

Children and Education Select Committee 28 November 2013

Surrey Clinical Commissioning Groups Safeguarding Children

Purpose of the report: Scrutiny of Services

This report is presented to clarify the arrangements and processes in place within the six Surrey Clinical Commissioning Groups (CCGs) to safeguard children.

Introduction:

1. Within Surrey the process of developing 6 CCGs has been achieved. As the CCGs progressed to authorisation they were required to pick up the quality and safety portfolio which includes Safeguarding Children and Vulnerable Adults.

Key roles have been established with each CCG having a lead director for safeguarding. Guildford & Waverley CCG are the host CGG for children's health and children's safeguarding, leading on safeguarding on behalf of the 6 CCGs. The countywide safeguarding professionals are either employed by Guildford and Waverley CCG or hosted within providers with a remit across the 6 CCGS in Surrey. In October 2013 Ms Vicky Stobbart was appointed on a substantive basis as Executive Nurse / Director Quality and Safeguarding and it is to this post holder that the countywide safeguarding children team are accountable. Also in October 2013, Dr Clare Stevens was appointed as the clinical lead for children for Guildford and Waverley CCG.

Surrey CCGs currently commission services from 5 Surrey Hospital Trusts, 3 Community Trusts and 1 Mental Health Trust. In addition health services are commissioned by NHS England, Public Health and through joint commissioning arrangements

Surrey Wide Safeguarding Children Team

- 2. The Surrey Wide Safeguarding Children team are directly accountable to the Executive Nurse / Director Quality and Safeguarding and have the role of ensuring that CCGs discharges their statutory duties to Safeguard Children as required by section 11 of the children Act 2004.
 - The service adheres to requirements of Section 11 of the Children Act 2004.
 - Staff within providers delivering the safeguarding children service have access to the expertise provided by the Surrey Wide Safeguarding Children Team. All staff involved in delivery of the service comply with Surrey Safeguarding Children Board and CCG Procedures.
 - The Surrey Wide Safeguarding Children Team ensure that the health contribution to safeguarding children and promoting the welfare of children is discharged effectively across the whole of the Surrey health economy through CCG's Commissioning arrangements (meeting the requirements of Care Quality Commission's summary of regulation's outcomes and judgment framework outcome 7). Outcome 7 relates to the evidence required by Care Quality Commission to demonstrate the compliance required to ensure the people who use services are safeguarded from abuse.
 - Provide a credible, accessible and approachable service, which empowers staff in safeguarding children.
 - Provide a holistic safeguarding service that incorporates child protection.
 - Provide services to ensure staff are confident and competent and able to recognise risk of abuse and act efficiently to minimise the risk of children experiencing harm and promote their well-being.

2.1 The County Wide Safeguarding Children Team consists of:

Designated Nurse Safeguarding Children Deputy to the Designated Nurse Safeguarding Children Deputy to the Designated Nurse Safeguarding Children (leading within Guildford and Waverley CCG)

Designated Dr Safeguarding Children
Named Doctor Safeguarding Child
PA to Designated Nurse Safeguarding Children

Designated Doctor for Looked After Children

Designated Nurse for Looked After Children Coordinator for Looked After Children

Designated Doctor for Child Death Reviews Specialist Nurse for Child Death Review

'Working Together' (DfE 2013) requires commissioning organisations to secure the expertise of a designated professional lead (or, for health provider organisations, named professionals) for safeguarding. Their role is to support other professionals in their agencies to recognise the needs of children, including rescue from possible abuse or neglect. Designated professional roles should always be explicitly defined in job descriptions. Professionals should be given sufficient time, funding, supervision and support to fulfil their child welfare and safeguarding responsibilities effectively.

Within provider organisations the named professionals ensure the supervision of health professionals including health visitors and school nurses.

Although the designated professional's team are hosted by Guildford and Waverley CCG they provide services across the 6 CCGs working closely with named professionals employed within the providers commissioned by the CCGs. The diagram below indicates which CCG leads on the commissioning of services from each provider:

2.2 Services Provided by the Surrey Wide Safeguarding Children Team

The service is Surrey wide and is provided by a Consultant / Designated Nurse, Designated Doctor, Named GP and a Personal Assistant for Safeguarding Children, Designated professionals for Looked After Children and Child Death Review and they will jointly:

- Provide advice to each CCG regarding how their responsibilities as defined in the Children's Act 2004, Working Together (DFES 2010) and other national and local guidance can be met
- Provide advice to each CCG regarding clear service standards for safeguarding and promoting the welfare of children within service specifications.
- Provide advice to each CCG relating to child protection investigations or allegations directly relating to a member of staff or volunteer
- Provide safeguarding children induction training to CCG staff members

- Provide supervision to Named Nurses, Midwives and Doctors for Safeguarding across Health Trusts in Surrey or where the Trust covers more than one CCG area agree with the other CCGs who should provide the supervision
- Provide advice, support and direction to Named Nurses, Doctors and Midwives for Safeguarding Children and other Safeguarding Leads
- Provide support and direction to the Named Doctors, Named Nurses, and Named Midwives for Safeguarding Children across Surrey in relation to Serious Case Reviews
- Will as part of a Serious Case Review, review and evaluate the practice and learning from all Health trusts involved in the review and provide an overview report where required
- Coordinate individual management reviews as part of a Serious Case Review across CCGs within Surrey and act as a member of the Serious Case Review Panel
- Coordinate information requested by other trusts in relation to out of area Serious Case Reviews
- Will monitor all health actions plans which are part of a Serious Case Review or Case Review, within Surrey and for those commissioned out of the area
- Provide support and expertise in the event of a professional disagreement relating to Safeguarding Children
- Provide health Safeguarding Children's advice to the SSCB (Surrey Safeguarding Children Board) and attend the Board and Standing / Tasks Groups as a representative of the CCGs
- Provide advice to Health Trusts across Surrey on Safeguarding Policies and Procedures, Training and Audits
- Provide a report to the CCG Boards four times a year with monthly exception reporting and attend to present the report, if requested
- Performance monitor services commissioned across Surrey in relation to safeguarding children and report back to the CCG in the quarterly report
- On request, attend Health Trust's Safeguarding Committees across the Health economy
- On request, participate in Named Professionals Safeguarding recruitment processes, across the health economy

- Communicate information from the Surrey Safeguarding Children Board and the Standing and Task Group to CCGs across Surrey via their Safeguarding Children Lead
- Attend the CCGs Safeguarding Governance Committees on request
- Provide level 2 and 3 safeguarding children training to GP leads and monitor training uptake within practices
- Provide advice and support to GP practices in relation to safeguarding children and child protection issues
- Provide updates to the CCG safeguarding Children procedures
- Monitor Serious Incidents in connection to safeguarding children
- Coordinate the completion of Section11 across Surrey for CCGs and Provider organisations and advise on the monitoring of action plans
- Provide quality assurance of health assessments for looked after children
- To ensure the child death review process is followed according to the requirements of 'Working Together to Safeguard Children (DfE 2013)

2.3 Surrey Safeguarding Children Team CCG and Providers



Acute	Community
East Surrey Hospital Trust	First Community Health and Care
Royal Surrey County Hospital Trust	Central Surrey Health
Frimley Park Hospital Trust	Virgin Care Limited
Epsom and St Helier Hospital Trust	
Ashford and St Peters Hospital Trust	

Surrey Wide CCG Safeguarding Children Team Action Plan

The Surrey Wide Safeguarding Children Team has produced an action plan to enable the team to focus on key areas that need to be addressed (appendix 1). Monitoring of this plan will be done through the Designated Professionals meeting and the CCG Quality Leads meeting.

Partnership Arrangements

3. There is strong effective partnership working between the Surrey Safeguarding Children Board (SSCB) and the Surrey Wide CCGs Safeguarding Children Team, which recognises the importance of creating meaningful partnerships nationally, regionally and locally to secure the best quality health services and improve the health and wellbeing of its population. Membership of Surrey Safeguarding Children Board meetings is outlined in appendix 3.

3.1 SSCB Health Sub Group

The Health sub group is a standing group of the SSCB which acts as a key forum for communication across the Surrey health economy and continues to keep the high profile that it deserves and is functioning effectively. The membership has been reviewed to ensure consistent representation from the Board level leads of the all health provider organisations commissioned by CCGs and via senior representation of CCGs.

3.2 Working together with Independent providers

Alpha:

Alpha is a specialist mental health in-patient service providing services for both adults and children, commissioned by NHS England, with one facility located within Surrey. Following significant patient safety and care standard concerns and in addition questions about the appropriate use of the Mental Health Act and safeguarding issues being identified, it was agreed by NHS England that the Surrey Wide CCG Designated Nurse for Safeguarding

Performance monitoring of Surrey health providers:

4 The Safeguarding Children Team provides assurance to the six CCGs through the regular reporting process and the triangulation of evidence through supervision of named professionals. CCG reports address the following key areas:

4.1 Section 11

Section 11 of the Children's Act 2004 places a duty on key persons and bodies to make arrangements to ensure that: in discharging their functions they have regard to the need to safeguard and promote the welfare of children, and that the services they contract out to others are also provided having regard to that need. Monitoring this duty is a core function of the Surrey Safeguarding Children Board (SSCB).

In 2012 The SSCB made the decision that the Section 11 audit will take place every 2 years. In the alternate years the

SSCB will review the individual action plans submitted by all SSCB partners and undertake spot checks of the evidence provided. The action plans have also been shared with CCGs to enable monitoring through the contract process.

4.2 Dashboard CCG Reporting

The performance management tool developed by the Designated Nurse for use across commissioned services has been distributed across the health economy to obtain key performance data from all health providers.

Information requested covers:

- Leadership and workforce
- Training
- Supervision
- Partnership working
- Vulnerable groups
- Serious Incident, Serious Case Review, Case Review, Individual Management Reviews

The Safeguarding Children Team produces a quarterly report to CCG Boards with the first full board report to each CCG having been completed on 2nd September 2013 with exceptions reports provided on a monthly basis

The reporting dates are:

2nd December 2013

3rd March 2014

2nd June 2014

1st September 2014

1st December 2014

The dashboard is circulated to the named nurses within each provider organisations for completion, the providers asked to contribute are:

- Surrey and Borders Partnership Trust
- East Surrey Hospital
- Frimley Park Hospital
- Ashford and St Peters Hospital Trust
- Epsom and St Helier Hospital Trust
- Royal Surrey County Hospital Trust
- Central Surrey Health
- Virgincare
- First Community Health and Care

Work is in progress to finalise key performance indicators which have been drawn from the dashboard and will be included in contracts.

Challenges and Solutions:

5 There have been a number of challenges faced by the Surrey Wide CCG Safeguarding Children Team

5.1 Safeguarding Children professionals Capacity Review

Following discussion at the SSCB in November 2012 it was agreed that there needed to be a full capacity and capability review of the CCG lead role for safeguarding, the capacity of the designated professionals for both safeguarding and Looked After Children and of the named professionals in the provider trusts and hospital trusts. It was agreed that this review could be resourced through the then Strategic Health Authority.

Stage 1 of the review was completed and presented to the Director of Governance and Quality for Guildford and Waverley CCG and the Strategic Lead for Children and Young People NHS South of England. Stage 2 of the capacity review has also now been completed. The two reports were presented to the SSCB in March 2013. The SSCB requested that further work be undertaken on both reports to include benchmarking and clear recommendations for CCGs. This phase was completed in July 2013 and was presented to the Director of Governance and Quality Guildford and Waverley CCG and was presented to the SSCB full Board on 17th July 2013.

From October 2013 in order to address some of the capacity issues a decision was made that two deputies to the designated nurse safeguarding children will be recruited and will provide support across the county, interviews are taking place on 7th November 2013. In addition the PA to the Designated nurse hours have been increased to full time.

In addition, a Project Manager has been appointed for a 6 month term contract. It is planned that this role will create additional capacity within the system, to review the overall function and responsibilities of the Surrey Wide CCG Safeguarding Children Team. The outcome being, a clearer understanding of outputs, responsibilities, function, interface issues and strategic remit of the team. Partnership working will be a central focus, as will the production of reports for the SSCB, Corporate Parenting Board.

5.2 Themes from Serious Case Reviews

Learning from serious case reviews and case reviews is a standing item on the SSCB Health Safeguarding Children agenda, discussion has taken place regarding the recurring themes. Following this designated professionals met with the Executive Nurse of Guildford and Waverley CCG to discuss key themes and

learning that have come out of serious case reviews and case reviews over the last few years and have produced an overarching action plan to promote practice change (Appendix 2).

5.3 GP Engagement

Work has been undertaken by the Surrey Wide CCG Named GP and Designated Nurse for Safeguarding Children to identify a Safeguarding Lead within every GP practice within Surrey the current figures are:

CCG	No. practices with identified lead for safeguarding children	% practices with identified lead for safeguarding children
North East Hants & Farnham CCG	5/5	100%
Guildford & Waverley CCG	20/21	95%
East Surrey CCG	19/19	100%
Surrey Heath	10/10	100%
Surrey Downs	34/34	100%
North West Surrey	43/43	100%

The named GP and designated nurse deliver a safeguarding children training programme for GP leads addressing level 2 and 3. There are 4 half day courses scheduled between now and March 2014.

Following training GP engagement has been consistently good, the Designated Nurse and Named GP have received a number of calls for advice concerning possible child protection or safeguarding issues

Conclusions:

During times of major change and with resource pressures there is clear evidence that risks are increased and there is a need to constantly monitor the arrangements put in place to safeguard children. Recent developments in terms of increasing capacity and the implementation of robust monitoring, reporting and planning processes reduces such risks for the future. Throughout the time of change participation in key multiagency processes have been maintained

Recommendations:

That the Select Committee note the report and make recommendations as

Next steps:

That Guildford and Waverley CCG as the lead for safeguarding children continue to monitor and develop the safeguarding children arrangements across the Surrey health economy.

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Appendix 1

Surrey-wide Clinical Commissioning Groups Safeguarding Children Priorities and Work plan 2013 to 2014

CCGs are statutorily responsible for ensuring that the organisations from which they commission services provide a safe system that safeguards children at risk of abuse or neglect. This includes specific responsibilities for looked after children and for supporting the child overview process.

In addition the CCG as an organisation has a statutory duty to ensure it complies with Section 11of the Children Act 2004.

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age 112	Desired Outcome	Key Actions What is to be done to achieve the desired outcome	Timescale When will action be completed	Accountable Person Who is responsible for ensuring action is completed	Targets How will progress be measured	Monitoring How will we know that the action has had the desired impact when will progress be reviewed and where	Progress Red/Amber/Green rating and Comment
Sat	feguarding Chil	dren Team:					
:	L. CCG can demonstr	rate compliance with	statutory guidan	ce "Working Togeth	er to safeguard c	hildren" 2013	
1.1	Senior management commitment to the importance of safeguarding and promoting children's welfare.	Arrangements to be made for Designated professionals to attend meetings quarterly times a year with CCG safeguarding leads to ensure safeguarding priorities are identified and actioned.	September 2013	Executive Nurse, Director of Quality and Safeguarding	Attendance at regular meetings	Minutes of meeting to demonstrate attendance and contribution	Designated nurse attended 1 st meeting with quality leads on September 2013
1.2	A clear statement of the agency's responsibility towards children is available	Each CCG to have in place their own safeguarding children policy which	October 2013	Executive Safeguarding Children Lead: North West CCG East CCG	Updated Policy on public facing website	Updated Policy on public facing website	Safeguarding Policy has been updated and circulated to the CCG

Desired Outcome	Key Actions What is to be done to achieve the desired outcome	Timescale When will action be completed	Accountable Person Who is responsible for ensuring action is completed	Targets How will progress be measured	Monitoring How will we know that the action has had the desired impact when will progress be reviewed and where	Progress Red/Amber/Green rating and Comment
to all staff	complies with Working Together 2013. Designated Nurse has offered support to complete this action.		Surrey Downs CCG Surrey Heath CCG G&W CCG Farnham & Hants CCG			Safeguarding Children Leads to use as a template October 2013
1.3 A clear line of accountability within the organisation for work in safeguarding and promoting the welfare of children.	A document is developed by the lead CCG (G and W) to clearly identify accountability across the health economy and the responsibilities of all members of the county wide safeguarding children team.	December 2013	Executive Nurse, Director of Quality and Safeguarding	Memorandum of understanding produced		An initial document around communication between the CCG's has been produced and further work has been undertaken on a memorandum
1.4© Service development takes account of the need to safeguard and promote welfare and is informed, where appropriate by the views of children and families	The Designated professionals to provide advise throughout the contract process regarding the inclusion of safeguarding standards within contracts and evidence required during the monitoring process	December 2013	Designated Professionals	Completion of standards for inclusion in contracts	All CCG's have agreed standards included in contracts	Work is in progress in developing standards for inclusion in contracts and discussion has taken place with the designated nurse and NW surrey CCG regarding testing this process with the Virgincare contract
1.5 Staff training on safeguarding and promoting the welfare of children for all staff working with or, depending on the agency's primary functions, in contact with children and families	Designated professionals to offer levels 1 and 2 safeguarding training to CCG employed staff and to support CCG's in evidencing uptake.	December 2013	Designated Professionals	Monitor uptake of CCG safeguarding training	Feedback through CCG leads meeting	Designated Nurse delivered training to NW Surrey CCG in 2012 and East Surrey CCG on 24/10/13 Surrey Downs staff attended level 3 training developed by the named GP and

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1.6 Safer recruitment/ allegations management practices in place	CCG Safeguarding policies to include process to follow in the case of allegations. Designated professionals to be a source of advice when there is an allegation against a CCG employee.	October 2013	Executive Safeguarding Lead for: North West CCG East CCG Surrey Downs CCG Surrey Heath CCG G&W CCG Farnham & Hants CCG	Updated Policy which includes allegations to be on public facing website	Updated Policy which includes allegations to be on public facing website	designated nurse 2013 Safeguarding Policy has been updated and includes the process on allegations, it has been circulated to the CCG Safeguarding Children Leads to use as a template October 2013
1.7 Effective inter-agency working to safeguard and promote the welfare of children.	The designated professionals to attend SSCB and relevant standing groups.	Ongoing	Designated Professionals	Designated professionals attendance at meetings	Minutes of meeting to demonstrate attendance and contribution	Representation on SSCB and relevant meetings by Designated professionals
1.8 Information sharing	The Designated professionals to provide quarterly safeguarding reports including a summary of the dashboard to each CCG with monthly exceptions reports. The Designated nurse to join fortnightly conference call re a private mental health provider The designated nurse to provide monthly reports to NHSE LAT regarding safeguarding with information from dashboard, local hospitals, Local Authority Designated Officer	Ongoing	Designated Professionals	Quarterly reports and exceptions reports produced for the CCG Boards on dates agreed Monthly reports completed and forwarded to the LAT		Reporting dates have been agreed 1st full report completed and sent to each CCG on 11th September 2013 Monthly reports completed and sent to the LAT on the 16th of every month

Desired Outcome	Key Actions What is to be done to achieve the desired outcome	Timescale When will action be completed	Accountable Person Who is responsible for ensuring action is completed	Targets How will progress be measured	Monitoring How will we know that the action has had the desired impact when will progress be reviewed and where	Progress Red/Amber/Green rating and Comment
	and police reports.					
2. All CCG contractua	ıl arrangements with	provider organisa	ations are quality as	ssured around saf	eguarding childre	n
2.1 Contracts to include: Requirement for each organisation to complete and comply with section 11 self-assessment Undertake safeguarding audit and contribute to LSCB audits if requested Complete Safeguarding Dashboard Requirement to notify CCG of serious safeguarding incident Requirement to notify CCG of safeguarding risks Requirement to notify CCG of any allegation against staff involving under 18 years old Have in place safe recruitment processes	Designated professionals to triangulate information reported in provider section 11 assessments through supervision. Designated professionals to attend or contribute to the SSCB QA&E work plan and feedback any issues regarding providers to CCG safeguarding leads. Dashboard to be distributed quarterly and findings included in CCG reports.	Ongoing	Designated professionals	Through Supervision of named professionals Minutes of meeting to demonstrate attendance and contribution to QA&E	Supervision papers Feed back through SSCB Health and Safeguarding meeting	Designated nurse delivers regular supervision with Named Nurses and Midwives Designated nurse has met with SSCB quality manager to finalise multi agency audit Dashboard has been distributed and those available were recorded in CCG reports Designated nurse has received 6monthly reports from Local Authority Designated Officer regarding allegations against health professionals

Desired Outcome	Key Actions What is to be done to achieve the desired outcome	Timescale When will action be completed	Accountable Person Who is responsible for ensuring action is completed	Targets How will progress be measured	Monitoring How will we know that the action has had the desired impact when will progress be reviewed and where	Progress Red/Amber/Green rating and Comment
3. CCG has a statutor safeguarding response		rs of Local safegu	arding children's bo	ards, working in p	partnership to fulf	il their
3.1 Director with Safeguarding responsibility to sit on LSCB	Designated professionals to attend LSCB meeting	ongoing	Designated professionals		Minutes of meeting to demonstrate attendance and contribution to QA&E	
3.2 Designated professionals to sit on LSCB and sub groups	Designated professionals to attend LSCB sub groups	ongoing	Designated professionals		Minutes of meeting to demonstrate attendance and contribution to QA&E	
	ocesses in place to le	arn from serious	safeguarding incide	nts		
4.1 Communications strategy in place within CCG	Processes to be reestablished to ensure CCG lead notify designated professionals and seek their advice when an SI is of a safeguarding nature. Designated professionals to advise appropriate CCG lead	October 2013 Ongoing	Executive Nurse, Director of Quality and Safeguarding and Designated professionals Designated professionals	Flow chart of process embedded in policies Update in CCG exceptions reports and	Feedback through CCG Leads meeting Update in CCG exceptions reports and	Flow chart process has been produced and embedded in draft safeguarding children policy which were distributed to leads Oct 2013 Specific CCG
	of any potential case review and report progress in reports to CCG's.			quarterly board reports	quarterly board reports	SCR/CR/IMR information added to reports

	Desired Outcome	Key Actions What is to be done to achieve the desired outcome	Timescale When will action be completed	Accountable Person Who is responsible for ensuring action is completed	Targets How will progress be measured	Monitoring How will we know that the action has had the desired impact when will progress be reviewed and where	Progress Red/Amber/Green rating and Comment
4.2	Ensure all health providers have communication pathways in place to share learning	The SSCB Health group agenda to ensure communication between SSCB, CCG's and providers	Ongoing	Executive Nurse, Director of Quality and Safeguarding		Minutes of meeting to demonstrate attendance and contribution	ToR being reviewed and updated, last updated May 2013
4.3	Work in partnership with LSCB and local authority to evidence outcome based learning.	Designated professionals to attend and contribute to SSCB SCR panels and Learning development and communication group.	Ongoing	Designated Professionals		Minutes of meeting to demonstrate attendance and contribution	Designated Nurse attends SCR Panels and is chair for SSCB Learning, development and Communication Group
5	Ensure there are e	ffective NHS safegua	rding arrangeme	nts across each heal	th community		
5.1 0	All health providers can	Designated professionals to triangulate information reported in provider section 11 assessments through supervision.	Ongoing	Designated Professionals	Through Supervision of named professionals	Through Supervision of named professionals	Designated nurse delivers regular supervision with Named Nurses and Midwives
		Designated professionals to include provider section 11 action plans in CCG reports to allow monitoring through contract process.	Ongoing	Designated Professionals	Section11 actions plans embedded in CCG quarterly reports	Feedback through CCG Leads meeting	Section11 action plans have been produced and embedded in draft safeguarding children reports which were distributed to leads September 2013

Desired Outcome	Key Actions What is to be done to achieve the desired outcome	Timescale When will action be completed	Accountable Person Who is responsible for ensuring action is completed	Targets How will progress be measured	Monitoring How will we know that the action has had the desired impact when will progress be reviewed and where	Progress Red/Amber/Green rating and Comment
5.2 CQC section 7 compliant	Designated professionals to triangulate information reported in provider section 11 assessments through supervision.	Ongoing	Designated Professionals	Through Supervision of named professionals	Through Supervision of named professionals	Designated nurse delivers regular supervision with Named Nurses and Midwives
5.3 SI reporting systems in place	Processes to be re- established to ensure CCG lead notify designated professionals and seek their advice when an SI is of a safeguarding nature.	October 2013	Executive Nurse, Director of Quality and Safeguarding and Designated professionals	Flow chart of process embedded in policies	Feedback through CCG Leads meeting	Flow chart process has been produced and embedded in draft safeguarding children policy which were distributed to leads Oct 2013
5.4 $\stackrel{\longrightarrow}{\infty}$ Risk reporting arrangements	Designated professionals to communicate risks identified to CCG leads advise the lead on strategies to reduce/eliminate risk.	Ongoing	Designated professionals		Feedback through CCG Leads meeting	
5.5 Managing allegations against staff & whistleblowing reporting	Designated professionals to maintain liaison with Local Authority Designated Officer and report on allegations within CCG reports. Designated professionals to attend meetings re allegations when requested by Local Authority Designated Officer.	Ongoing	Designated Professionals			6 monthly allegation report received from Local Authority Designated Officer

	Desired Outcome	Key Actions What is to be done to achieve the desired outcome	Timescale When will action be completed	Accountable Person Who is responsible for ensuring action is completed	Targets How will progress be measured	Monitoring How will we know that the action has had the desired impact when will progress be reviewed and where	Progress Red/Amber/Green rating and Comment
(6. Can demonstrate	that the Designated c	linical experts are	e embedded in the	clinical decision n	naking of the orga	nisation
6.1	Designated Nurse/Doctor attend relevant meetings	Arrangements to be made for Designated professionals to attend meetings quarterly with CCG safeguarding leads to ensure safeguarding priorities are identified and actioned.	September 2013	Executive Nurse, Director of Quality and Safeguarding	Attendance at regular meetings	Minutes of meeting to demonstrate attendance and contribution	Arrangements made for designated to attend 1 st meeting with quality leads September 2013 Arrangements have been agreed by attendance of the whole safeguarding children team at future meetings
age -		Arrangements to be made for Designated professionals to attend meetings quarterly with CCG safeguarding leads to ensure safeguarding priorities are identified and actioned.	September 2013	Executive Nurse, Director of Quality and Safeguarding	Attendance at regular meetings	Minutes of meeting to demonstrate attendance and contribution	Arrangements made for designated to attend 1 st meeting with quality leads September 2013 Arrangements have been agreed by attendance of the whole safeguarding children team at future meetings
•	7. CCG is managing a	nd monitoring risk as	sociated with saf	feguarding children	across Surrey.	,	
7.1	Risk Management Strategy in Place	Designated professionals to communicate risks identified to CCG leads advise the lead on strategies to reduce/eliminate risk.	Ongoing	Designated Professionals		Feedback through CCG Leads meeting	

Desired Outcome	Key Actions What is to be done to achieve the desired outcome	Timescale When will action be completed	Accountable Person Who is responsible for ensuring action is completed	Targets How will progress be measured	Monitoring How will we know that the action has had the desired impact when will progress be reviewed and where	Progress Red/Amber/Green rating and Comment
8. Ensure there are	obust arrangements	and agreed repor	ting systems in plac	e for unexpected	deaths in childhoo	od
8.1 Designated Doctor in place with clear job description, dedicated time and service level agreement with main employer.	For designated professionals to provide advice to CCG safeguarding leads to ensure these processes are in place.	Ongoing	Executive Nurse, Director of Quality and Safeguarding			
8.2 Designated Doctor for Child Death and Designated Doctor and or nurse member of Child Death Overview Panel (CDOP)	and SCR's arising from CDOP are alerted to CCG and LSCB and are included in designated professionals	Ongoing	Executive Nurse, Director of Quality and Safeguarding			
8.3 Risks, SI's and SCR's arising from CDOP are alerted to CCG and LSCB	reports to CCG's.	Ongoing	Executive Nurse, Director of Quality and Safeguarding			

Appendix 2

Serious Case Review Themes Action Plan 2012 to 2014

Desired Outcome	Key Actions What is to be done to achieve the desired outcome	Timescale When will action be completed	Accountable Person Who is responsible for ensuring action is completed	Targets How will progress be measured	Monitoring How will we know that the action has had the desired impact when will progress be reviewed and where	Progress Red/Amber/Green rating and Comment
1. Supervision						
Consistent delivery of supervision to all named professionals to ensure that there are robust supervision arrangements to health professionals across provider organisations resulting in better outcomes for children	For designated professionals to ensure a framework is in place to monitor the implementation of safeguarding supervision	April 2014	Designated Professionals	Supervision checklist to be developed	Through feedback from named professionals at supervision and reporting to CCG boards	
2. Risk Assessment –	Recognition of Risks					
Risk assessments are being carried out correctly enabling risk to be recognised and historical / current records are being routinely accessed	To develop a paper on risk assessment giving clear advise on what to look for Develop a tool/dashboard to give assurance that risk assessment takes place	April 2014	Designated Professionals	Tool / dashboard on risk assessment	Through feedback from named professionals at supervision and reporting to CCG boards	

Desired Outcome	Key Actions What is to be done to achieve the desired outcome	Timescale When will action be completed	Accountable Person Who is responsible for ensuring action is completed	Targets How will progress be measured	Monitoring How will we know that the action has had the desired impact when will progress be reviewed and where	Progress Red/Amber/Green rating and Comment
3. Professional Challe	enge					
Staff in all agencies are competent and confident in challenging practice in the child's best interests	To establish processes to ensure a culture that promotes professional challenge.	June 2014	Designated professionals	Designated professionals facilitate discussion through named professional meetings and evidence in relation to organisational culture is measured through the deepdive audit planned for early 2014	Minutes of meeting to demonstrate discussion	
্ৰী. Male partners			•			
The role of fathers or male carers is considered and information gathered and recorded and if necessary shared	Processes are in place where information is gathered and recorded on client records and shared in a timely way if appropriate	June 2014	Designated Professionals	Evidence that records show that practitioners are asking the right questions regarding fathers and male partners	deep dive audit	
5. Poor communicati	on between GP, Mat	ernity and Health	n Visitors			
Information is being shared effectively between the GP, Maternity and Health Visiting to enable staff to build a picture	Robust processes are in place which facilitate information sharing and that information is being shared in a timely way	June 2014	Designated Professionals	Evidence that information policy is available and being followed and information sharing forms are being used	deep dive audit	

Desired Outcome	Key Actions What is to be done to achieve the desired outcome	Timescale When will action be completed	Accountable Person Who is responsible for ensuring action is completed	Targets How will progress be measured	Monitoring How will we know that the action has had the desired impact when will progress be reviewed and where	Progress Red/Amber/Green rating and Comment			
6. Misuse of Alcohol									
Alcohol misuse is assessed and where issues / risks are identified information is shared	Tools are being used by professionals in the assessment of alcohol misuse and information is being shared when necessary	June 2014	Designated Professionals	Evidence of tools being used and record keeping	deep dive audit				
7. Lack of Child Focus	5								
Assessment should be child centred. Child en and their parents should be confidered as individuals and that family structures, culture, religion, ethild origins and other characteristics should be respected.	Assessments are in place that reflect that needs of the child are being recognised	June 2014	Designated professionals	Evidence that practitioners are using a child centred approach when assessing families needs	Through reflection at supervision deep dive audit				
8. Lack of recognitio	n of the significance	 of bruising/injurie	es in non-mobile						
All professionals are aware of and understand the guidance on bruising to babies and none mobile children	SSCB guidance on bruising in children is embedded in practice and training has been attended	June 2014	Designated professionals	Evidence of training attendance	deep dive audit				

Desired Outcome	Key Actions What is to be done to achieve the desired outcome	Timescale When will action be completed	Accountable Person Who is responsible for ensuring action is completed	Targets How will progress be measured	Monitoring How will we know that the action has had the desired impact when will progress be reviewed and where	Progress Red/Amber/Green rating and Comment			
9. Difficulty in Working with Resistant Families									
Staff working with hostile / threatening / and non-compliant parents/carers and those who use disguised compliance are supported and able to identify where these actions may be impacting on childcare/child protection issues	Training and support is provided to equip staff with the necessary tools to undertake work with resistant families	June 2014	Designated professionals	Evidence of training attendance	Feedback through supervision deep dive audit				

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SSCB Membership

Appendix 3

Meeting:	Quality Lead	Designated Nurse	Designated Dr	Named GP	Designated Dr LAC	Designated Nurse LAC	Designated Dr CDOP	Specialist Nurse CDOP
SSCB Health Safeguarding Meeting	✓ (Chair)	✓	✓	✓	✓	✓	\checkmark	
SSCB Learning, Development and Communication Group		✓ (Chair)				✓		
SSCB Quality QA&E Meeting		√	✓					
SSCB Operations Group	✓	✓						
SSCB Strategic Case Review Group	✓	✓						
SSCB SCR Panel Meetings		√						
SSCB Full Board Meeting	✓	✓	✓					
CCG Quality Leads Meeting	✓	✓						
Designated Professionals Safeguarding Children Team Meeting	✓	✓	✓	√	✓	✓	✓	√
Designated Nurses Meeting Local Area Team		✓						
Named Professionals Meeting		✓ (on request)	✓ (on request)	✓				
Supervision meetings of each named nurse/midwife/doctor		✓	✓					
Meetings between Designated Doctor & Designated Nurse		✓	✓					
Conference Dissent Meetings			\checkmark					
Contract Monitoring Meetings (as required)	✓	✓	✓					
Provider Safeguarding Meetings (as required)	✓	✓	✓					
Child Death Overview Panel			✓	✓			✓	✓
SSCB Policy and Procedures Group			✓					