

Section 6: Accountability Charter: safeguarding and complex needs

This charter incorporates the recommendations from the Improvement Board for Northamptonshire in relation to health care services.

Health care services role to support Council:

- Identify concerns about possible abuse and/or neglect and refer them promptly to the Multi-Agency Safeguarding Hub (MASH) or identified social worker if an open case.
- Accurately record information and evidence relevant to safeguarding concerns
- Share information appropriately and in a timely way, with own designated safeguarding leads and other agencies
- Follow up written referrals to the MASH with a discussion to agree outcome action required.
- Inform parents/families of referrals unless advised otherwise by safeguarding professionals
- Write reports within timescales for child protection conferences and looked after children reviews
- Co-operate fully with initial enquiries and/or response team visits from the MASH, and case investigations coordinated by the LSCBN
- Implement recommendations from own enquiries and external reviews including serious case reviews.

Council commitment to Health:

Customer Advice Team in MASH take referral calls with access to a Senior Practitioner for advice

- MASH to provide timely communications and updates to health care staff on referrals, progress and outcomes
- Invites to conferences and reviews to be sent out in timely way to ensure full agency participation, information sharing, and effective safeguarding plans for children
- Build links with partners through reintroduction of the duty Independent Reviewing and Conference Officer (IRCO) role
- Effective transition and communication between Council services including social care and targeted prevention teams
- Maintain work on safeguarding audits and targeted CAF support for health care services
- Training is available for professional safeguarding leads with resources to cascade safeguarding training within health services
- All looked after children and carers/foster carers will have a named health care lead and access to support through the LAC integrated service

Making Children Safer in Northamptonshire

Guidance for Health Care Staff, July 2014

Section 1: What is Safeguarding?

- Protecting children and young people from maltreatment
- Preventing impairment of children and young people's health or development
- Ensuring that children and young people are growing up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children and young people to have the best outcomes



Section 2: Safeguarding considerations for health care staff

Health care staff play an essential role as they are in a position to identify concerns early, provide help for children and to prevent concerns from escalating. Health services should work in partnership with social care, the police, education and other agencies to promote the welfare of children and protect them from harm. Specific safeguarding issues are:

- child sexual exploitation
- neglect
- sexual abuse
- mental health and self-harming
- domestic violence
- physical abuse
- bullying, including cyber-bullying
- alcohol, drug and substance misuse
- racist and faith abuse
- harassment and discrimination
- local gangs and youth violence
- female genital mutilation
- forced marriage
- gender based violence/against women and girls
- teenage relationship abuse, sexting
- private fostering safeguards and notification to Council
- radicalisation
- trafficking

Contexts in which safeguarding and relevant procedures should be considered include children missing from school, use of physical intervention, children and young people with medical conditions, providing first aid or intimate care, educational visits, internet and e-safety, and trips outside the UK or prolonged absences where there are one or more of the above concerns.

Section 3: Statutory Duties and Working Together 2013

Healthcare organisations are subject to the section 11 duties set out in paragraph 4 of Working Together to Safeguard Children 2013. Health professionals are in a strong position to identify welfare needs or safeguarding concerns regarding individual children and, where appropriate, provide support. This includes understanding risk factors, communicating effectively with children and families, liaising with other agencies, assessing needs and capacity, responding to those needs and contributing to multi-agency assessments and reviews.

The government's "Working Together 2013" sets out statutory guidance for agencies. Health services should have in place:

1. A clear line of accountability to safeguard and promote the welfare of children
2. A senior Governing Body/Trust Board lead to take leadership responsibility for the organisation's safeguarding arrangements
3. A culture of listening to children and taking account of their wishes and feelings, both in individual decisions and the development of services
4. Arrangements which set out clearly the processes for sharing information, with other professionals and with the Local Safeguarding Children Board Northamptonshire (LSCBN)
5. A designated/named lead for safeguarding, explicit in their job description, supporting other staff to recognise the needs of children and engage in multi-agency work
6. Safe recruitment practices for individuals who work with children, including statutory responsibilities to check staff, decisions on requesting additional checks, monitoring of volunteers and safer recruitment training for at least one member of appointment panels
7. Appropriate supervision and support for staff, including safeguarding training
8. Competent staff to carry out their safeguarding responsibilities within an environment where staff feel able to raise concerns and promote the welfare of children

9. Mandatory induction for staff, which includes familiarisation with child protection responsibilities and procedures to be followed for a child's safety or welfare
10. All professionals should have regular reviews to improve their own practice
11. Clear policies in line with the LSCBN for dealing with allegations against people who work with children

Statutory guidance for health

Working Together to Safeguard Children March 2013
HM Government

Safeguarding Vulnerable People in the Reformed NHS Accountability and Assurance Framework. March 2013
NHS Commissioning Board

Safeguarding children and young people; roles and competences for health care staff. Intercollegiate document March 2014
Royal College of Paediatrics and Child Health.

Section 4: Further safeguarding checks for Children and Young People's Health

For all Looked After Children:

- Initial Health Reviews and Review Health assessments must comply with statutory guidance.
- Adoption medicals must be timely and completed to ensure no delay in court process.
- Planning must take place to ensure care leavers are supported as they transition into adult services.

All children and young people must be:

- Encouraged and enabled to report any concerns or complaints
- Helped to keep themselves safe and deal sensibly with risk.

Section 5: Early help and early intervention

Section 10 of the Children Act 2004 requires each Local Authority to make arrangements to promote co-operation between the LA and relevant partners, to safeguard children and promote their well-being.

Making Children Safer – reminder of points from Northamptonshire multi-agency briefings.

- Earlier help and intervention to support families reduces the risk of harm or abuse to children
- An inter-agency assessment through a Common Assessment for Families (CAF) enables information to be shared and a plan drawn up for the child and family
- Health care staff should assess risk and initiate a CAF if a safeguarding referral isn't needed, with progress tracked to ensure it is happening and prevent issues escalating
- Co-coordinating support from agencies e.g. education, housing, police, children's social care
- Help is available:
 - Contact a CAF Co-coordinator
 - "Making Children Safer" – A Pocket Guide
 - Directory of key professionals by area of County
 - Thresholds and pathways document
 - Streamlined CAF format and training sessions

www.northamptonshire.gov.uk/mcs

Since April 2014 new Complex Case Meetings and Locality Forums will be operating.

Complex case meetings

Meetings will take place every two weeks in each district or borough – and more frequently if needed.

The aim is to provide a responsive service to families and professionals. Health care staff can complete an online request form emailed to the appropriate address for your area, detailing the risks and issues and intended outcomes from a case discussion. Health care staff must have the family's consent for case discussion.

If the concerns raised can be resolved without coming to a meeting, a CAF coordinator or Troubled Families coordinator will contact the schools to offer advice and to agree actions. If the outcome of a complex case meeting is a referral to a particular service, this will be made by the chair of the meeting.

Locality forums

The county's Early Help Forums will be replaced by ten Locality Forums that will build on existing relationships between professionals. This will help us all to move to an early intervention response that addresses the needs of the local area and builds a shared understanding of the profile and emerging priorities of each local area.

Joining up resources and developing solutions to address local needs will be a key role of the new Locality Forums, which will be made up of key local stakeholders including schools, children's centres, NCC education, GPs and school nurses.

