

SAFEGUARDING CHILDREN

Protocols and resources for Bristol – see index for topic list

1) Child protection procedures – the basics

– contact information if you have a concern about a child/family

REFERRALS:

FIRST RESPONSE = single point of access: For SAFEGUARDING REFERRALS AND EARLY HELP REFERRALS

Online referral form - <https://www2.bristol.gov.uk/form/child-or-young-person-request-support-or-report-concern>

Telephone - 0117 903 6444

Professionals should use the online referral form where possible; the consent of parent/guardian is needed to do this. Referral information can be cut and pasted into GP record.

Where consent cannot be obtained or in the case of urgent/immediate child protection concerns professionals should use telephone line.

- OOH – EMERGENCY DUTY TEAM 01454 615165

Bristol City Council child protection procedures – for detailed pathways and guidance refer to:

Bristol Children's Services:

<https://www.bristol.gov.uk/policies-plans-strategies/for-professionals>

<http://www.bristol.gov.uk/page/children-and-young-people/child-protection>

South West Child Protection Procedures

<http://www.online-procedures.co.uk/swcpp/>

2) Bristol CCG Safeguarding Team

The safeguarding team provides support and training for primary care clinicians. We arrange regular meetings with link GPs, provide regular level III training events and participate in variety of policy groups and committees.

We are happy to give advice on safeguarding matters to clinicians. Our contact details are below. Please remember that we cannot offer urgent advice but we are happy to talk through complex issues.

Designated Nurse for Safeguarding Children

- Jackie Mathers: Jackie.Mathers@bristolccg.nhs.uk 0117 9002670

Deputy Designated Nurse for Safeguarding Children

- Julie Henderson: Julie.Henderson@bristolccg.nhs.uk 0117 9841527

Named GP for Safeguarding Children

- Helen Mutch: Helen.Mutch@gp-L81053.nhs.uk 0117 9640900

Designated Doctor for Safeguarding Children

- Lindsey MacKintosh: Lindsey.MacKintosh@cchp.nhs.uk

PA for Children and Young People

- Chris Smart: Chris.Smart@bristolccg.nhs.uk 0117 9002384

3) Link/Lead GPs

Every practice in Bristol now has a lead GP for safeguarding children known as the Safeguarding Link GP. The role of this lead GP is to ensure that members of the practice team have relevant training and resources, to disseminate newsletters and information and to ensure that the practice has an up-to-date safeguarding children protocol. Link GPs attend meetings organised by the CCG safeguarding team twice yearly at which current topics and issues in child protection are discussed. Link GPs are expected to have additional training - please refer to training matrix below.

4) Referral Thresholds

The decision on whether to refer children and young people for early help or for safeguarding intervention depends on whether a threshold has been crossed. This involves assessing the impact of the family situation on the child.

Bristol City Council has issued **Threshold Guidance** which can be helpful in making this decision. In particular, the threshold matrix (Page 18 and onwards) can help in this process.

<https://www.bristol.gov.uk/documents/20182/34452/Final+Thresholds+guidance+February+2014.pdf/a38fc4c0-3d82-4869-9e0f-97bc33ce9e60>

5) Allegations against people who work with children

Allegations of abuse of children by adults who work with children are becoming increasingly common especially following recent high profile cases. This may include allegations against patients who are teachers, foster carers, youth and community workers and other professionals and volunteers. It may also involve allegations against NHS staff including practice staff.

These are investigated by the Local Authority Designated Officer (LADO) – see below:

<https://www.bristol.gov.uk/documents/20182/35012/Allegations%20against%20people%20who%20work%20with%20children%2018.08.2015.pdf/e2c91022-4436-4d59-944c-c8bdf139bef7>

Further guidance is available from NHS England:

<https://www.england.nhs.uk/wp-content/uploads/2015/07/managing-safeguarding-allegations-against-staff.pdf>

6) Identification of Risks and Concerns

Practices can improve identification of risk and care of vulnerable families by ensuring consistent coding and by scanning relevant documents into the records of children and other family members.

Local guidance has been produced in Bristol and will be regularly updated – **Coding and Scanning Sensitive Information:**

<http://www.healthlearningpartnership.co.uk/uploads/20160722111816.pdf>

The RCGP has also issued guidance in the safeguarding toolkit:

http://www.rcgp.org.uk/clinical-and-research/toolkits/~/_media/54D5AE22B3A14BAF9A92DB25D125DBAF.ashx

7) Strategy Discussions

When it is thought that the child may be suffering from or at risk of suffering from significant harm a strategy discussion takes place to decide whether further assessment needs to be undertaken (under section 47 of the Children Act) Strategy discussions are coordinated by the children’s social care manager and should involve police, education and health professionals.

The outcome of this discussion should be communicated to all relevant professionals under guidance agreed by BSCB.

http://www.proceduresonline.com/swcpp/bristol/p_ch_protection_eng.html#strategy_discuss

8) Case Conference Reports and Meetings

When a child protection case conference is held to discuss and assess concerns about a child, GPs are asked to complete a report for the chair of the case conference. GMC guidance highlight the requirement for GPs to complete these reports. GPs are usually invited to attend case conferences but in practice it is unusual for them to attend. This makes it particularly important that conference reports are submitted.

Local arrangements are in place for payment for these reports.

Sample forms can be viewed on the Bristol City Council website:

<https://www.bristol.gov.uk/resources-professionals/signs-safety-and-childrens-social-work-bristol>

Following a case conference all relevant professionals should receive a report with relevant action plan highlighted. This should include a decision as to whether the child is made subject to a child protection plan. The report should also include the date of the next follow-up conference so that follow-up reports can be submitted in a timely fashion.

Case conference reports in Bristol are now sent by secure email. Work is still in progress to improve easy identification of decisions and action plans.

9) Signs of Safety

Children’s services in Bristol use the Signs of Safety approach to social work. This system aims to work collaboratively with families using a solution focused approach.

The NSPCC has published a review of this system for those interested in further information:

<https://www.nspcc.org.uk/globalassets/documents/research-reports/signs-safety-england.pdf>

10) Serious Case Reviews

Serious case reviews are detailed significant event analyses. The chair of the local safeguarding board launches a review in cases that meet nationally agreed criteria. Usually these involve cases where a child or young person has come to serious harm or died.

The purpose of a serious case review is to identify factors that can be changed to improve safeguarding children in future.

Bristol uses an approach known as the SCIE systems approach developed by the Social Care Institute for Excellence. It aims to look at factors in the work environment which may create unsafe conditions for safeguarding practice. Independent lead reviewers are appointed by the local safeguarding board and a review panel is appointed from all the agencies involved in the case. Practitioners involved in the front line care are invited to be involved in the case group and are interviewed about their involvement. The SCIE system aims to recognise that in most circumstances actions taken by practitioners were reasonable in the circumstances at the time and tries to avoid using hindsight bias. The SCIE approach is summarised below;

<http://www.scie.org.uk/publications/ataglance/ataglance01.asp>

The LSCB publishes all local serious case reviews;

<https://www.bristol.gov.uk/policies-plans-strategies/bscb-serious-case-reviews>

The NSPCC publishes a summary of all national serious case reviews on its website;

<https://www.nspcc.org.uk/preventing-abuse/child-protection-system/england/serious-case-reviews/>

Following serious case reviews one of the tasks of the CCG safeguarding team is to disseminate learning and action plans. We do this through our regular training events and GP link meetings.

11) GP- Practice Safeguarding Children Protocol:

Each practice should have a Safeguarding Children Protocol. The RCGP toolkit is generally recognised as the best available guide for GPs. It is a comprehensive and lengthy document which can be made available on practice intranets and contains guidance on how to set up a practice specific protocol (T1) and how to undertake a practice based self-assessment audit (T5)

It has sections and links to resources and information on a wide variety of safeguarding issues.

<http://www.rcgp.org.uk/clinical-and-research/toolkits/~media/Files/CIRC/Safeguarding-Children-Toolkit-2014/RCGP-NSPCC-Safeguarding-Children-Toolkit.ashx>

Practices can use this toolkit to produce a more concise practice specific safeguarding protocol.

12) Training Requirements for Primary Care Staff

All GPs and primary care staff needs to ensure that they have adequate training in safeguarding children which is appropriate to the role. This is quite a complex area which often causes some confusion.

The joint colleges produced and intercollegiate document on the roles and competencies for health care staff which gives definitive guidance.

[http://www.rcpch.ac.uk/sites/default/files/page/Safeguarding%20Children%20-%20Roles%20and%20Competences%20for%20Healthcare%20Staff%20%2002%200%20%20%20\(3\)_0.pdf](http://www.rcpch.ac.uk/sites/default/files/page/Safeguarding%20Children%20-%20Roles%20and%20Competences%20for%20Healthcare%20Staff%20%2002%200%20%20%20(3)_0.pdf)

Bristol CCG safeguarding team has tried to produce a training matrix which summarises requirements for practice staff. This can be seen in appendix 3 (Page 21) of Bristol CCG safeguarding children policy document;

https://www.bristolccg.nhs.uk/media/medialibrary/2015/09/safeguarding_children_policy.pdf

GMC guidance for doctors

The GMC has produce guidance for practitioners outlining their responsibilities in protecting children and young people:

http://www.gmc-uk.org/guidance/ethical_guidance/13257.asp

Guidance for GPs on specific topics

Recent local and national SCRs have highlighted recurrent themes in safeguarding children and young people. The safeguarding team aims to incorporate these themes into our training programme. The following sections aim to sign-post to current guidelines and information.

13) Child Sexual Exploitation (CSE)

Child sexual exploitation is a form of sexual abuse. Children in exploitative situations may receive gifts, money or drugs for performing sexual activity or maybe tricked into believing they are in a consensual loving relationship. They may be groomed online, at school or during out of school activities. Exploitation may be by individual abusers who may be part of a peer group or by much older individuals. Exploitation may be by organised groups of abusers.

Following recent high profile cases and SCRs a tool has been produced to help clinicians identify young people at risk of CSE.

Spotting the Signs of CSE;

<https://www.bashh.org/documents/Spotting-the-signs-A%20national%20proforma%20Apr2014.pdf>

The NSPCC website has useful information and links;

<https://www.nspcc.org.uk/search/?query=child+sexual+exploitation>

Resources and support for parents

<http://paceuk.info>

Further information and research

<https://www.rip.org.uk/>

In Bristol a serious case review was held following the sexual exploitation of a number of young people by an organised group of men convicted of a range of the sexual offences under Operation Brooke;

<https://www.bristol.gov.uk/documents/20182/34760/Serious+Case+Review+Operation+Brooke+Overview+Report/3c2008c4-2728-4958-a8ed-8505826551a3>

14) Online safety

Several serious case reviews including some into CSE have highlighted the dangers that some young people experience using social media, smartphone apps and Internet sites.

The following resources may be useful to clinicians and young people and their families.

CEOP's website gives the advice and information for a young people, families and professionals to help young people stay safe online. It has guidelines and regulations about sending indecent images (selfies and sexting) and has training and resources for professionals.

<https://www.thinkuknow.co.uk/>

Barnardos against sexual exploitation (BASE) it is a service provided for young people in Bristol and surrounding areas.

<http://www.barnardos.org.uk/basebristol.htm>

ChildLine has developed a website for young people with they can access advice and counselling

<https://www.childline.org.uk/>

15) FGM – female genital mutilation

FGM is a form of child abuse and is illegal in the UK. There is a national drive to protect young people from FGM.

When a young person is identified as being at risk of FGM a referral should be made through local safeguarding procedures.

There are also specific legal and contractual requirements regarding reporting and recording of FGM. Guidance around these issues has been sent to practices and can also be accessed through the following links;

Good source of information and background data:

<http://www.dofeve.org>

Government FGM guidance for professionals:

<https://www.gov.uk/government/collections/female-genital-mutilation-fgm-guidance-for-healthcare-staff>

NSPCC guidance:

<https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/female-genital-mutilation-fgm/>

Mandatory reporting of FGM – government guidance:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/472690/FGM_poster.pdf

Mandatory recording of FGM:

<http://digital.nhs.uk/fgm>

(FGM) Bristol has been at the forefront of public campaigns coordinated by the group of young people – Integrate Bristol.

<http://integratebristol.org.uk/>

16) Injuries to non –mobile babies

See link to BNSSG protocol produced following a SCR into the death of a baby in South Gloucestershire:

<https://www.bristol.gov.uk/documents/20182/35012/Multi-agency%20guidance%20for%20injuries%20in%20non-mobile%20children%202015.pdf/b596e43b-0e12-4608-83fe-2ffd1b040026>

Body maps for recording marks and injuries can be downloaded:

http://sites.southglos.gov.uk/safeguarding/wp-content/uploads/sites/221/2016/04/Body_Mapsfinal-2016.pdf

17) Domestic Violence and Abuse (DVA)

DVA is strongly associated with child abuse – see link below for information on local procedures:

<https://www.bristol.gov.uk/documents/20182/35012/domestic%20abuse.pdf/301a20cb-f875-4c5c-9b5a-7eabaed85e8c>

18) Prevent Strategy

The government is promoting a national strategy to identify young people at risk of radicalisation – this includes radicalisation of young women and girls involving sexual exploitation:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/215253/dh_131912.pdf

HM August 2016

Contents - by section

Allegations against professionals - 5
Bristol CCG Safeguarding Team - 1
Case conference reports and meetings - 8
Child protection procedures – 2
CSE – 13
Domestic Violence and Abuse (DVA) - 17
FGM – 15
Identification of risks and concerns (coding and scanning) – 6
Link/Lead GPs - 3
Non-mobile babies – suspected injury protocol - 16
On-line safety - 14
Practice safeguarding protocols - 11
Prevent strategy - 18
Referral Thresholds – 4
Serious case reviews - 10
Signs of safety - 9
Strategy discussions- 7
Training requirements - 12