

**MEETING:** Cambridgeshire PCT Board Meeting in Public

**AGENDA ITEM:** **SECTION:**

**DATE:** 24.06.09

**TITLE:** ANNUAL REPORT SAFEGUARDING CHILDREN

**FROM:** PAULA SOUTH DESIGNATED NURSE SAFEGUARDING CHILDREN

**FOR:** INFORMATION

**1 ISSUE THE PURPOSE OF THIS REPORT IS TO :**

- Provide the Board with information upon which to develop a better understanding of the safeguarding children task for NHS Cambridgeshire
- Detail local contextual information regarding vulnerable children in Cambridgeshire
- Present a proposal for a Safeguarding Performance Framework
- Review performance against actions proposed in the 2008 Annual Report
- Set out the key safeguarding achievements for 2008/9
- Outline a way forward for 2009/10

**2 KEY POINTS**

**2.1 The Statutory Context**

All organisations who work with children share a responsibility to safeguard and promote their welfare. This responsibility is underpinned by a statutory duty under Section 11 Children Act (2004) which requires all NHS bodies to discharge their function with regard to the need to safeguard and promote the welfare of children

2.2 NHS Cambridgeshire has an additional responsibility to ensure that the health contribution to safeguarding and promoting the welfare of children is discharged effectively across the health economy through the PCT's commissioning arrangements.

The principle that safeguarding children is everyone's responsibility is at the heart of all commissioning arrangements within Cambridgeshire.

**2.3 Incidence of safeguarding issues in Cambridgeshire**

As at March 31<sup>st</sup> 2009, the number of children in Cambridgeshire who are subject to a Child Protection Plan has decreased to 354. This is the second consecutive decrease following over 2 years of incremental rises. All three localities have experienced decreases in numbers of children with a child protection plan. (Table 1) This decrease is an expected outcome of the Every Child Matters initiative which focuses on early identification of need and risk with subsequent early interventions that aim to prevent harm being caused to children.

**Table 1 – Number of Child who have a Child Protection Plan**

	Sep-08	Feb-09	Mar-09
<b>ECFEN</b>	129	139	128 (-11)
<b>HUNTS</b>	127	123	112 (-11)
<b>CSSC</b>	127	120	114 (-6)
<b>TOTAL</b>	383	382	354 (-28)

2.4 There is some variation in the rates of children with a Child Protection Plan across the County. CSSC's rate is 37% lower than ECFEN's rate. This may be due in part to the greater levels of social deprivation and disadvantage in the Fenland areas compared with South Cambridgeshire (Table 2)

**Table 2 – Rates of Registration per 1000 children in each Area**

	No. of CP Plans at 31st March	% of County Total	Under 18 Population	No per 1000 0-18 year olds.
<b>ECFEN</b>	128	36.1	36,000	3.55
<b>HUNTS</b>	112	31.6	36,800	3.04
<b>CSSC</b>	114	32.2	51,300	2.22
<b>Total</b>	<b>354</b>	<b>100%</b>	<b>124,100</b>	<b>2.85</b>

2.5 The County rate for children subject to a Child protection Plan on December 31<sup>st</sup> 2008 was 3.27 per 1000 children and 3.07 in February 09. The current Cambridgeshire rate has reduced again to 2.85 per 1000. This compares with the national rate for 2008 of 2.7 per 1000 and the East of England rate for 2008 of 2.2. per 1000

2.6 Rates in Comparator Authorities (as at March 31<sup>st</sup> 2008) were generally lower than Cambridgeshire. The direction of travel is positive in relation to reducing the incidence of recorded child abuse in the County, however Cambridgeshire is yet to be in line with similar Shire Authorities

**Table 3 – Age Group of Children who have a Child Protection Plan**

Age	< 1 year	1 - 4 years	5 - 10 years	11 - 15 years	16+ years	Not recorded
%	8.1	27.9	35.5	24.0	1.4	<b>2.8</b>

2.7 Table 3 above shows that at the beginning of March 2009 just over a third of children are under 5 years (36%); another third are of primary school age (35.5%) and 25.4% are of secondary age or older.

**Table 4 – Categories of Abuse for those Children**

Area	Emotional	Physical	Sexual	Neglect	Child x Categories	Children on CPR 31/3/09	Categories per child
<b>ECFEN</b>	62	29	13	93	197	128	1.53
<b>HUNTS</b>	84	51	7	76	218	112	1.94
<b>CSSC</b>	52	27	5	94	178	114	1.56

<b>County %</b>	33.3%	18%	4.2 %	44.3%			
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2.8 Table 4 shows that, as in previous quarters, the category of 'Neglect' features in about 44% of all cases of children with a Child Protection Plan but 'Sexual Abuse' features in only 4.2% of cases which is still lower than in other local Authorities.

## 2.9 Children in Need

1 in 30 children in Cambridgeshire are identified as Children in Need as defined under section 17 of the 1989 Children Act i.e. they are unlikely to achieve or maintain a reasonable standard of health or development without provision of services by a local Authority. This definition includes disabled children.

## 2.10 Looked After Children

440 children in Cambridgeshire are: Looked After' as defined by Section 22 of the 1989 Children Act. This means that they are looked after by the local Authority as a result of being the subject of a Care Order or through a voluntary arrangement with the child's parents.

## 2.11 Serious case Reviews

Serious case reviews (SCR) are undertaken by the Local Safeguarding Children Board (LSCB) when a child dies and abuse or neglect are known or suspected to be factor in their death When completed, Serious Case Reviews are evaluated by Ofsted.

1 Serious case Review has been evaluated by Ofsted in this reporting period. Overall evaluation was adequate with the health reports being graded as good or adequate

There are 3 Serious Case reviews currently ongoing in Cambridgeshire.

## 3 Progress on actions identified from 2008 Annual Report

3.1 There has been significant progress against actions during 2008/9

Training and one to one support has been provided to SCR report authors to facilitate production of high quality analytical reports. A model is being further developed to establish reciprocal arrangements with health colleagues in other counties within the region in order to meet recent additional Ofsted criteria of report authors being independent.

3.2 Child death review processes have been established in Cambridgeshire and Peterborough in order to meet the statutory requirement placed on LSCBs from April 2008 to enquire into all child deaths in the LSCB area and undertake a rapid response to those deaths that are unexpected. A child death overview panel is established and has three NHS Cambridgeshire members. A Rapid Response team has been established consisting of a team of health professionals and senior police officers. NHS Cambridgeshire has taken the leadership role in the development of this service which has been positively evaluated across the region.

3.3 A safeguarding component has been built into all contracts for 2009/10. New requirements include provision of action plans arising out of Serious Case Reviews and external audits of safeguarding arrangements. Additional requirements have been added for key providers of children's services including reporting on levels of training and supervision undertaken and CRB checks

3.4 A process has been developed to ensure a robust interface between Serious Case Reviews and Sudden Untoward Incidents (SUI). A paper was presented to the Health care Governance Committee which has establishes the process which will be overseen by NHSC safeguarding team and managers within clinical governance

3.5 Work in relation to formulating a joint commissioning strategy that includes joint funding arrangements

is ongoing, with the recent agreement to establish a Joint Commissioning Manager with the council's children's services. The new post holder will be working to strengthen the development of the Children's Trust in Cambridgeshire, secure better alignment of commissioning plans across the 2 agencies and lead on agreed areas of joint commissioning in children's mental health, disability and substance misuse.

- 3.6 A safeguarding performance framework is currently being developed that consists of two elements, a core data set for monitoring purposes that will enable improvements and deficits to be tracked in key elements of the safeguarding service delivery (this is attached as Appendix A) and a programme of audit which will encompass the routine national and local audit requirements as well as those which are undertaken to respond to local needs and priorities.
- 3.7 Work has been undertaken with the CCS Safeguarding team to enhance the model of safeguarding supervision undertaken with frontline practitioners
- 3.8 There has been much partnership work undertaken with children and young people to engage them in the planning, delivery and evaluation of services regarding their health and well-being, however work still needs to be undertaken to engage children and young people who are receiving safeguarding interventions from the NHS in order that they can inform the delivery of this element of the service. This may best be achieved by working with our partners in Local Authority children's services.

#### **4 Other key achievements in 2008/09**

- 4.1 The population has been reviewed with regards to vulnerability and additional resources have been targeted in these areas
- 4.2 A substantial amount of audit activity has taken place including compliance with Section 11 of 2004 Children Act, Safer workforce procedures, Supervision arrangements, and compliance with the Victoria Climbié Inquiry recommendations 2003, Health Care Commission Child Safeguarding Review. These audits have highlighted a number of key actions which will strengthen existing safeguarding arrangements.
- 4.3 The key actions include:
- Development of operational guidance for frontline practice
  - Access by A+E to a list of children who are the subject of a Child Protection Plan
  - Ensuring a safer workforce
  - Strengthening the NHSC safeguarding team through recruitment of a Designated Paediatrician for Unexpected Childhood Deaths, a Named Nurse and Named GP for safeguarding, and a safeguarding trainer.
  - A programme of safeguarding audit from providers
  - Evaluation of attendance at Child Protection Conferences and the function of Core Groups to ensure effective multi agency working and the delivery of interventions that protect children from future harm
  - Assessment and referral practices for safeguarding children within adult services
  - Delivery of additional safeguarding training for independent contractors and monitoring of compliance with Criminal Records Bureau checks.

The implementation of these key actions is ongoing and will form a substantial part of NHS Cambridgeshire's safeguarding team activity for 2009/10. This work will be captured in the quarterly performance report to the Board

- 4.4 Enhanced levels of engagement with LSCB from staff at all levels within NHS Cambridgeshire and contribution to the development of the future direction and vision of the LSCB
- 4.5 A training strategy has been commissioned for the health economy which provides a commissioning perspective of the skills and knowledge we should expect from staff working with children in order that they are able to safeguard and promote their welfare in a confident and competent manner. This strategy will be implemented in 2009/10

4.6 A safeguarding children policy has been written for NHS Cambridgeshire and endorsed by Health Care Governance Committee which sets out roles and responsibilities for all staff from a commissioning perspective.

Investment in the NHS Cambridgeshire safeguarding team which includes designated posts for the child death review process, a Named GP for safeguarding children, a training post to provide safeguarding training to independent contractors.

4.7 Family Nurse Partnership

NHS Cambridgeshire have made a substantial investment in piloting this programme in partnership with the Department of Health. The programme involves intensive levels of intervention by midwives and health visitors with identified vulnerable young parents and is predicted to deliver a number of positive outcomes including reduction in the incidence of abuse and neglect.

4.8 Healthy Child Programme and investment in the Health Visiting Service

NHS Cambridgeshire have identified new resources, (£200k) in the strategic plan to strengthen health visiting services, enabling the more consistent delivery of the Healthy Care Programme for 0-4's. Further recruitment is required to deliver this commitment but there is now a closer match between needs and resources. There remains more work to be done to achieve against the school age programme, but there has been some uplift, £85K for school health staff included in the strategic plan. This is on top of last years' targeted resources made available for the HPV and Height and Weight monitoring programmes

4.9 Creation of a safeguarding web page on Cambridgeshire PCT internet website to provide information and signpost staff to sources of advice and support

## **5 The Protection of Children in England : A Progress Report (2009)**

5.1 This report by Lord Laming was produced following the legal verdict on the death of Baby Peter in Haringey in November 2008. The remit of the report was to establish the progress being made across the country to implement effective arrangements for safeguarding children.

5.2 The report was published in March 2009. It described the current legislation around safeguarding as sound and the 2006 Government guidance 'Working Together to Safeguard Children' to be adequate for such work. The report criticised the way in which safeguarding is addressed and practiced across the country and announced a 'step change in the arrangements to protect children from harm'

5.3 The report made 58 recommendations which are designed to strengthen the implementation of child protection arrangements by:

- Strengthening national leadership to ensure best practice is being universally applied in every area of the country
- Improving local accountability so that all services know exactly what they need to do to keep children safe
- Provide support for local leaders and the frontline workforce.

The Government immediately accepted all 58 recommendations and went on to publish a formal response 'The Protection of Children in England: action plan. The Governments response to Lord Laming' on 6<sup>th</sup> May 2009. The response puts forward a range of new initiatives complete with a timetable for the realisation of Lord Lamings 'step change' in safeguarding through the implementation of the 58 recommendations.

5.4 The Government's response gives guidance on the direction of travel in relation to safeguarding arrangements. A number of the actions in the plan state the intention to report further by a certain date. This is currently being produced and will provide the guidance and detail around the implementation of the action plan and will be available by the Autumn of 2009.

## **6 Outstanding issues and the way forward for 2009/10**

- 6.1 For 2009/10 for the delivery of services that safeguard children will be dominated by new national statutory guidance in accordance with the Governments response to Lord Laming
- 6.2 NHS Cambridgeshire is committed to proceeding with work that is in line with the action plan and falls into the following areas:
- Implementation of the key actions from audit activity in 2008/9 as described above with regular reporting of progress to the Board.
  - Implementation of the training strategy across the health economy with particular focus on the training needs of independent contractors, frontline practitioners and senior managers with specific responsibility for safeguarding children.
  - Development of model of reciprocal arrangements that will ensure independence of Serious Case Review report authors
  - Further development of the performance framework to enable robust scrutiny of safeguarding arrangements across the health economy
  - Strengthening of the current audit programme to have more focus on safeguarding
  - Closer working with General Practice to ensure clarity about their roles and responsibilities in relation to safeguarding children and compliance with their statutory duty to safeguard and promote the welfare of children

## 7 RECOMMENDATION

The Board is asked to:-

Note the progress made against actions from 2008 Annual Report and the volume of safeguarding work undertaken during 2008/09

Consider the performance management framework proposal as the basis of a quarterly performance management report to the Board

Agree the proposed safeguarding activity for 2009/10

## 8 CONCLUSION

This year will see a step change in the way the NHS and other partner agencies deliver safeguarding services to children and families.

NHS Cambridgeshire is committed to safeguarding and promoting the welfare of children

Investment in universal services and in the NHS Cambridgeshire safeguarding team will allow for both early interventions for children which will reduce the likelihood of them suffering abuse and appropriate and timely responses to children who are suffering harm.

This two pronged approach along with the focus on robust performance management of service providers and the development of a safeguarding training strategy leaves NHS Cambridgeshire well placed to meet the challenges ahead and ensures children's well being is at the forefront of future service delivery.

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