsibilities for Safeguarding Children under section 11 of the Children Act 1989 (2004).
- 13.2 The CCG’s Safeguarding Children Team strive to ensure all safeguarding children processes and systems put in place by ‘health’ and partner agencies are robust and effective. There has been a huge amount of work and developments to improve processes and build on existing relationships, systems and procedures as outlined in this report. The Team has agreed a robust work plan for 2018/19 to continue the positive work in 2017/18 and to fulfil our safeguarding children statutory and strategic objectives.