

NHS DORSET CLINICAL COMMISSIONING GROUP

GOVERNING BODY MEETING

ANNUAL UPDATE ON CHILDREN'S SAFEGUARDING

Date of the meeting	18/05/2016
Author	W Thorogood, Designated Nurse Consultant for Safeguarding Children
Sponsoring Board Member	Dr Peter Blick, Locality Chair Bournemouth and Named GP for Safeguarding
Purpose of Report	To provide an update on Child Safeguarding activity over the past year.
Recommendation	The Governing Body is asked to note the report.
Stakeholder Engagement	Children and families have been involved with much of the safeguarding work.
Previous GB / Committee/s, Dates	N/A

Monitoring and Assurance Summary

This report links to the following Strategic Principles	<ul style="list-style-type: none"> • Services designed around people • Preventing ill health and reducing inequalities • Sustainable healthcare services • Care closer to home 		
	Yes [e.g. ✓]	Any action required?	
		Yes Detail in report	No
All three Domains of Quality (Safety, Quality, Patient Experience)	✓		✓
Board Assurance Framework / Risk Register	✓		✓
Budgetary Impact	✓		✓
Legal / Regulatory	✓		✓
People / Staff	✓		✓

9.10

Financial / Value for Money / Sustainability	✓		✓
Information Management & Technology	✓		✓
Equality Impact Assessment	✓		✓
Freedom of Information	✓		

Initials: WT

1. Introduction

- 1.1 This Annual Safeguarding Children Report covers safeguarding activity over the period of 1 April 2015 to 31 March 2016.
- 1.2 The purpose of this annual report is to ensure that the Dorset Clinical Commissioning Group (CCG) Governing Body is informed of the progress and developments, both locally and nationally on issues related to the safeguarding children's agenda.
- 1.3 There is a requirement for the CCG to receive an annual report on the safeguarding arrangements for all the health services we commission. This report should be received by the Governing Body. The annual report supports the Governing Body in meeting their requirement to ensure there is a clear line of accountability from frontline practitioners through the provider to the Chief Officer of the CCG. The quarterly safeguarding reports submitted to the Quality Group also contribute to this line of accountability.
- 1.4 Safeguarding children covers a wide cross section of interaction from all statutory providers and independent contractors who deliver services to children up to the age of 18.
- 1.5 The role of the Designated Nurse Consultant remains an overarching statutory role. It encompasses supporting investigations with an in depth understanding of services delivered and the development of commissioned services to ensure health services offer a robust safe interaction.
- 1.6 Key legislation for children and young people includes the Children Act 1989 and 2004. Sections 11 and 13 of the 2004 Act have been amended through the Health and Social Care Act 2012 to reflect recent NHS reforms. Working Together to Safeguard Children (March 2015) sets out expectations as to how these duties should be fulfilled. Safeguarding Vulnerable People in the Reformed NHS Accountability & Assurance Framework (2013) provides further guidance on accountabilities for safeguarding children in the NHS.

2. Background

- 2.1 The national focus on safeguarding has remained high over the past year.
- 2.2 In July 2015 Justice Lowell Goddard opened her Inquiry looking into the extent to which institutions and organisations in England and Wales have taken seriously their responsibility to protect children. The inquiry will investigate a wide range of institutions including:
 - local authorities;
 - the police;

- the Crown Prosecution Service;
 - the Immigration Service;
 - the BBC;
 - the Armed Forces;
 - schools;
 - hospitals;
 - children's homes;
 - churches, mosques and other religious organisations;
 - charities and voluntary organisations;
 - regulators; and
 - other public and private institutions.
- 2.3 The inquiry will publish interim reports as it proceeds but is not due to conclude until 2025.
- 2.4 In December David Cameron made a series of announcements relating to changes to safeguarding agencies. He announced that poorly performing children's services risked being taken over by high-performing authorities, experts or charities.
- 2.5 As part of these announcements the Government commissioned a Review to consider the effectiveness of Local Safeguarding Children's Boards and Serious Case Reviews. This has been led by Allan Woods CBE and is due to report in April 2016.
- 2.6 There have also been two other related national consultations, one proposing a new definition of Child Sexual Exploitation and another seeking views on protecting children from seeing pornographic material online. Both of these consultations report in May 2016 and are likely to result in an update to the statutory guidance 'Working Together to Safeguard and Promote the Wellbeing of Children' later in 2016.
- 2.7 In February 2016 the BBC Trust published the report by Dame Janet Smith DBE of her inquiry into the BBC's culture and practices during the Jimmy Savile and Stuart Hall years. The Review was established in October 2012 to conduct an impartial, thorough and independent review of the culture and practices of the BBC during the years that Jimmy Savile worked there.
- 2.8 The 'Savile NHS Inquiry' published in March 2015 found Savile sexually assaulted victims in 28 Hospitals.

3. CCG Safeguarding Assurance

3.1 Dorset CCG is compliant with its statutory requirement for safeguarding professionals.

These roles consist of:

- Chief Officer, who has the responsibility for ensuring that the health contribution to safeguarding and promoting the welfare of children is discharged effectively across the whole local health economy through the CCG's commissioning arrangements,
- Director of Quality and Nursing is the Executive Lead for Safeguarding and member of the Local Safeguarding Children's Boards;
- Designated Nurse Consultant for Safeguarding Children;
- Deputy Designated Nurse for Safeguarding Children;
- Designated Doctor for Safeguarding Children;
- Named GPs for Safeguarding Children.

3.2 The CCG Safeguarding Team is compliant with its statutory requirement to be trained to Level 4 and above as stated in the Royal Colleges Competencies Document 2014.

3.3 The CCG Governing Body received their statutory safeguarding children training in October 2015, delivered by the Designated Nurse.

4. CCG Key Developments 2015/16

4.1 The CCG Governing Body is asked to note the following key developments from the past 12 months:

- GP Safeguarding Training

This one day Level 3 Safeguarding training for GPs has been further embedded within the Wessex GP Education Trust rolling programme for training. The Named Safeguarding GPs have also provided training sessions to support a number of other safeguarding events for Doctors;

- Increase to CCG Named GP Team

The development of the Named GPs role has seen an increase in their workload supporting General Practice with their safeguarding duties over the last year. The CCG agreed to an increase to the number of sessions over the last year to six, with investment from NHS England. The increased GP session was successfully recruited to and the new Named GP is due to join the team at the beginning of April 2016;

- Lead GP Peer Support Sessions

In September 2015 the CCG Safeguarding Team held the first evening session of Peer support and Supervision for the Leads in Primary care. This was well attended and evaluated. These sessions will be held quarterly around the county and aim to support GPs in their safeguarding practice;

- Safeguarding Webpage, Toolkit and Templates and for Primary Care

To assist GPs with their safeguarding responsibilities the Named GPs have developed an intranet safeguarding webpage and a series of tools and templates to sit within GPs Electronic Recording Systems. The toolkit has been developed in accordance with guidance from national documents such as the GP Toolkit, Working Together 2015 and the Intercollegiate Safeguarding Competency document 2014;

- Female Genital Mutilation (FGM), Black and Minority Ethnic (BME) events

In October the Designated Nurse supported Bournemouth University students in producing an awareness video for FGM. This has also been uploaded on the safeguarding page of the CCG intranet. In February she was also asked to speak about FGM at a local BME event, where she was well received;

- Serious Case Reviews (SCR) S16, S17, S18, Baby N

There have been four SCRs conducted over the last year, three for the DSCB and one for Bournemouth and Poole LSCB. These reviews have involved practitioners from across health CAMHS, General Practice, Midwifery, Health Visiting, School Nursing, Paediatrics and Emergency Medicine; and have been supported by the CCG Safeguarding Team. The learning from the reviews is set out in section 7;

- Social Care Institute of Excellence SCIE Learning Together Training

In January 2015 NHS England funded training in the SCIE Learning Together systemic SCR model. The model developed by Eileen Munro and Shelia Fish considers the contributory factors which lie behind why practitioners do what they do, and looks at whether the multiagency systems support and assist practitioners to work effectively with children and their families. The CCG Deputy Designated Nurse undertook the further SCIE Lead Review training, co-writing the Final SCR Report for S16 and will become an accredited SCIE Lead Reviewer later in the year;

- LSCB Section 11 Audit Primary Care

In January along with NHS England the CCG issued the first Section 11 audit to Primary Care. The audit looks at the safeguarding standards set out in Section 11 of the Children Act 2004 and will provide practices, and the CCG with a benchmark of safeguarding arrangements across the whole of primary care. This information can then be used to target practices with the appropriate support and development;

- Multi-Agency Information Safeguarding Hub (MASH)

The MASH continues to develop. A new Governance structure was introduced in March 2016 to drive the project forward at all levels. The CCG Deputy Director for Quality and Nursing and the Head of Quality Improvement will represent the CCG on the further development of the MASH;

- CQC Review of health services for Children Looked After and Safeguarding

In November 2015 the CCG received notification from the CQC that it would be conducting a Review of health services for Children Looked After and Safeguarding in the Dorset County Council area. The Review followed the journey of the child through services from maternity and early help to specialist services. This is further reported in section 8;

- National Review of LSCB Functioning and Effectiveness

In February the CCG hosted a consultation event with the Lead for the Governments Review into the effectiveness of LSCBs, Alan Woods CBE. The event was attended by representatives from LSCB partners and was chaired by the CCG Director of Quality and Nursing; and provided an opportunity for agencies to share their views on safeguarding processes including the Child Death Overview Panel (CDOP) and SCRs. Following the event Alan Wood contacted the CCG thanking them for a valuable and informative meeting;

- Domestic Abuse

The Deputy Designated Nurse has worked closely with the Adult Safeguarding Lead and Named GP to continue to develop processes for Domestic Violence. The Named GP has worked with Police in the MASH to develop guidance for Primary Care on the Domestic Abuse notification form (SCARF).

5. Safeguarding Activity

Children Subject to a Child Protection Plan

- 5.1 Over the last year we have seen a steady increase in number of children subject to a child protection plan across the three local authorities. As of the end of February 2016 the number of child protection plans was 732 (see table 1). This is in line with the national picture, with the most recent figures from the NSPCC stating the number of children subject to a plan in 2014 was 48,300.

Table 1 (Number of children subject to a child protection plan as of 31st March)

Number of Children Subject to a Plan at end date February 31 st	Bournemouth	Poole	Dorset	Total
2016	182	144	406	732
2015	180	127	380	706
2014	269	195	277	656
2013	258	184	250	692

Safeguarding Training

- 5.2 Safeguarding Children training has remained a key area of focus for CCG monitoring at provider contract meetings.
- 5.3 Over the last year we have seen an improvement in the figures for all providers at Levels 2 and 3. Bournemouth Hospital has continued to deliver an in house Level 3 training as a way of addressing their shortfall. These however, conclude in March 2016. Staff will then feed into the Pan Dorset LSCB Level 3 core one day training.

Table 2 (Provider Training figures)

Safeguarding Children training – Level 2	Q1	Q2	Q3
Dorset County Hospital NHS Foundation Trust	No data	82%	87%
Dorset Healthcare University NHS Foundation Trust	96%	96%	No data
Royal Bournemouth & Christchurch Hospitals NHS Foundation Trust	82.1%	82.2%	84.3%
Poole Hospital NHS Foundation Trust	89%	91%	92%
Safeguarding Children Training – Level 3	Q1	Q2	Q3
Dorset County Hospital NHS Foundation Trust	66%	81%	94%
Dorset Healthcare University NHS Foundation Trust	90%	89%	No data
Royal Bournemouth & Christchurch Hospitals	81.9%	62.2%	68.1%

NHS Foundation Trust			
Poole Hospital NHS Foundation Trust	94%	93%	90%

Serious Investigations (SIRI)/STEIS/Managing Allegations

- 5.4 There have only been two cases recorded as SIRIs over this last year which went to be considered as Serious Case Reviews.
- 5.5 Regular meetings continue between the Designated Nurse and Risk Team to improve the processes of reporting and reviewing serious cases.
- 5.6 The CCG has received one request for information relating to the investigation of Historic Sexual Abuse, as part of the national Goddard enquiry. This involved a private children's home operating in the 1980s. The Designated Nurse has been assisting with the collation of this information.
- 5.7 There has been one Primary Care Practice identified as having failed its CQC inspection, which is now being supported by the CCG Safeguarding Team with its safeguarding arrangements.

6. Provider Trusts and Commissioned Services

- 6.1 The CCG have introduced a set of new safeguarding schedules to help standardised reporting for all Provider contracts. These will be monitored through the appropriate assurance route and will be overseen by the CCG Quality and Designate Team.
- 6.2 As of March 2016 there are no exception reporting, exemptions or outstanding Safeguarding risks reported within the Providers.

Barnardo's Child Sexual Exploitation and Missing Children Service

- 6.3 This service was jointly commissioned between the three Local Authorities, police and CCG in April 2015 and awarded to Barnardo's. Between April and October the service experienced significant difficulties setting up, due to the police definition of missing children changing which caused a delayed in the service becoming operational until October.
- 6.4 The service is commissioned to provide evidence based therapeutic interventions and return home interviews for 30 children and young people assessed as being at significant risk of CSE, as identified by the multiagency CSE Risk Assessment tool.
- 6.5 At the first contract monitoring meeting held in January 2016, it was agreed that as the service was not yet running at capacity, (currently 18 young people have been referred and are being seen), those assessed as being at moderate risk of CSE would also be eligible to receive the service.

- 6.6 A launch event for the service was held on 18 March to coincide with National CSE awareness day. This was attended by 150 practitioners and was well received. Barnardo's will also be holding another launch event in Dorchester in May 2016 to cover practitioners in the west of the county.
- 6.7 Contract monitoring will be attended by members for the CCG Quality Directorate.

Multiagency Safeguarding Hub (MASH)

- 6.8 The CCG commissioned the health component of the MASH in 2015. The service is provided by Dorset Health Care's Safeguarding Children Team. Their role is to provide health information for consideration as part of the multiagency Strategy discussion in cases of child protection and domestic abuse.
- 6.9 Health activity is being monitored by the Designated Nurse. Figures show that in Quarter One the safeguarding children team participated in 305 strategy discussions, a 22% increase from Quarter four of 2014/15. Figures for 2015/16 are not available at this time and will be included in the half-yearly Safeguarding update report.

Sexual Assault Referral Centre (SARC)

- 6.10 The Dorset SARC is provided by G4S, who won the contract in July 2015. It was renamed 'The Shores' and is situated in Bournemouth.
- 6.11 The health component of the SARC is commissioned by NHS England (Central) and overseen by the Police and Health Partnership Board. This Board also has responsibility for commissioning and overseeing the Health Custody Service.
- 6.12 G4S introduced Forensic Nurse Examiners when they took over the contract, which replace the previous Medical Examiners. Feedback from service users about the introduction of Nurses has been overwhelmingly positive.
- 6.13 The CCG Deputy Designated Nurse and designated Doctor have been involved with the commissioning and oversight of the Paediatric Examination services and have attended the Police and Health Partnership Boards.
- 6.14 A Health Needs Analysis (HNA) for the children's component of the SARC was commissioned in October 2015, to help inform NHS England's (Central) the paediatric provision. As a result of this Poole Hospital will now be commissioned to provide the service to all under 16s, and 16 to 18 year olds who request an examination by a paediatrician.
- 6.15 The HNA shows that Dorset Police report a significant increase in sexual violence across Dorset and in particular affecting children and young people under 17. This will be a key focus for the Community Safety Partnerships for 2016/17.

- 6.16 During the last year Dorset Rape Crisis report that 43 children and young people aged under 18 were seen by the SARC. Almost all seen were female (97.7%). The largest majority were aged 13-17 the remaining, 11.6% were aged under 13.
- 6.17 Table 3 below shows the age profile of victims seen by the SARC. When looking at the data for each individual age, 27.9% were aged 17 and 25.6% were aged 15.

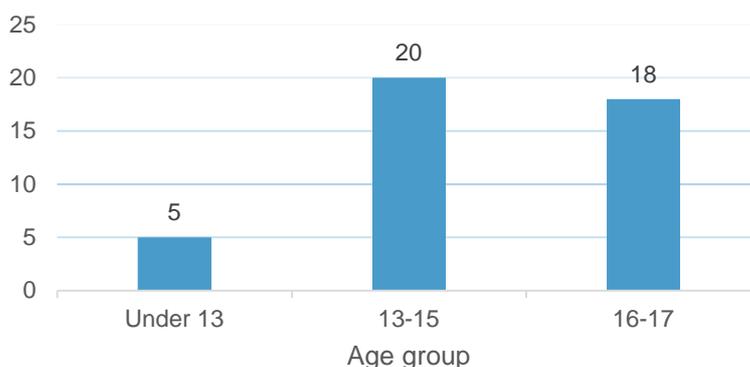


Table 3

- 6.18 Over the coming year NHS England nationally, will be looking at commissioning a young people's counselling services for SARCs across the country. NHS England (Central).will be leading on this but it will be important to ensure that there are referral pathways between CCG commissioned emotional and mental health services for young people.

7. LSCB Activity

- 7.1 Local Safeguarding Children Boards (LSCB) became statutory bodies under the Children Act 2004. Their role under Section 11 of the Act is to agree and oversee the effectiveness of agencies working to safeguard and promote the welfare of children. Dorset is served by two LSCBs, one covering Bournemouth and Poole and one covering Dorset.
- 7.2 The CCGs membership of the LSCBs is set out in table 4 below.

Table 4

Bournemouth and Poole		Dorset	
Executive	Director of Quality Designated Nurse	Executive	Director of Quality Designated Nurse Designated Doctor
Chairs	Designated Nurse	Chairs	Designated Nurse
Quality Assurance	Deputy Designated Nurse	Quality Assurance	Designated Nurse
Managing Allegations	Deputy Director of Quality	Multiagency Audit	Deputy Designated Nurse

Bournemouth and Poole		Dorset	
Neglect Task and Finish	Designated Nurse Deputy Designated Nurse		
Pan Dorset			
Policies and Procedures		Designated Nurse Deputy Designated Nurse	
SCR		Designated Nurse Deputy Designated Nurse	
Training and Development		Deputy Designated Nurse	
Child Sexual Exploitation		Deputy Designated Nurse	

- 7.3 In November the Independent Chair of both Safeguarding Children Boards stepped down and was replaced by Interim Chair Rob Hutchinson CBE.
- 7.4 In January the Interim Chair led both Boards in a Joint Planning day to set priorities for the coming year. Both Boards have made a commitment to bring together the work streams that can be shared Pan-Dorset, although at this time there is no move to join the main Executive Boards. A governance review of the Boards is underway which will review membership and Pan-Dorset working opportunities.
- 7.5 The 2016/17 priorities for the Bournemouth and Poole LSCA are Child Sexual Exploitation, Neglect and Child Sexual Abuse. The 2016/17 “Obsessions” for the DSCB are Child Sexual Exploitation, Children subject to a Safeguarding Plan and Children in Care.
- 7.6 The CCG and all Health Trusts are represented on the Executive Boards, and the sub groups are supported by the Named and Designated health professionals.
- 7.7 The DSCB underwent an inspected in March 2016 as part of the OFSTED Inspection of Dorset Children’s Services. The outcome of the inspection will not be known until later in April. Bournemouth and Poole LSCB received an evaluation of 'Requires Improvement' following the OFSTED inspection of Bournemouth Borough Council Children’s Services in April 2014.

LSCB Sub Groups

Policy and Procedures

- 7.8 The Pan Dorset Multiagency Safeguarding Procedures became electronic and went online in August 2014.
- 7.9 The Pan Dorset Policy and Procedure group have continued to work with TriX, the website provider to develop and update the procedures; ensuring practitioners have access to the appropriate guidance and tools to safeguard children. The group have two opportunities a year to upload new or updated policies as part of the TriX hosting agreement.

Training

- 7.10 In 2015 the two Boards agreed to create a LSCB Training Officers post to coordinate, develop and oversee safeguarding training across Dorset. The post was recruited to in October 2015 and has since been working with designated agency leads to develop a 'one stop shop' for all safeguarding children related training.
- 7.11 The Designated Nurse Consultant continues to deliver multiagency sessions of training on Fabricated and Induced Illness (FFI) twice yearly. These are well received and help to support practitioners in understanding this complex area of practice.
- 7.12 The Deputy Designated Nurses is currently working with the LSCB Training Officer to review the Level 3 core safeguarding training course. As part of this review the sustainability of the paediatric input is being considered. It is hoped that where it is not possible to support training with the presence of a paediatrician, an agreed and approved recorded presentation can be provided.

Child Sexual Exploitation (CSE)/Missing and Trafficked

- 7.13 The Pan Dorset CSE, Missing and Trafficked sub group leads the multi-agency development and oversight of work with CSE, Missing and Trafficking.
- 7.14 The agenda for trafficked children was included into the group in September 2015 and acknowledges the link between the exploitation and trafficking of children.
- 7.15 The group produced its first Annual report in 2015 to help inform the planning and approach to CSE on the multiagency basis.
- 7.16 The profile of CSE continues to be developed across Dorset. No criminal gangs have been found to be operating in Dorset but a number of lone perpetrators have been identified, disrupted and prosecuted.
- 7.17 The Police established Operation Zeal, a six-weekly multi-agency intelligence gathering meeting in 2015. The meeting considers the risks of young people identified as at significant risk of CSE. The attendance for this meeting has grown considerably over 2015/16 and a small subcommittee has been tasked to review its purpose and function. The CCG Deputy Designated nurse will be involved with this.
- 7.18 The number of young people assessed as being at significant risk of CSE remains relatively low at 18 at the end of February 2016.
- 7.19 The LSCBs completed a repeat multiagency CSE case audit in June 2015. Findings identified that the multiagency CSE Risk Screen was not being used by Early Help services and therefore vulnerability to CSE not assessed.

- 7.20 In March 2016 Salford University approached the LSCB to join in a piece of national work looking at developing a national Child Sexual Abuse/CSE Risk Assessment tool. A workshop took place at the end of March with the University Project Lead which the Deputy Designated Nurse and Designated Nurse for Looked After Children attended. This project is due to run over the next year and the LSCB sub-group has agreed to continue to participate.
- 7.21 In January, as part of the new Joint Inspection Framework (see section 8.9), it was announced that CSE will form the theme for the 'Deep Dive' component of the inspection. This will run over the summer and conclude in September.

Serious Case Reviews (SCR) and Domestic Homicide Review (DHR)

- 7.22 There have been four SCR Pan Dorset concluded during 2015/16. These were all presented to and signed off by the respective Executive Boards.
- 7.23 Baby N was commissioned by Bournemouth and Poole LSCB and involved a four-month old baby whose death was recorded as a Sudden Unexplained Infant Death (SUDI). This review had aspects of overheating, in a house where hoarding was an issue. The learning actions from this review included a review of the antenatal pathway, review of the tools used within the child protection procedures and inclusion of the Fire and Rescue Service Hoarding training within safeguarding training.
- 7.24 The three Dorset SCRs S16, S17 and S18 all involved adolescents, two suicides and one complex case where the young person remains alive. The themes from these cases included the difficulties for practitioners when working with young people with complex mental health problems, knowing what is normal adolescent anxieties and when a more specialist response is required, recognising the impact of chronic sibling violence, practitioners understanding what Early Help services are on offer and agencies understanding the multiagency escalation procedure and using it in a timely way when problems are complex.
- 7.25 The reports have been shared with NHS England and the CQC and have been fed in to a national project looking in to adolescent suicides which is due for completion in September 2016. Dorset also experienced a fourth adolescent suicide in February 2016. The circumstance of this death again show different features to the case recently reviewed.
- 7.26 A Domestic Homicide Review (DHR) was commissioned in June 2015 concerning the death of a young mother murdered by her partner. This Review has been overseen by the Adult Safeguarding Board. A number of issues have been raised regarding how agencies have worked together regarding the children and the DSCB SCR Group have been asked to consider how these are best addressed.

7.27 Dorset has seen a rise in the number of requests for cases to be considered for SCR or audit. The reason for such an increase is difficult to unpick but may be related to staff not feeling confident in managing the level of complexity families are presenting with, as well as work pressures in the current climate of austerity.

Child Protection – Information Sharing (CP-IS) project

7.28 CP-IS is a national project being rolled out by NHS England and is being led locally by the Safeguarding Children Boards. It focuses on improving the protection of children who have previously been identified as vulnerable by social services when they visit the following NHS unscheduled care settings:

- emergency departments;
- walk-in centres;
- out of hours GPs;
- minor injuries units;
- paediatric wards;
- maternity units;
- ambulance services.

7.29 CP-IS will provide health professionals with prompt and easy access to key social care information that can help them to assess whether a child is at risk.

7.30 CP-IS is due to be in place by 2017 and locally the CCG have worked with the provider trusts to ensure IT systems are ready. Currently the local authorities' systems will not be ready until April 2017 at the earliest.

8. Inspections

8.1 In November 2015 the CCG received its CQC Review of health services for Children Looked After and Safeguarding in the Dorset County Council area.

8.2 The one week review commenced on Monday, 16 November and concluded with a feedback session on Friday, 20 November.

8.3 Inspectors tracked and audited nine cases and reviewed approximately 130 others. The inspectors followed the child's journey across services for Maternity, Health Visiting, CAMHS, ED, Sexual Health, MIU, Adult Mental health and Substance Misuse and four practices in Primary Care.

- 8.4 The review process was rigorous and findings presented a mixed picture of the provider's response to safeguarding and Looked After Children. Areas of positive practice were identified in General Practice, where Inspectors reported seeing some exemplary practice. There were areas of good practice and areas for improvement noted for the CCG, Dorset HealthCare and Dorset County Hospital. Inspector's identified Health services for Looked After Children as a concern.
- 8.5 The Final Report was received in January and an action plan developed and overseen by the Director of Quality. This will form the work plan of the safeguarding team for the forthcoming year.
- 8.6 In January the CQC, OFSTED, and HMRC announced their new joint inspection framework. This is due to commence from April 2016 and will start with themed inspections. CSE is the focus for the next year.
- 8.7 In February 2016 Dorset County received notification from OFSTED of a four week unannounced Inspection of its Children's Services.
- 8.8 The Inspection commenced on 23 February. OFSTED's findings are not available at the time of writing this report and will be include in the Safeguarding Children Half Yearly Update Report.
- 8.9 New Joint Targeted Area Inspections of services for vulnerable children and young people (JTAI) were announced in January. This will see Inspection Teams comprising of Ofsted, Care Quality Commission (CQC), Her Majesty's Inspectorate of Constabulary (HMIC) and Her Majesty's Inspectorate of Probation (HMIP) who will jointly assess how local authorities, the police, health, probation and youth offending services are working together in an area to identify, support and protect vulnerable children and young people.
- 8.10 The new short inspections will allow inspectorates to be more responsive, targeting specific areas of interest and concern. They will also identify areas for improvement and highlight good practice from which others can learn.
- 8.11 Each inspection will include a 'deep dive' element, with the first set, to be completed by summer 2016, focusing on children at risk of sexual exploitation and those missing from home, school or care. Future areas of focus will be decided upon with input from key stakeholders.

9. Child Death Overview Panel

- 9.1 The Pan Dorset Child Death Overview Panel (CDOP) undertakes, on behalf of the LSCBs, the statutory function of reviewing the death of any child normally resident in Dorset. The Panel is responsible for reviewing the death of all children from birth (not including stillbirths) up to but not including the age of 18 years.

- 9.2 The panel is chaired by Dr Vicki Fearne, Public Health Dorset, and has membership from: Designated Paediatric Consultants, Specialist Nurses, Local Authority and NHS Children's Safeguarding Managers, Dorset Police, South Western Ambulance Service and the Dorset Coronial Service.
- 9.3. During 2015/16 the Panel met on 6 occasions and reviewed a total of 33 deaths:
- 61% of child deaths are males;
 - 61% of deaths are in the 0 -27 day period;
 - 67% of deaths are under one year;
 - 70% of deaths are expected;
 - the leading cause is a perinatal/neonatal event (42%);
 - other common causes of death are genetic factors (21%), trauma (15%) and SUDI (9%).

Modifiable factors were identified in 27% of deaths reviewed.

10. Other Developments

Strategic Sexual Violence Group

- 10.1 The Strategic Sexual Violence group, chaired by the Assistant Chief Police Commissioner is a sub group of the Community Safety Partnership Board (CSP). Its function is to have strategic oversight of the work undertaken to reduce the incidents and impact of sexual violence for both adults and children.
- 10.2 Despite the incidents of violence having decreased nationally, in Dorset the number of serious sexual offences have continued to increase in the last year. (See table 6)
- 10.3 The CCG is represented by the Director of Quality and Deputy Designated Nurse; with the Deputy Designated Nurse also attending the operational group which sits below it. This group considers the practice issues including; training needs of the work force, working with schools to raise awareness in young people, and developing pathways for victims among some of its tasks.

Table 5

	Indicator Description	2013 / 14 Whole Year	2014 / 15 Whole Year	2015/16 Numbers at end Jan 16	Direction of travel
Pan Dorset	Victim age 17 and under	142	265	303	
Poole		26	52	56	
Bournemouth		38	89	90	
Dorset		78	142	157	

10.4 Sexual violence is a cross cutting theme for other strategic Boards including the LSCBs and Health and Wellbeing Boards.

10.5 In March 2016 the Group received the Health Needs Analysis report on the SARC.

CCG Safeguarding Team

10.6 The CCG Safeguarding Children and Adult lead professionals have continued to meet regularly throughout the year to oversee the safeguarding agenda and develop their work streams. The meeting has been used to coordinate and develop the work of the Named GPs.

Wessex Area Safeguarding Forum and NHS England Safeguarding Leadership

10.7 The Wessex Area Team has supported the CCG safeguarding professionals throughout the last year. The established quarterly meetings have begun to provide the governance and oversight of the safeguarding agenda for Health. The key areas of focus for this year have been, for child safeguarding:

- Female Genital Mutilation;
- Child Sexual Exploitation;
- Looked After Children;
- Mental Capacity (MCA) of 16-18 year olds.

10.8 The forum has also begun to share good practice across Wessex, with the introduction of “Show and Tell” sessions where designated professionals present the work being undertaken in their area.

10.9 The CCG Designated Nurse continues to attend the NHS England SCR Group and has presented the local SCR model at a national event. The CCG Deputy Designated Nurse continues to link in with the NHS England CSE group and has been involved in developing CSE standards to be included in the national NHS contract for 2016/17.

11. Conclusion

11.1 The national focus on safeguarding has remained high over the last year with a number of Government Reviews and Consultations being undertaken, which the CCG Safeguarding Team has responded to.

11.2 The NHS Wessex Forum has provided a governance pathway to take forward the national safeguarding agenda which has provided useful direction and collaboration with others in Wessex area.

11.3 The CQC Review of health services for Children Looked After and Safeguarding has provided the CCG Safeguarding Team with an important benchmark for health services' safeguarding arrangements in Dorset. This will be the focus for work in the coming year along with the results from the Section 11 Audit of Primary Care.

11.4 There have been significant challenges in ensuring health fulfil its statutory responsibility to participate in the work of the LSCBs; as the demands on the workforce increases and the work of the Boards comes under focus through Inspections and Reviews.

11.5 The increase in the number of SCRs this year has been another area of challenge. The LSCB SCR Group has seen an increase in cases being put forward for consideration. These reviews are very resource intensive and require multiagency input if lessons are to be learnt and change embedded.

11.6 The CCG Safeguarding Team and LSCB members await the publication and recommendations of the Review into the effectiveness of LSCBs. This will also inform the future work of the Designated Professionals.

12. Objectives For 2016/17

12.1 Over the coming year the safeguarding team will:

- work with providers to ensure the recommendations from the CQC Review of safeguarding children are implemented;
- work with the Named GPs to support and development to the GP Leads within Primary Care, to further strengthen and embed good safeguarding practice;
- work with NHS England on the National Safeguarding key areas for development over 2016/17, CSE, FGM, LAC, MCA;

9.10

- work alongside the LSCBs and partners to implement the recommendations from the Government Review of LSCBs and SCRs;
- along with the CCG Adult Safeguarding Lead Nurse and Provider Trust Leads, we will continue to strengthen health practitioners' response to Domestic Abuse through the Domestic Abuse Health Forum;
- work with the LSCBs to support the review processes of SCRs commissioned throughout the coming year. Ensuring learning is shared across the health economy;
- seek to improve our quality monitoring of safeguarding practice within the Provider Trusts, by monitoring the new reporting schedules and contract standards for Safeguarding Children.

Author's Name and Title: Wendy Thorogood, Designated Nurse Consultant
for Safeguarding Children

Telephone Number: 01305 213563/078243566