

Perth and Kinross Child Protection Committee (CPC)

CPC High-Level Response to SCR Learning Summary and Recommendations

Recommendations	Improvements – Completed @25 June 2019	Improvements – In Progress @25 June 2019
NATIONAL CONSIDERATION		
<p><i>1. NHS Education Scotland and NHS Tayside should review and revise their policies on child protection training for medical staff, especially paediatric trainees and career grade staff. The revised policy should stipulate the need for less-experienced staff to be effectively supervised in the clinical management of child protection cases and highlight more robust appraisal of child protection competences of paediatric trainees and career grade staff.</i></p>	<ul style="list-style-type: none"> • NHS Tayside Child Protection Training Strategy in place for all NHS Staff since 2010 – Reviewed and updated regularly in compliance with Intercollegiate Guidance – Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff Fourth Edition: 2019; • Supporting this Strategy, NHS Tayside’s Annual Child Protection Staff Learning and Development Programme is available for all NHS Staff Groups. Training is delivered by the Lead Paediatrician / Child Protection Team. Staff Groups include: Medical Under-Graduates, GP Trainees, GPs, Paediatricians and Career Grade Staff; • Royal College of Paediatrics and Child Health (RCPCH) also provides an established Curriculum for Paediatric Trainees; • P&K CPC Annual Child Protection Learning and Development Opportunities – Widely available to all Services and Agencies – Including NHS Staff; 	<ul style="list-style-type: none"> • Ongoing review of NHS Tayside Child Protection Training Strategy and associated Training Programme will take cognisance of the this Recommendation and Recommendations contained within the recently published / updated Intercollegiate Guidance – Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff Fourth Edition: 2019;
NHS TAYSIDE WITH PERTH AND KINROSS PUBLIC PROTECTION CHIEF OFFICERS GROUP		
<p><i>2. The training of all staff working with babies, children, young people and their carers should be re-enforced to ensure that staff are aware of indicators of child abuse, assessments and referral processes when they suspect child abuse.</i></p> <p><i>3. Perth and Kinross Child Protection Committee should lead a review of processes and pathways leading to screening of vulnerable unborn babies, with the aim of developing a protocol which should be owned by all relevant services and agencies across Tayside. This must be accompanied by training of relevant staff across Tayside.</i></p>	<ul style="list-style-type: none"> • Included in all Single and Multi-Agency Child Protection Training – Widely available across P&K and NHS Tayside; • Included in the P&K CPC Inter-Agency Child Protection Guidelines – Refreshed August 2017; • Included in Awareness Raising Sessions with NHS Tayside Midwifery, Maternity and Health Visiting (Named Person) Services – Completed August 2017; • Included in the improved and strengthened NHS Tayside Unborn Baby Protocol and Arrangements – Refreshed September 2017; • Included in the improved and strengthened P&K Unborn Baby Multi-Agency Screening Group (MASG) and Guidance – Refreshed April 2017; • Included in Joint Partnership work between PKC, NHS Tayside and the Centre for Excellence for Children's Care and Protection (CELCIS) – Addressing Neglect and Enhancing Wellbeing (ANEW): Getting it Right Pre-Birth and into the first year of life (needs led early intervention pathway to support pregnancy women who are vulnerable); 	<ul style="list-style-type: none"> • Tayside Multi-Agency Practitioner’s Guidance: Concern for Unborn Babies and Referral Template – Drafted and Consultation ongoing @June 2019; • Tayside Multi-Agency Practitioner’s Guidance: Inter-Agency Referral Discussions (IRDs) and IRD Template – Drafted and Consultation ongoing @June 2019; • P&K Multi-Agency Screening Group (MASG) and Guidance – Review underway @June 2019; • Roll Out – To be supported by Single and Multi-Agency Staff Learning and Development Opportunities;

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<p>4. NHS Tayside, together with Perth and Kinross Public Protection Chief Officers Group, should review and revise systems and practices about parental mental health problems and its impact on child care and wellbeing. Any resultant protocol should be launched with training to relevant staff working with the child and other family members, especially to GPs and Community Mental Health Services to ensure proportionate communication. (See also Recommendation 5)</p> <p>5. All agencies, especially adult mental health and GP services, must review their guidance, policies and protocols on information sharing where there are concerns about parental mental health issues which might impact on parenting. (See also Recommendation 4)</p>	<ul style="list-style-type: none"> NHS Tayside Child Protection Policies, Procedures, Protocols and Guidance – Reviewed annually in compliance with NHS Tayside Governance Arrangements; NHS Tayside Child Protection Policy (Refreshed June 2018): includes guidance on the responsibilities for all Health Professionals, including those working within the Health and Social Care Partnership (HSCP) who work with, or treat Adults who are Parents / Carers. This Policy states that they must be alert to the possibility that their adult patient may pose a risk to a child or young person and have a duty to act; This also relates to Recommendation 1 above, for information on NHS training which is available to all Health Staff; this includes those working within HSCP: this training also supports the NHS Tayside Child Protection Policy; Test-of-Change to improve Information Sharing in terms of NHS Tayside Midwifery and Health Visiting Pathways – Completed March 2017; P&K Code of Practice: Information Sharing, Confidentiality and Consent, which reflects the new Data Protection Legislation and the General Data Protection Regulation (GDPR) – Refreshed February 2019; Guidance applies equally to Children’s Services Adult Services; 	<ul style="list-style-type: none"> Ongoing consideration is being given to running a multi-agency / multi-disciplinary Protected Learning / CPD event on the impact of parental mental health issues on a child or young person’s health and wellbeing. This will mirror similar events held previously in relation to the impact of parental substance misuse; this will also augment specific training on child protection and the need to consider a whole-family and whole-system approach to safeguarding;
<p>6. All agencies should review, and, where appropriate, update their procedures for record keeping and referral processes to ensure that records contain accurate information, detailed analysis, effective decision making and care plans. Any resultant protocol must be accompanied by training of relevant staff.</p>	<ul style="list-style-type: none"> NHS Tayside Child Protection Policies, Procedures, Protocols and Guidance – Reviewed annually in compliance with NHS Tayside Governance Arrangements; Good Practice in record keeping is reinforced within all NHS Tayside Child Protection Training Programmes; Single Service / Agency Record-Keeping Guidance – In place; Reviewed and Quality Assured via Single and Multi-Agency Annual Reviews and Audits and Supervision; 	<ul style="list-style-type: none"> Ongoing Commitment by all Services / Agencies;
<p>7. NHS Tayside, together with Perth and Kinross Public Protection Chief Officers Group should review, revise and rationalise protocols for the planning and conduct of paediatric forensic assessments / examinations, taking into consideration recent guidance (2014) from the Scottish Government and the Child Protection Managed Clinical Networks.</p>	<ul style="list-style-type: none"> Implemented an improved and strengthened approach in terms of the Tayside Joint Paediatric / Forensic Medical Examination Protocol; Standards on Joint Paediatric / Forensic Medicals established; reported to NHS Tayside Child Protection Executive Group (CEG) and Child Protection Managed Clinical Networks (MCN); 	<ul style="list-style-type: none"> Ongoing review of Tayside Joint Paediatric / Forensic Medical Examination Protocol @June 2019; Also links with the Tayside Multi-Agency Practitioner’s Guidance: Inter-Agency Referral Discussions (IRDs) and IRD Template – Drafted and Consultation ongoing @June 2019; Roll Out – To be supported by Single and Multi-

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		Agency Staff Learning and Development Opportunities;
8. Where policies, protocols and procedures are printed all staff must ensure they are using the most up to date version.	<ul style="list-style-type: none"> Version Controls in place across all Services / Agencies and at the CPC; 	<ul style="list-style-type: none"> Ongoing Commitment by all Services / Agencies and the CPC;
<p>9. Patterns of engagement and cooperation should be monitored by all staff and any changes should be explored as they may indicate increasing levels of risk.</p> <p>10. Historical and accumulating information must be sought, examined and critically analysed by staff in all agencies to allow evaluation of increasing risk. All agencies should ensure that training is offered to key practitioners in creating a chronology and that standard for chronologies are embedded in guidance. Chronologies should focus on significant events and their impact on the life of a child or young person. They should be scrutinised regularly to understand cumulative adversities.</p> <p>11. All staff must review and take account of available information before decisions are taken on the future management of the wellbeing of the young person or baby.</p>	<ul style="list-style-type: none"> Included in existing Service / Agency Assessment Frameworks which reflect both the Getting it Right For Every Child (GIRFEC) National Practice Model and the National Risk Framework; Tayside Child / Young Person's Plan Template – Implemented and in place since March 2016; Included in the Tayside Multi-Agency Practitioner's Guidance: Chronologies – Refreshed April 2019; P&K CPC Practitioner's Guide: Working with Hostile and Non-Engaging Parents and Carers – Published October 2015; All above currently supported by Single and Multi-Agency Staff Learning and Development Opportunities; NHS Tayside Discharge Planning Guidance – In place since January 2019; P&K Code of Practice: Information Sharing, Confidentiality and Consent, which reflects the new Data Protection Legislation and the General Data Protection Regulation (GDPR) – Refreshed February 2019: accessible to all NHS Staff via the NHS Tayside Child Protection Website; 	<ul style="list-style-type: none"> Tayside Multi-Agency Practitioner's Guidance: Chronologies being disseminated and implemented @June 2019; Tayside Multi-Agency Practitioner's Guidance: Inter-Agency Referral Discussions (IRDs) and IRD Template – Drafted and Consultation ongoing @June 2019; Tayside Multi-Agency Practitioner's Guidance: Concern for Unborn Babies and Referral Template – Drafted and Consultation ongoing @June 2019; P&K CPC Practitioner's Guide: Resolution and Escalation in Child Protection – Drafted and being finalised @June 2019; P&K CPC Practitioner's Guide: Professional Curiosity in Child Protection – Being developed @June 2019; Roll Out – To be supported by Single and Multi-Agency Staff Learning and Development Opportunities; P&K Multi-Agency Screening Group (MASG) and Guidance – Review underway @June 2019;
NHS TAYSIDE		
12. NHS Tayside should develop a policy for nursing and medical staff to follow whenever a baby or child is weighed. Where there are concerns regarding growth, weight assessments must be undertaken and plotted on a growth chart and filed within the professional health record. Investigations undertaken because of the growth concern should be documented in the child's file.	<ul style="list-style-type: none"> NHS Tayside Health Visitors and Family Nurses routinely record growth as a core part of all Child Health Reviews when undertaking the Scottish Child Health Surveillance Programme Pre-School Clinical Guidelines (Updated 2018); Universal Health Visiting Pathway in Scotland includes the National Assessment Tool: World Health Organisation (WHO) Guidelines for Child Growth which provides guidance for NHS Tayside Staff on interpreting the growth chart and assessing 	<ul style="list-style-type: none"> NHS Tayside Named Person Service continues to embed the World Health Organisation (WHO) Guidelines for Child Growth with link to associated WHO Training materials for all Trainees and Newly Qualified Health Visitors and Family Nurses;

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	<p>weight loss after birth and feeding;</p> <ul style="list-style-type: none"> • Maternal and Infant Nutrition Support (Pre-School) Referral Pathway in place for Health Visitors and Family Nurses: Updated November 2018; • Egton Medical Information System (EMIS) electronic system is the principle patient electronic record used by Health Visitors, School Nurses and Family Nurses; these records now include an electronic version of the growth chart; • EMIS includes recording guidance for Staff; • NHS Tayside Women and Child Health Clinical Group: Maternity Guidelines for Weighing Babies - Post-Natal Wards and Community is widely available to Staff; 	
<p><i>13. NHS Tayside should consider, within the General Practitioner contracts, an obligation to mandatory child protection training to at least Level 3 (Inter-Collegiate guidance) for GPs, and monitor this at annual appraisal processes.</i></p>	<ul style="list-style-type: none"> • NHS Tayside Child Protection Training Strategy for all NHS staff has been in place since 2010 and is regularly reviewed and updated in line with NHS Tayside Governance Arrangements; • NHS Tayside Child Protection Training Strategy in line with Intercollegiate Guidance; • Annual NHS Tayside Child Protection Training Programme in place for all NHS Staff including GPs and GP Practice Staff; 	<ul style="list-style-type: none"> • Work will be undertaken between NHS Tayside and the Health and Social Care Partnerships to promote further engagement with the GP Local Medical Committee and GP Sub-Committee to promote opportunities for Primary Care Staff to access Level 3 Child Protection Training; • Whilst it is not possible to establish mandatory training; consideration will be given to including and making Child Protection Training via Protected Learning Time and CPD Accreditation for GP Appraisals;

25 June 2019