

SAFEGUARDING CHILDREN AND THE MONITOR DECLARATION

This report is for publication

EXECUTIVE SUMMARY

In 2009 there was a request from Monitor that each Trust Board issues a declaration on their web site to confirm the Trust's compliance with five key areas relating to safeguarding children. The declaration was reviewed in January 2015 as part of our annual review of safeguarding arrangements.

In 2009 the Safeguarding Children Team reviewed CNWL's position and recommended to the Board that there was adequate compliance in all five key areas. The review of this declaration in January 2015 also confirms continued compliance.

1. The foundation trust meets the statutory requirement with regard to the carrying out of Disclosure and Barring Service (DBS) checks	Compliant √	Evidence: see page 4
2. Safeguarding Children and Young People policies and systems are up to date and robust, including a process for following up children who miss outpatient appointments and a system for flagging children for whom there are safeguarding concerns	Compliant √	Evidence: see page 5
3. All eligible staff have undertaken and are up to date with safeguarding training at level 1. In addition, a review of other training arrangements should be completed within 6 months, taking account of emerging messages from the national review of safeguarding training	Compliant √	Evidence: see page 6
4. Named professionals are clear about their roles and have sufficient time and support to undertake them	Compliant √	Evidence: see page 8
5. There is a Board level Executive Director lead for safeguarding, the Board reviews safeguarding across the organisation at least once a year and has robust audit programmes to assure it that safeguarding systems and processes are working. This will need to include clear procedures for A&E departments.	Compliant √	Evidence: see page 8

Regulatory framework

This report provides evidence in respect of Care Quality Commission regulations for registration and in meeting a requirement from Monitor.

RESPONSIBLE DIRECTORAndy Mattin

DATE.....January 2015

Central and North West London NHS Foundation Trust

Safeguarding Children, the CQC Review and Monitor Declaration

1.0 Introduction

- 1.1 On 16 July 2009, Monitor wrote to the Trust following publication of the Care Quality Commission's (CQC) report into the findings of their review of arrangements in the NHS for safeguarding children, which was completed in Spring 2009. The CQC made detailed data available from its review for benchmarking purposes in autumn 2009.
- 1.2 Monitor set out the actions required in this area to ensure all necessary improvements to safeguarding arrangements were made and that the Trust submitted its registration with the CQC in April 2010.
- 1.3 Monitor clarified their expectation that, as a minimum, Boards should assure themselves that they met the following:
 - The Foundation Trust meets the statutory requirement with regard to the carrying out of Disclosure and Barring Service checks;
 - Safeguarding Children and Young People policies and systems are up to date and robust, including a process for following up children who miss appointments and a system for flagging children for whom there are safeguarding concerns;
 - All eligible staff have undertaken and are up to date with safeguarding training at level 1;
 - Named professionals are clear about their roles and have sufficient time and support to undertake them;
 - There is a Board level Executive Director lead for safeguarding, the Board reviews safeguarding across the organisation at least once a year and has robust audit programmes to assure it that safeguarding systems and processes are working, including clear procedures for Liaison staff in A&E departments.
- 1.4 Monitor required NHS Foundation Trusts to publish a declaration on their web-sites (and also in other media as decided by Trusts) as soon as possible when they are satisfied these arrangements are in place. Monitor requested that Trusts notify their relationship manager once the above declaration has been published. This was completed and the declaration was published on the Trust Website
- 1.5 Commissioners have clarified their expectations that the Trust reviews its submission annually and will update it accordingly on the Trust Website.
- 1.6 To enable the Board to make the required declaration, assurance was provided in Appendix 1. This assurance is presented as evidence of compliance.

2.0 Declaration

- 2.1 The Safeguarding Children Team were asked to review the evidence for meeting these five Monitor expectations. Due consideration was also given to existing Trust assurance frameworks.
- 2.2 The assurance information provided in Appendix 1 indicates that the Trust is compliant in the five areas.
- 2.3 The CQC benchmarking results show that the Trust is comparable to all other Mental Health Trusts and with other Community Providers.

Charlie MacNally
Divisional Director A

Maria O'Brien
Divisional Director B

Lorna Payne
Divisional Director C

Catherine Knights
Associate Director of Quality,
Safety and Safeguarding

Paul Byrne
Named Nurse

Lisa Crawshaw
Named Nurse

Tracy O'Brien
Named Nurse

Jane Thorogood
Named Nurse

Appendix 1

Assurance for Declaration to Monitor

1. Disclosure & Barring Service (DBS) checks

The Foundation Trust meets the statutory requirement with regard to the carrying out of DBS checks.

1.1 Definition

The Home Office Framework Document (July 2013)¹ was written and agreed by the Disclosure and Barring Service (DBS) and the Home Office, in consultation with the Department for Education (DfE) and the Department of Health (DH). It describes the high level parameters that define how these organisations will work together:

The DBS was established under the Protection of Freedoms (POF) Act 2012 and will carry out functions previously undertaken by the Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA).

The statutory duties of the DBS are contained in the Safeguarding Vulnerable Groups Act 2006, and Part V of the Police Act 1997, as amended by the POF Act 2012:

- *To hold and maintain a register of organisations approved by the DBS to submit applications for criminal records certificates.*
- *To issue three levels of certificates of criminal records: Basic, Standard and Advanced*
- *To reach considered decisions about whether an individual should be barred from engaging in regulated activity with children² and/or vulnerable adults, and maintaining lists of those barred from working with children and adults.*
- *The DBS will bar any individual who has accepted a caution for or been convicted of an automatic barring offence (i.e. an offence that does not allow representations).*
- *The DBS will consider for barring any individual who has accepted a caution for or been convicted of an automatic inclusion offence (i.e. an offence that does allow representations) or has been referred to the DBS from, for example, an employer or regulatory body, subject to any representations submitted by the individual - provided the DBS also has reason to believe that the person is or has been, or might in the future be, engaged in regulated activity with children and/or vulnerable adults.*
- *To make decisions as to whether it is appropriate to remove a person from a barred list either following the expiration of the minimum barred period under Section 18 of the Safeguarding Vulnerable Groups Act 2006, under the requirements of Article 10-12 of the Protection of Freedoms Act 2012 (Commencement No.3) Order 2012, or otherwise under its powers to review a person's inclusion at any time pursuant to section 18A of the Safeguarding Vulnerable Groups Act 2006.*

¹ www.gov.uk/homeoffice

² Regulated activity is defined in Schedule 4 to the Safeguarding Vulnerable Groups Act 2006, as amended by the Protection of Freedoms Act 2012 (and other legislation).

- *2.12 Under section 30A of the Safeguarding Vulnerable Groups Act 2006, the DBS will deliver a new service which will allow certain groups to check whether a person is barred. Under section 30B of the Safeguarding Vulnerable Groups Act 2006, the DBS will also deliver a service which will allow those same people to ask the DBS to inform them whether a person in relation to whom they have registered an interest becomes barred. Both systems require the person in relation to whom the information is sought to consent and will attract a fee. The new Early Confirmation Barred List Check will be available on a limited basis from 2013.*

1.2 Evidence of Compliance

- a) Since 2002 all staff have had an enhanced DBS check prior to commencing employment with CNWL, whether as a paid worker or volunteer. The evidence for this is in the CNWL Recruitment Policy and Procedures. Slides which support the Recruitment and Selection training and the Recruitment Pack for Volunteers are available. Agencies supplying staff to Trust services have been required to complete DBS checks of staff on their books. Where appropriate, contractors have clauses inserted into contracts to ensure their compliance in this regard.
- b) DBS checks for staff recruited from 2002 are now repeated every 5 years. The evidence for this is the assignation of staff by each operational directorate to attend training and become a certified DBS/ID Verifier. Employees are required to sign a self-declaration on their annual appraisal documentation. DBS checks are held on ESR. Contracts of employment and job advertisements contain statements about DBS checks and new employees are not able to commence their job until a clear check is received.
- c) Since the declaration was first made the Trust now completes new DBS checks for staff whose DBS check has reached its five year expiry date.
- d) The Trust has a process to manage allegations against staff.

2. Safeguarding Children and Young People policies and systems

Safeguarding Children and Young People policies and systems are up to date and robust, including a process for following up children who miss appointments and a system for flagging children for whom there are safeguarding concerns.

2.1 Definition

This consists of three parts where the Trust must have:

- Policies and procedures that are consistent with national guidance.
- A process for following up children who miss appointments.
- A system for flagging children for whom there are safeguarding concerns. This can be interpreted in two ways. Firstly, that there is a process to flag concerns with the Named Professionals and secondly, that the trust has a way of flagging children with a child protection plan on its IT systems, so others looking up the record are aware that this exists and can contact the relevant staff member.

2.2 Evidence of Compliance

- a) The Trust has a Safeguarding Children and Young People Policy (2014) that is revised every three years. This is supported by a set of local guidelines which are available to staff on the Trust intranet.
- b) All services for children have in place local procedures for following up children who miss appointments, which highlights what to do if there are concerns about a child.
- c) On induction all CNWL staff are given details of who they should contact for advice should they have concerns about a child and how to make a referral.
- d) The Named Nurses write articles for “In Brief”, the Trust magazine, and the Weekly Newsletter to ensure that staff are updated in developments on safeguarding practice.
- e) Named Nurses conduct audits into a variety of areas of safeguarding practice and these are all reported to the quarterly Safeguarding Group. Robust action plans are developed to address any areas of improvement.
- f) Staff are encouraged to call the Named Nurses for advice where they may have a concern about a child and may need advice and support.
- g) There are flagging systems on the electronic patient record systems used within the Trust.

3. Safeguarding children training

All eligible staff have undertaken and are up to date with safeguarding training at level 1.

3.1 Definition

Working Together to Safeguard Children (2013)³, notes that under section 11 of the Children Act 2004 a duty is placed on a range of organisations and individuals to ensure their functions, and any services that they contract out to others, are discharged having regard to the need to safeguard and promote the welfare of children:

All staff working in healthcare settings - including those who predominantly treat adults - should receive training to ensure they attain the competences appropriate to their role and follow the relevant professional guidance:

- *Safeguarding Children and Young People: roles and competences for health care staff, 3rd Edition (2014) RCPCH*
- *Looked after children: Knowledge, skills and competences of health care staff, RCN and RCPCH, (2012)*

³ www.education.gov.uk

- *Protecting children and young people: the responsibilities of all doctors*, GMC (2012).
- The Trust is currently working to the guidance in *Working Together* (2013) and the Intercollegiate Document *Safeguarding Children and Young People: roles and competences for health care staff*, RCPCH (2014) which divides training up into different target groups with suggested training content for each group. All groups should have a refresher training every three years.

Level 1 training is for non-clinical staff working in health care settings / clinical staff at induction

Level 2 training is for the minimum level required for clinical staff who have some degree of contact with children and young people and/or parents/carers

Level 3 training for clinical staff working with children, young people and/or their parents/carers and who could potentially contribute to assessing, planning, intervening and evaluating the needs of a child or young person and parenting capacity where there are safeguarding/child protection

3.2 Evidence of Compliance

All staff who come into contact with children and young people have a responsibility to safeguard and promote their welfare and should know what to do if they have concerns about a child. This responsibility also applies to staff working primarily with adults who have dependent children that may be at risk because of their parent/carers health or behaviour. To fulfil these responsibilities, all health staff should have access to appropriate safeguarding training, learning opportunities and support to facilitate their understanding of the clinical aspects of child welfare and information sharing⁴

- Safeguarding children training is mandatory for all CNWL staff. The training offered is tailored to meet the differing needs of community and mental health staff within the organisation and a variety of delivery methods are used including e learning programmes.
- The Board receives annual training on safeguarding.
- Compliance with safeguarding children training is closely monitored and is a standing item discussed at the CNWL Quarterly Safeguarding Group. The percentage of staff trained in CNWL, Hillingdon, Camden and Milton Keynes is included in all the update papers tabled.

4. Named professionals

Named professionals are clear about their roles and have sufficient time and support to undertake them.

4.1 Definition

Working Together Guidance (2013) states that:

⁴ *Safeguarding Children and Young People: roles and competences for health care staff*, RCPCH (2014)

All providers of NHS funded health services including NHS Trusts, NHS Foundation Trusts and public, voluntary sector, independent sector and social enterprises should identify a named doctor and a named nurse.

Specific roles and skills include:

- Named professionals have a key role in promoting good professional practice within their organisation
- Providing advice and expertise for fellow professionals
- Ensuring safeguarding training is in place
- They should work closely with their organisation's safeguarding lead, designated professionals and the LSCB.

In line with the Intercollegiate Document *Safeguarding Children and Young People: roles and competences for health care staff*, RCPCH (2014), CNWL named professionals ensure they have the knowledge and skills to fulfil their role by attending Level 4 training.

4.2 Evidence of Compliance

The Trust has expanded with integration of community services and has demonstrated its commitment to safeguarding by ensuring there are sufficient skilled and experienced Named professionals to support this function. There is one Named Nurse and Named Doctor for mental health and allied specialties, three full time Named Nurses and 4 sessions (two part time) Named Doctors for community services. In addition, there are four Safeguarding Children Advisor posts. The Advisors deliver training, complete reports, undertake audits to demonstrate compliance with policies or procedures, provide supervision to health staff and support the Named Nurses. Training and supervision includes learning from any serious case reviews or serious incidents involving children The Trust has evidence of their job descriptions, person specifications, job planning, priorities and training undertaken by them to fulfil this role. The Named Nurses from mental health and allied specialties, Hillingdon, Camden and Milton Keynes meet regularly.

5. Board level Executive Director Lead and Audit Programmes

There is a Board level Executive Director lead for safeguarding, the Board reviews safeguarding across the organisation at least once a year and has robust audit programmes to assure it that safeguarding systems and processes are working. This will need to include clear procedures for A&E departments.

5.1 Definition

The Trust must have a Board level post as the lead for safeguarding children. The Board of Directors must receive at least an annual update of safeguarding children issues. The Trust must have an audit programme relating specifically to safeguarding children.

5.2 Evidence of Compliance

Andy Mattin is the Board Level Director who is the safeguarding children lead for CNWL. The governance arrangements for safeguarding children are met through Quarterly Safeguarding Meeting which reports directly to the Board of Directors three times a year. The named nurses from mental health and allied specialties, Hillingdon, Camden and Milton Keynes send their audit planners to the Trust quarterly safeguarding group. All Board papers are available on the Trust Website. Terms of Reference clarify the purpose of the meetings and accountabilities.

The Board of Directors also discusses the Safeguarding Children Annual Report to the Board and receives annual training in safeguarding children.

The Named Nurses regularly meet with the Board Level Director.