

## **NHS Cheshire CCGs Safeguarding Children Policy**

**Cheshire CCGs *Safeguarding Children Policy***

**Effective from: 13 November 2019**

**Applies to all employees of NHS Eastern Cheshire CCG, NHS South Cheshire CCG, NHS Vale Royal CCG and NHS West Cheshire CCG**

This document will be read in conjunction with:

[Safeguarding Children, Young People and Adults at Risk in the NHS: Safeguarding Accountability and Assurance Framework 2019](#)

[Working Together to Safeguard Children A guide to inter-agency working to safeguard and promote the welfare of children \(HM Government, 2018\)](#)

[Statutory Guidance on Promoting the Health and Well-being of Looked After Children \(Department of Health, 2015\)](#)

[Safeguarding Children and Young People: Roles and competences for health care staff Intercollegiate Document \(2019\)](#)

[Looked after Children: Knowledge, skills and competences of health care staff Intercollegiate Role Framework \(March 2015\)](#)

[Cheshire East Local Safeguarding Children Board policies and procedures](#)

[Cheshire West and Chester Local Safeguarding Children Board policies and procedures](#)

[Children and Social Work Act 2017](#)

<b>Policy Revisions and Amendments</b>			
<b>Date</b>	<b>Section</b>	<b>Reason for Change</b>	<b>Approved By</b>
17.10.19	All sections	Amalgamation of safeguarding children policies to cover all 4 CCGS. Updating links.	
	Section 14	New safeguarding partnership arrangements replacing Local Safeguarding Children Boards.	
	Appendix A	Updates Child Practice Safeguarding Reviews replacing Serious Case Reviews What to do flowchart updated to reflect new CCG structure	

<b>Policy Obsolete</b>		
<b>Date</b>	<b>Reason</b>	<b>Approved By</b>

## Contents

01. Introduction.....	4
02. What Our Commitment Means .....	4
03. Scope and Purpose of The Policy .....	5
04. Roles, Responsibilities and Duties of Staff.....	6
05. Quality and Performance Committee.....	12
06. Confidentiality and Information Sharing .....	12
07. What To Do if You Are Worried That A Child Is Being Abused .....	13
08. Domestic Violence and Abuse.....	14
09. Responding to Allegations Against People Who Work With Children (people in a position of trust)	14
10. Dispute Resolution.....	15
11. Safeguarding Children Quality and Audit .....	16
12. Involvement of Service Users .....	16
13. Safeguarding Children Training .....	16
14. Child Safeguarding Practice Reviews.....	17
15. Categories of Abuse.....	18
16. References and Internet Links .....	19
17. Appendix A Flowchart.....	23
18. Appendix B Training Chart .....	24
Governance Back Page .....	25

## **01. Introduction**

NHS Cheshire Clinical Commissioning Groups (CCGs) are committed to safeguarding and promoting the welfare of children and young people.

NHS Cheshire Clinical Commissioning Groups as with NHS bodies and other local organisations have a duty under section 11 of the Children Act 2004 to ensure that they consider the need to safeguard, and promote the welfare of children when carrying out their functions. The responsibility for this join up locally rests with the three safeguarding partners (local authority, CCGs and Chief Officer of police) who have a shared and equal duty to make arrangements to work together to safeguard and promote the welfare of all children in the local area (Working Together to Safeguard Children, 2018).

In discharging these statutory duties / responsibilities we must take account of:

- a) Safeguarding Vulnerable People in the Reformed NHS Accountability and Assurance Framework (NHS England, 2015).
- b) Working Together to Safeguard Children A guide to inter-agency working to safeguard and promote the welfare of children (HM Government, 2018).
- c) Statutory Guidance on Promoting the Health and Well-being of Looked After Children (Department of Health, 2015).
- d) Children and Social Work Act 2017.
- e) The policies and procedures of Cheshire East Local Safeguarding Children Board
- f) The policies and procedures of Cheshire West and Chester Local Safeguarding Children Board

As commissioning organisations we are responsible for the provision of effective clinical, professional and strategic leadership to child safeguarding, including the quality assurance of safeguarding through our contractual arrangements with all provider organisations and agencies, including independent providers. We also have responsibilities for looked after children and for supporting the Pan Cheshire Child Death Overview Process.

We will ensure we work closely with NHS England through our regional team to ensure there are effective safeguarding and looked after children arrangements across the local health community.

This policy details the roles and responsibilities of NHS Cheshire Clinical Commissioning Groups as commissioning organisations, and that of its employees.

This policy is mandatory for all employees of the Clinical Commissioning Groups, including Governing Body members.

## **02. What Our Commitment Means**

In developing this policy NHS Cheshire Clinical Commissioning Groups recognise that safeguarding children is a shared responsibility with the need for effective joint working between agencies and professionals that have different roles and expertise. This is crucial in protecting the most vulnerable groups in society from harm. In order to achieve effective joint working there must be constructive relationships at all levels.

This will be promoted and supported by NHS Cheshire Clinical Commissioning Groups by having:

- a) The commitment of Governing Body members and senior managers to safeguard children.
- b) Clear lines of accountability for the commissioning and / or provision of services designed to safeguard and promote the welfare of children.
- c) A senior board level lead with the required knowledge, skills and expertise or sufficiently qualified and experienced to take leadership responsibility for the organisations safeguarding arrangements.
- d) A culture of listening to children and taking account of their wishes and feelings, both in individual decisions and the development of services.
- e) Clear whistleblowing procedures in place and creating an environment where staff feel able to raise concerns, and feel supported in their safeguarding role.
- f) Clear escalation policies for staff to follow when their child safeguarding concerns are not being addressed within their own organisation or by other agencies
- g) Arrangements in place for interagency working and effective arrangements for information sharing.
- h) Appropriate supervision and support for staff including undertaking safeguarding training and mandatory induction.
- i) Safe working practices in place including recruitment and vetting procedures.
- j) The expertise of a Designated Nurse and Doctor for Safeguarding Children and for Looked after Children and a Designated Paediatrician for unexpected deaths in childhood, aligned to each Clinical Commissioning Groups.
- k) A culture of safety, equality and protection in the services we commission / provide.
- l) Supporting improvements to the quality of primary medical care. The Designated Professionals and Named GPs for Safeguarding Children will contribute to this improvement through safeguarding training, multi-agency audit of practice and the dissemination of lessons learnt through learning reviews to GP practices.

### **03. Scope and Purpose of The Policy**

The Safeguarding Children Policy sets out NHS Cheshire Clinical Commissioning Groups approach to ensure that:

- a) No act or omission on behalf of the organisations puts a child inadvertently at risk.
- b) Rigorous systems are in place to proactively safeguard and promote the welfare of children from abuse, or the risk of abuse.
- c) Support is available to staff in fulfilling their obligations.

This policy applies to all employers and employees of NHS Cheshire Clinical Commissioning Groups, including Governing Body members.

#### **04. Roles, Responsibilities and Duties of Staff**

**Chair** - The Chair is responsible for the effective operation of the Governing Body with regard to child protection and safeguarding children and young people and looked after children and care leavers. The key responsibilities of the Chair are to:

- a) Ensure the role and responsibilities of NHS Cheshire Clinical Commissioning Groups in relation to child protection / safeguarding and looked after children and care leavers are met.
- b) Promote a positive culture of safeguarding children and looked after children and care leavers across the Governing Body through assurance that appropriate policies and procedures are in place and are being followed (safe recruitment, whistle blowing, safeguarding children) and that staff are aware NHS Cheshire Clinical Commissioning Groups takes child protection seriously and will respond to concerns about the welfare of children.
- c) Ensure there are robust governance processes in place to provide assurance on safeguarding / child protection and looked after children and care leavers.
- d) Ensure good information sharing between NHS Cheshire Clinical Commissioning Groups Governing Body and senior management on safeguarding, child protection and looked after children and care leavers.

**Accountable Officer** - As Accountable Officer, the Chief Officer of NHS Cheshire Clinical Commissioning Groups is responsible for providing strategic leadership / providing a culture of supporting good practice with regard to child protection / safeguarding and looked after children within the organisation and promoting collaborative working with other agencies. The key responsibilities of the Accountable Officer are to:

- a) Ensure the role and responsibilities of the Governing Body in relation to child protection, safeguarding and children in care and care leavers are met.
- b) Be jointly and equally accountable with safeguarding partners (local authority and chief officer of police) for local safeguarding arrangements. Should this responsibility be delegated to a Governing Body lead they remain accountable for any action or decision taken on behalf of the Clinical Commissioning Groups.
- c) Ensure the organisations adhere to relevant national guidance and standards for child protection, safeguarding and looked after children and care leavers.
- d) Promote a positive culture of safeguarding children, including ensuring there are appropriate policies and procedures in place (safe recruitment, whistle blowing and safeguarding children) which are regularly updated, and that service users are aware NHS Cheshire Clinical Commissioning Groups take child protection seriously and will respond to concern about the welfare of children.
- e) Appointed Executive Director of Quality and Patient Experience with responsibility for safeguarding as the Executive Director lead for safeguarding and looked after children and care leavers.

- f) Promote good child protection and safeguarding practice throughout the organisations.
- g) Provide appropriate access to advice from Designated Professionals.
- h) Ensure effective child protection, safeguarding and looked after children training and supervision is resourced and delivered.
- i) Ensure that the health contribution to safeguarding and promoting the welfare of children is discharged effectively across the whole local health economy covered by NHS Cheshire Commissioning Groups through commissioning arrangements and in line with the statutory duties of *Working Together to Safeguard Children statutory guidance* (HM Government, 2018).
- j) Ensure appropriate, safe, multiagency / interagency partnership working practices and information sharing practices operate within NHS Cheshire Clinical Commissioning Groups.

**Executive Director of Quality and Patient Experience with responsibility for Safeguarding** has been identified as the Director Lead by the Chief Accountable Officer. The Director Lead is responsible for child protection, safeguarding and looked after children and care leaver issues. The Executive Director of Quality and Patient Experience with responsibility for Safeguarding will provide leadership in the long term strategic planning for safeguarding / child protection, looked after children and care leaver services for children across the organisations supported by the Designated Professionals. The key responsibilities of the Executive Director Lead is to:

- a) Ensure that safeguarding is positioned as core business in strategic and operating plans and structures and is closely linked to the Joint Strategic Needs Assessment.
- b) Oversee, implement and monitor the ongoing assurance of safeguarding and looked after children and care leavers arrangements.
- c) Ensure the adoption, implementation and auditing of policy and strategy in relation to safeguarding and looked after children and care leavers.
- d) Ensure the appointment of Designated Professionals.
- e) Ensure that provider organisation safeguarding and looked after children and care leaver arrangements are quality assured.
- f) Ensure support of the designated professionals in implementing safeguarding and looked after children and care leaver arrangements.
- g) Ensure there is a programme of training and mentoring to support those with responsibility for safeguarding and looked after children and care leavers.
- h) Work in partnership with other organisations and agencies to secure high quality, best practice in child protection, safeguarding children and looked after children and care leavers.
- i) Ensure that serious incidents related to safeguarding are reported immediately and managed effectively.

- j) Ensure that contract specifications drawn up with NHS Cheshire Clinical Commissioning Groups as commissioning organisations include clear service standards for safeguarding children. These service standards, 'NHS Cheshire Clinical Commissioning Groups Commissioned Services Standards for Safeguarding Children and Vulnerable Adults, (2019)' include standards for training, policies, and provide links to the Safeguarding Children Partnership. The service standards are monitored through a safeguarding assurance framework.
- k) Ensure that all staff within the organisation have safeguarding children training at the required level as defined in the *Safeguarding Children and Young People: Roles and competences for health care staff Intercollegiate Document (2019)*, *Looked after Children: Knowledge, skills and competences of health care staff Intercollegiate Role Framework (March 2015)* and in line with the NHS Cheshire Clinical Commissioning Groups Safeguarding Children Training Strategy (2019-21).
- l) Ensure that there are arrangements in place to 'hear the voice of the child' in safeguarding and looked after children and care leaver services.
- m) Ensure that arrangements are in place for the NHS Cheshire Clinical Commissioning Groups to commission appropriate services for looked after children including initial and review health assessments, and that robust health plans are in place for any child looked after by both Local Authorities.
- n) Present the annual safeguarding children and looked after children and care leavers reports to the Governing Body members.
- o) Appoint and performance manage the Designated Doctors and Nurses for Safeguarding Children and Looked after Children and care leavers.

**Lay Members** - The lay members' key responsibilities are to:

- a) Provide scrutiny and challenge to the CCGs in respect of their arrangements to safeguard and promote the welfare of children and young people, including those in care.
- b) Acts as a champion for children and young people, including those in care.

**Designated Doctors and Nurses For Safeguarding Children** - The Designated Doctors and Nurses for Safeguarding Children responsibilities are to:

- a) Promote excellent professional practice in NHS Cheshire Clinical Commissioning Groups.
- b) Provide expert advice to all health professionals, both local authorities (Cheshire East and Cheshire West and Chester), and the two Safeguarding Children Partnerships in both Local Authority areas.
- c) Provide strategic advice and guidance to NHS Cheshire Clinical Commissioning Groups Governing Bodies.
- d) Take the strategic lead on all aspects of safeguarding and child protection, including Child Exploitation, Female Genital Mutilation, Domestic Abuse and other harmful practices that are identified in any future national guidance.

- e) Co-operate with other agencies (including voluntary and private healthcare organisations) to promote the welfare of children and young people.
- f) Provide advice to ensure the range of services commissioned by NHS Cheshire Clinical Commissioning Groups take account of the need to safeguard and promote the welfare of children.
- g) Ensure that service plans / specifications / contracts / invitations to tender include references to the standards expected for safeguarding children.
- h) Provide advice on the monitoring of the safeguarding aspects of NHS Cheshire Clinical Commissioning Groups contracts.
- i) Provide advice, support and clinical supervision to the Designated Professional Looked after Children and Care Leaver, Named GP and the Deputy Designated Nurse in the Clinical Commissioning Groups and named professionals in each provider organisation.
- j) Provide skilled advice to both Safeguarding Children Partnerships on all health issues and contribute to the work of the Safeguarding Children Partnership through the relevant boards and their sub groups.
- k) Be fully involved in the new safeguarding arrangements (Working Together to Safeguard Children, 2018).
- l) Promote, influence, and develop relevant training, on both a single and inter-agency basis to ensure the training needs of health staff are addressed.
- m) Ensure that all NHS Cheshire Clinical Commissioning Groups staff are aware that people using services might be suffering from abuse and that they need to exercise vigilance to mitigate against risk. They should be trained and competent to be alert to the potential indicators of abuse and neglect and know how to act on those concerns in line with local guidance.
- n) Provide skilled professional involvement in child safeguarding processes in line with Cheshire East / Cheshire West and Chester Safeguarding Children Partnerships procedures.
- o) Provide expert health input to multi-agency safeguarding initiatives and developments.
- p) Contribute to national or local child safeguarding practice reviews and multi-agency case audits.
- q) Contribute to the dissemination of learning from child safeguarding practice reviews and audits to all NHS Cheshire Clinical Commissioning Groups staff and health providers when appropriate.
- r) Liaise with NHS England North on safeguarding children arrangements
- s) Support the planning of training programmes for independent contractors.

- t) Work with NHS England North and NHS Cheshire Clinical Commissioning Groups work on all aspects of safeguarding and child protection, including Child Exploitation, Female Genital Mutilation, Domestic Abuse and other harmful practices.

**The Designated Doctors** for Safeguarding Children are employed by provider organisations but have a reporting link to the Executive Director of Quality and Patient Experience with responsibility for Safeguarding with regard to the designated role.

**Designated Nurse And Doctors For Looked after Children and Care Leavers** - The Designated Doctors and Nurse for Looked after Children and Care Leavers responsibilities are to:

- a) Provide strategic and clinical leadership.
- b) Provide expert advice to all health professionals, both local authorities, and the Safeguarding Children Partnership and the Corporate Parenting Committee in the respective Local Authority areas.
- c) Provide advice on services commissioned by NHS Cheshire Clinical Commissioning Groups for looked after children and care leavers.
- d) Ensure arrangements are in place to monitor the quality of health assessments completed with looked after children and care leavers.
- e) Work with the Local Authorities to improve outcomes for looked after children and care leavers.

**Managers** - The responsibility of Managers is to:

- a) Ensure staff can access safeguarding children procedures, policies and guidance.
- b) Support staff who instigate whistleblowing and escalation procedures.
- c) Ensure staff, are aware of their responsibilities under this policy, and that it is fully implemented within their area of responsibility.
- d) Provide leadership to staff.
- e) Ensure that staff work, effectively with professionals from other agencies and organisations.
- f) Ensure operational implementation of this policy into practice and taking appropriate action should any breach of this policy take place.
- g) Ensure that service plans / specifications / contracts include reference to the safeguarding standards expected for safeguarding children.
- h) Commissioning managers will ensure safeguarding arrangements are considered during the development and commissioning of services.
- i) Contract managers will ensure the *Commissioned Services Standards for Safeguarding Children and Adults at Risk (2019)* are included in provider contracts and that a process is in place to ensure the timely return of completed audits so that the safeguarding assurance process can be implemented.

- j) Ensure that the recruitment and selection process guidance is followed during recruitment of staff working with children, or handling information on children, including that references are always verified, a full employment history is always available with satisfactory explanations for any gaps in employment history, that qualifications are checked and that Disclosure and Barring Checks are undertaken in line with national and local guidance.
- k) Ensure staff, attend safeguarding children and looked after children training at the appropriate level according to their responsibilities to safeguard and promote the welfare of children.
- l) Ensure that safeguarding and looked after children training is discussed with staff during annual Performance Development Reviews and included in individual staff development plans.
- m) Ensure staff, are released from their work area to attend single and multi-agency safeguarding children and looked after children and care leavers training according to staff roles and responsibilities.
- n) Ensure safeguarding responsibilities are reflected in all job descriptions and the Knowledge and Skills Framework (KSF) relevant to the job role.

**Individual Staff Members** - The responsibility of individual staff members is to:

- a) Be alert to the potential indicators of abuse or neglect in children and know how to act on those concerns in line with local guidance.
- b) Take part in training, including attending regular updates so that they maintain their skills and are familiar with procedures aimed at safeguarding children and children in care.
- c) Understand the principles of confidentiality and information sharing in line with local and government guidance.
- d) When requested, to contribute to multi-agency meetings that takes place to safeguard and protect children.
- e) Be aware of and utilise escalation and whistleblowing policies when child safeguarding concerns are not being addressed within the organisation or by other agencies.
- f) Discuss with their line manager when they are aware of circumstances, difficulties or problems in their working life which may adversely affect their working relationships and ability to safeguard children. This should be discussed with their line manager so that appropriate support can be provided.

**Staff members** who are employed or contracted but do not directly deliver services to individuals are expected to act in accordance with:

Cheshire East Safeguarding Children Partnership procedures  
<http://www.cheshireeastlscb.org.uk/homepage.aspx>

Cheshire West and Chester Safeguarding Children Partnership procedures  
<http://www.cheshirewestlscb.org.uk/>

Working Together (2018) national guidance

<https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>

Where they identify a concern related to the safety and welfare of a child or young person.

**Appendix 1** identifies the specific actions required by individual staff members who have a concern about a child's safety and welfare.

## **05. Quality and Performance Committee**

The NHS Cheshire Clinical Commissioning Groups Quality and Safeguarding Committees are responsible for:

- a) Receiving safeguarding children, looked after children and care leaver reports on a quarterly basis. The reports will include safeguarding children and looked after children information, progress reports, safeguarding children dashboard and safeguarding children standards annual audit reports by exception.
- b) Receiving information and updates from the Safeguarding Children Partnerships including lessons learned from incidents reported to the Safeguarding Children Partnerships that lead to national and local Child Safeguarding Practice Reviews.
- c) Receiving and monitoring updates on external safeguarding reviews, including Care Quality Commission safeguarding reviews and inspections.

## **06. Confidentiality and Information Sharing**

Effective sharing of information between the Clinical Commissioning Groups practitioners and local organisations and agencies is essential for early identification of need, assessment and service provision to keep children safe.

Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare and protect the safety of children which must always be the paramount concern.

All staff should aim to gain consent to share information but should be mindful of situations where to do so would place a child at increased risk of harm. Information may be shared without consent if a practitioner believes there is good reason to do so, and that the sharing of information will enhance the safeguarding of a child in a timely manner.

All practitioners should be confident in the process and conditions under the Data Protection Act 2018 and the General Data Protection Regulations (GDPR) which allow them to store and share information for safeguarding purposes.

There are some circumstances when employees may be expected to share information about a child, for example when child abuse is alleged or suspected. In such cases individuals have a duty to pass information on without delay in line with the Safeguarding Children Partnership's procedures. Employees must document when, with whom and for what purpose information was shared.

Disclosure should be justified in each case and guidance should be sought from the Designated and Named Professionals for Safeguarding Children in cases of uncertainty.

The Designated Professionals may seek guidance from NHS Cheshire Clinical Commissioning Groups legal representatives.

Useful information sharing advice for practitioners providing safeguarding services to children, young people, parents and carers is available on the following website:

<https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice>

## **07. What To Do if You Are Worried That A Child Is Being Abused**

All staff should exercise vigilance in their work to mitigate, against the risk that children using NHS Cheshire Clinical Commissioning Groups services might be suffering from abuse. If any member of staff becomes concerned that a child may be suffering from abuse or neglect they must follow the guidance set out in the flow chart “What to do if you are worried that a child is being abused.” If in need of advice you should contact the Designated Nurse or Doctor for Safeguarding Children. **See Appendix A**

All staff including those commissioning services for children and young people need to be aware of the additional vulnerabilities of some children and to be alert to the potential need for early help for a child who:

- a) is disabled and has specific needs  
[Children and Families Act 2014](#)
- b) has special educational needs (whether they have a statutory educational, health and care plan)
- c) is a young carer  
[Cheshire Young Carers UK - Support for Young Carers | CYC](#)
- d) is showing signs of being drawn into anti-social or criminal behaviour, including gang involvement and association with organised crime groups
- e) is frequently missing from care or from home  
[Children who run away or go missing from home or care - GOV.UK](#)
- f) is at risk of modern slavery, trafficking or exploitation
- g) is at risk of being radicalised or exploited  
[Protecting children from radicalisation: the prevent duty - GOV.UK](#)
- h) is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse
- i) is misusing drugs or alcohol themselves
- j) has returned home to their family from care
- k) is a privately fostered child - Private fostering occurs when a child under the age of 16 (under 18, if disabled) is provided with care and accommodation by a person who is not a parent, person with parental responsibility for them or a relative in their own home. A child is not privately fostered if the person caring for and accommodating them has done so for less than 28 days and does not intend to do so for longer.

- l) Children at risk of forced marriage and honour based violence.  
<https://www.gov.uk/guidance/forced-marriage>

## **08. Domestic Violence and Abuse**

The Home Office defines domestic violence and abuse as:

'Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to: psychological, physical, sexual, financial, or emotional.

Controlling behaviour is: a range of acts designed to make a person subordinate and / or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour is: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.'

The Government definition, which is not a legal definition, includes so called 'honour' based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group.

Domestic abuse affects significant numbers of children and young people and their families causing immediate harm as well as damaging future life chances. NHS Cheshire Clinical Commissioning Groups will have a view to this when commissioning services in line with the Cheshire Domestic Abuse Partnership Strategies:

Cheshire East

[http://www.proceduresonline.com/pancheshire/cheshire\\_east/contents.html](http://www.proceduresonline.com/pancheshire/cheshire_east/contents.html)

Cheshire West

[http://www.proceduresonline.com/pancheshire/cheshire\\_west/contents.html](http://www.proceduresonline.com/pancheshire/cheshire_west/contents.html)

NHS Cheshire Clinical Commissioning Groups as members of the Safeguarding Children Partnership will follow the multi-agency guidance set out in their policies and procedures:

Cheshire East:

[http://www.proceduresonline.com/pancheshire/cheshire\\_east/p\\_dom\\_viol\\_abuse.html](http://www.proceduresonline.com/pancheshire/cheshire_east/p_dom_viol_abuse.html)

Cheshire West:

[http://www.proceduresonline.com/pancheshire/cheshire\\_west/p\\_dom\\_viol\\_abuse.html](http://www.proceduresonline.com/pancheshire/cheshire_west/p_dom_viol_abuse.html)

## **09. Responding to Allegations Against People Who Work With Children (people in a position of trust)**

Organisations and agencies working with children and families should have clear policies for dealing with allegations against people who work with children. Such policies should make a clear distinction between an allegation, a concern about the quality of care or practice or a complaint. An allegation may relate to a person who works with children who has:

- behaved in a way that has harmed a child, or may have harmed a child
- possibly committed a criminal offence against or related to a child

- behaved towards a child or children in a way that indicates they may pose a risk of harm to children

The Clinical Commissioning Groups should ensure that they have clear policies in place setting out the process, including timescales for investigation and what support and advice will be available to individuals against whom allegations have been made. Any allegation against people who work with children should be reported immediately to NHS Cheshire Clinical Commissioning Groups Executive Director of Quality and Patient Experience with responsibility for Safeguarding (Named Senior Officer) and / or the Designated Nurse for Safeguarding Children. In the case of General Practitioners, the Chief Accountable Officer should be notified in the first instance. Allegations of abuse made against a worker will be discussed with / referred to both Local Authorities Designated Officer in accordance with Safeguarding Children Partnerships procedures.

Allegations of abuse made against a worker will be discussed with / referred to the Local Authority Designated Officer in accordance with Safeguarding Children Partnerships procedures.

Further guidance can be found on Cheshire East and Cheshire West and Chester Safeguarding Children Partnerships website:

<http://www.cheshireeastscb.org.uk/pdf/lado-one-minute-guide.pdf>

<http://cheshirewestscb.org.uk/policy-and-practice/allegations-management-lado/>

If NHS Cheshire Clinical Commissioning Groups removes an individual (paid worker or unpaid volunteer) from work in regulated activity with children (or would have, had the person not left first) because the person poses a risk of harm to children, a referral must be made to the Disclosure and Barring Service to consider whether to add the individual to the barred list. This applies irrespective of whether a referral has been made to the local authority children's social care and or the designated officer or team of officers. It is an offence to fail to make a referral without good reason.

The following document provides clear advice on appropriate and safe behaviours for all adults working with children in paid or unpaid capacities, in all settings and in all contexts:

<http://cheshirewestscb.org.uk/wp-content/uploads/2015/06/Guidance-for-Safer-Working-Practice-reduced.pdf>

## **10. Dispute Resolution**

Safeguarding partners and relevant agencies must act in accordance with the arrangements for our area and will be expected to work together to resolve any disputes locally.

Designated professionals should be made aware of any professional or interagency disagreements. If the matter cannot be resolved then a professional meeting should be instigated according to Safeguarding Children Partnerships procedures.

The Pan-Cheshire Multi-Agency Escalation Procedure is available on the website:

Cheshire East

<http://www.cheshireeastscb.org.uk/professionals/escalation.aspx>

Cheshire West

<http://cheshirewestscb.org.uk/policy-and-practice/escalation-and-resolution-policy/>

## **11. Safeguarding Children Quality and Audit**

NHS Cheshire Clinical Commissioning Groups have a process in place to ensure that all service plans / specifications / contracts / invitations to tender include reference to the standards expected for safeguarding children.

The *Commissioned Services Standards for Safeguarding Children and Adults at Risk* (2019) safeguarding children audit tools will be formally issued by NHS Cheshire Clinical Commissioning Groups to all applicable organisations at the contract meeting. The audit tool will be completed by the provider organisation and all standards rated Red, Amber or Green (RAG rated). An action plan is expected to be submitted with the completed audit tool to address all Amber and Red rated standards. The safeguarding self-assessment audit will be repeated annually.

Following return of the annual safeguarding self-assessment audit by healthcare providers, NHS Cheshire Clinical Commissioning Groups will be reviewed and action plans monitored.

Main providers will complete and return a quarterly Safeguarding Children Dashboard, including the safeguarding audit standards action plan updates when appropriate. Exceptions are reported via quarterly exception reporting arrangements and monitored through quality assurance meetings with providers.

NHS Cheshire Clinical Commissioning Groups will contribute to Cheshire East and Cheshire West and Chester Safeguarding Children Partnerships multi-agency safeguarding audits through the Designated Professionals. The Clinical Commissioning Groups will provide assurance to the Safeguarding Children Partnerships that their statutory safeguarding responsibilities are in place through Section 11 audits and report to the Board as requested.

## **12. Involvement of Service Users**

NHS Cheshire Clinical Commissioning Groups are committed to listening to the voice of children and young people in the commissioning and redesign of health services.

NHS Cheshire Clinical Commissioning Groups will promote this culture through engagement with service users, child participation groups, HealthWatch Cheshire and involving young people in activities including staff interview panels.

Children's views and opinions will also be heard through provider organisation audits, Safeguarding Children Partnerships multi-agency case audits and looked after children and care leaver forums.

## **13. Safeguarding Children Training**

NHS Cheshire Clinical Commissioning Groups have a Safeguarding Children Training Strategy. The training framework is in line with the recommendations of: *Safeguarding Children and Young People: Roles and Competencies for Health Care Staff* (Intercollegiate Document 2019) and *Looked after Children: Knowledge, skills and competences of health care staff* (Intercollegiate Role Framework March 2015).

Staff will be enabled to participate in training on safeguarding and promoting the welfare of children on both a single and interagency basis. The training will be proportionate and relevant to the roles and responsibilities of each staff member, as identified by their manager.

All staff will undertake level 1 e-learning training package as part of their induction programme. This will be completed within six weeks of taking up post within the Clinical Commissioning Groups. This should provide key safeguarding / child protection information, including vulnerable groups, the different forms of child maltreatment, and appropriate actions to take if there are concerns.

Following induction, the majority of Clinical Commissioning Groups staff, apart from the Chair, Chief Officer, Directors, Governing Body members including lay members and the Designated Professionals will require a 3 yearly update of safeguarding children level 1 training. This is available via an e-learning training package. However, managers should ensure that members of staff who fall into any other category as outlined in the training framework access the relevant single or multi-agency training.

The Chair, Chief Accountable Officer, Directors and Governing Body members will require level 1 training (or training commensurate to their role e.g. GPs require level 3 training) and Governing Body focused training.

All staff must access mandatory safeguarding training as outlined in **Appendix B**.

#### **14. Child Safeguarding Practice Reviews**

The purpose of a child safeguarding practice review is to identify improvements to be made in safeguarding and promoting the welfare of children. Learning is relevant locally but it has a wider importance for all practitioners working with families.

The Designated Professionals will disseminate learning from child safeguarding practice reviews across the health economy as appropriate.

NHS Cheshire Clinical Commissioning Groups have a statutory duty to work in partnership with the Safeguarding Children Partnership arrangements, in conducting local and national child safeguarding practice reviews in accordance with *Working Together to Safeguard Children (HM Government, 2018)*.

The Designated Safeguarding Professionals will inform NHS England North and the Care Quality Commission (CQC) when a child safeguarding practice review is commissioned.

NHS Cheshire Clinical Commissioning Groups will contribute fully to child safeguarding practice reviews which are commissioned by the Safeguarding Children Partnerships.

NHS Cheshire Clinical Commissioning Groups have a statutory duty to contribute to all children safeguarding practice reviews according to the methodology chosen by the Safeguarding Children Partnerships.

NHS Cheshire Clinical Commissioning Groups will ensure that the Designated Professionals' are given sufficient time and necessary support to participate in child safeguarding practice reviews.

The Governing Body must ensure the review and all their agreed actions following the review, are carried out according to the timescale set out by Cheshire East or Cheshire West and Chester Safeguarding Children Partnerships.

The Quality and Performance Committee will monitor the progress of identified recommendations and supporting action plans for issues relating to NHS Cheshire Clinical Commissioning Groups.

## 15. Categories of Abuse

For children's safeguarding, the definitions of abuse are taken from Working Together to Safeguard Children (HM Government, 2018). Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or an institutional or community setting, by those known to them or, more rarely, by a stranger. They may be abused by an adult or adults, or another child or children.

- a) **Physical abuse:** A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness to a child.
  
- a) **Emotional abuse:** The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.
  
- c) **Sexual abuse:** Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.
  
- d) **Neglect:** The persistent failure to meet a child's basic physical and / or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:
  - Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
  - Protect a child from physical and emotional harm or danger;
  - Ensure adequate supervision (including the use of inadequate care-givers);
  - Ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

## 16. References and Internet Links

In developing this Policy account has been taken of the following statutory and non-statutory guidance, best practice guidance and the policies and procedures of the Safeguarding Children Partnerships.

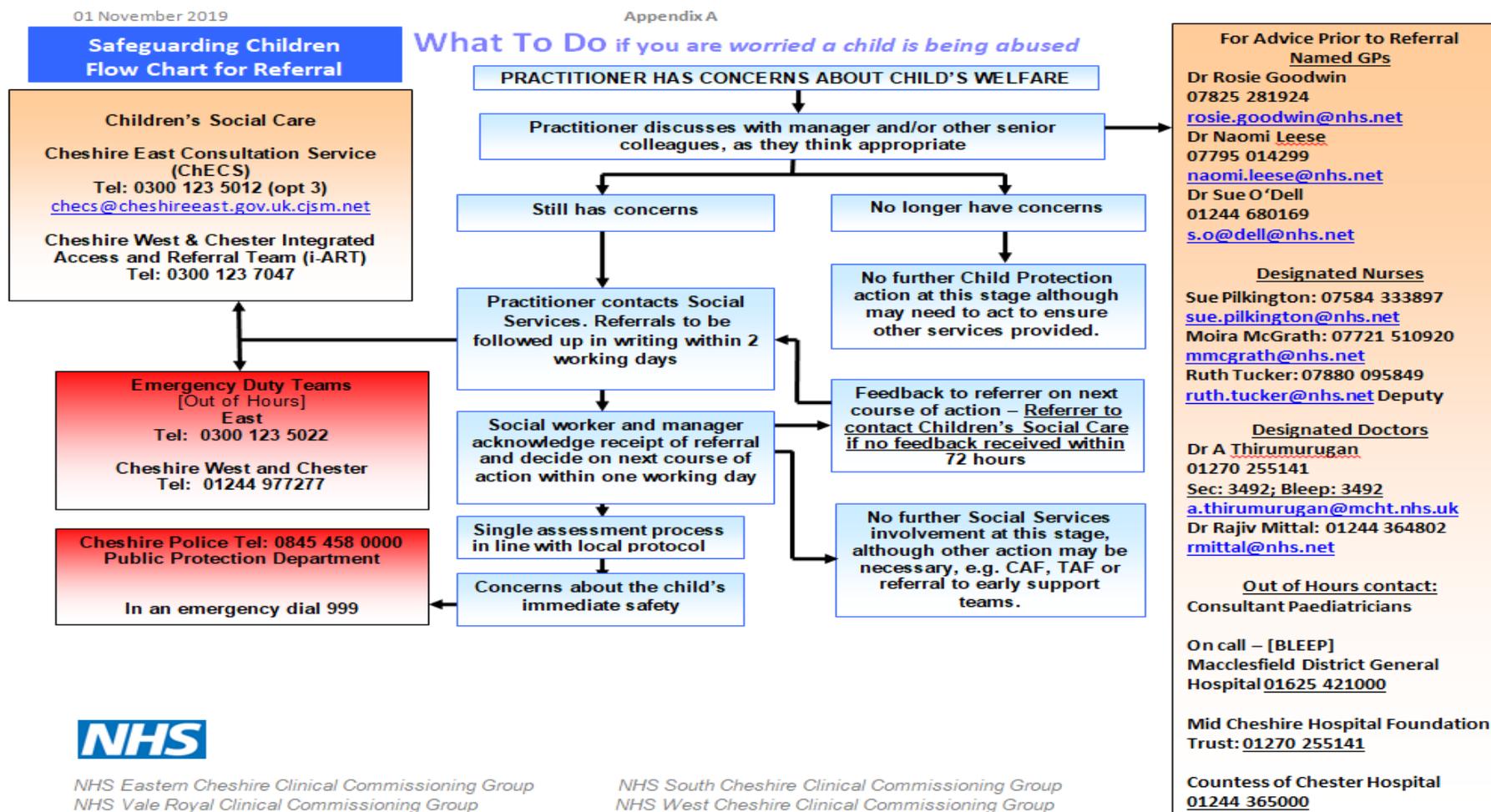
- a) British Dental Association *Home Page: Child protection and the dental team*  
<https://bda.org/childprotection>
- b) Cheshire East Local Safeguarding Children Partnership  
<http://www.cheshireeastlscb.org.uk/homepage.aspx>  
  
Cheshire West and Chester Safeguarding Children Partnership  
<http://www.cheshirewestlscb.org.uk>
- c) Children Act 1989 [www.opsi.gov.uk/acts/acts1989/ukpga\\_19890041\\_en\\_1](http://www.opsi.gov.uk/acts/acts1989/ukpga_19890041_en_1)
- d) Children Act 2004 [www.opsi.gov.uk/acts/acts2004/ukpga\\_20040031\\_en\\_1](http://www.opsi.gov.uk/acts/acts2004/ukpga_20040031_en_1)
- e) Children Rights and Alliance for England: *Children's Rights and the Law*  
<http://www.crae.org.uk/childrens-rights-the-law/>
- f) Child and Social Work Act 2017  
<http://www.legislation.gov.uk/ukpga/2017/16/contents/enacted/data.htm>
- g) Child Exploitation and Online Protection (CEOP) *Thinkuknow (Supporting children to stay safe online) home page website* <https://www.thinkuknow.co.uk/>
- h) Department of Education (2017) *Care of unaccompanied migrant children and child victims of modern slavery* <https://www.gov.uk/government/publications/care-of-unaccompanied-and-trafficked-children>
- i) Department of Education (2012) *Child abuse linked to faith or belief: national action plan* <https://www.gov.uk/government/publications/national-action-plan-to-tackle-child-abuse-linked-to-faith-or-belief>
- j) Department of Education (2017) *Child sexual exploitation: definition and guide for practitioners* <https://www.gov.uk/government/publications/child-sexual-exploitation-definition-and-guide-for-practitioners>
- k) Department of Education (2015) *Children Act 1989: care planning, placement and case review* <https://www.gov.uk/government/publications/children-act-1989-care-planning-placement-and-case-review>
- l) Department of Education (2014) *Children Act 1989: court orders*  
<https://www.gov.uk/government/publications/children-act-1989-court-orders--2>
- m) Department of Education (2005) *Children Act 1989: private fostering*  
<https://www.gov.uk/government/publications/children-act-1989-private-fostering>
- n) Department of Education (2014) *Children who run away or go missing from home or care statutory guidance* <https://www.gov.uk/government/publications/children-who-run-away-or-go-missing-from-home-or-care>

- o) Department of Education (2014) *Listening to and involving children and young people* <https://www.gov.uk/government/publications/listening-to-and-involving-children-and-young-people>
- p) Department of Education (2017) *Preventing bullying* <https://www.gov.uk/government/publications/preventing-and-tackling-bullying>
- q) Department of Education and Departments of Health, Special Educational Needs and Disabilities <https://www.gov.uk/childrens-services/special-educational-needs>
- r) Department of Education and Home Office (2017) *Safeguarding unaccompanied asylum seeking and refugee children policy paper* <https://www.gov.uk/government/publications/safeguarding-unaccompanied-asylum-seeking-and-refugee-children>
- s) Department of Health et al (2015) *Statutory guidance on Promoting the Health and well-being of Looked After Children*, Nottingham, DCSF publications <https://www.gov.uk/government/publications/promoting-the-health-and-wellbeing-of-looked-after-children--2>
- t) Department of Health (2017) Responding to domestic abuse A resource for health professionals [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/597435/DomesticAbuseGuidance.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/597435/DomesticAbuseGuidance.pdf)
- u) Department of Health (2013) *Handling cases of forced marriage: multi-agency practice guidelines (English)* <https://www.gov.uk/government/publications/handling-cases-of-forced-marriage-multi-agency-practice-guidelines-english>
- v) Department of Health *Identifying and supporting victims of human trafficking Guidance for health staff* [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/187041/A5\\_Human\\_Trafficking\\_Guidance\\_leaflet.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/187041/A5_Human_Trafficking_Guidance_leaflet.pdf)
- w) Department of Health and Social Care Information Centre (2015) *FGM enhanced dataset: guidance on NHS staff responsibilities* <https://www.gov.uk/government/publications/fgm-enhanced-dataset-guidance-on-nhs-staff-responsibilities>
- x) Disclosure and Barring Service Home Page <https://www.gov.uk/government/organisations/disclosure-and-barring-service>
- y) Disclosure and Barring Service (2017) *Making barring referrals to the DBS* <https://www.gov.uk/guidance/making-barring-referrals-to-the-dbs#contents>
- z) Foreign & Commonwealth Office and Home Office (2019) *home page* <https://www.gov.uk/guidance/forced-marriage>
- aa) HM Government (2015) *Child abuse concerns: guide for practitioners* <https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2>
- bb) HM Government (2018) *Information sharing advice for safeguarding practitioners* <https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice>

- cc) HM Government (2018) *Multi-agency statutory guidance on female genital mutilation* <https://www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genital-mutilation>
- HM Government (2016) *Female genital mutilation – raise awareness and provide advice* <https://www.gov.uk/government/collections/female-genital-mutilation>
- dd) HM Government (2015) *Prevent duty guidance* <https://www.gov.uk/government/publications/prevent-duty-guidance>
- ee) HM Government (2008) *Safeguarding children in whom illness is fabricated or induced* <https://www.gov.uk/government/publications/safeguarding-children-in-whom-illness-is-fabricated-or-induced>
- ff) HM Government (2011) *Safeguarding children who may have been trafficked* <https://www.gov.uk/government/publications/safeguarding-children-who-may-have-been-trafficked-practice-guidance>
- gg) HM Government (2018) *Working together to safeguard children*, DFE publications [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/729914/Working\\_Together\\_to\\_Safeguard\\_Children-2018.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/729914/Working_Together_to_Safeguard_Children-2018.pdf)
- hh) Home Office (2018) *Criminal exploitation of children and vulnerable adults: county lines* <https://www.gov.uk/government/publications/criminal-exploitation-of-children-and-vulnerable-adults-county-lines>
- ii) Home Office (2016) *FGM protection orders: factsheet* <https://www.gov.uk/government/publications/fgm-protection-orders-factsheet>
- jj) Home Office (2019) *Modern slavery documents working to end modern slavery* <https://www.gov.uk/government/collections/modern-slavery>
- kk) Home Office 2016 *Mandatory reporting of female genital mutilation: procedural information* <https://www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-procedural-information#history>
- ll) Infed YMCA George Williams College home page *Serious and Organised Crime Toolkit: An Interactive Toolkit for Practitioners working with young people* <http://infed.org/mobi/soctoolkit>
- mm) Ministry of Justice (2012 updated 2019) *Multi-agency public protection arrangements (MAPPA) guidance* <https://www.gov.uk/government/publications/multi-agency-public-protection-arrangements-mappa--2#history>
- nn) National Institute for Health and Clinical Excellence (2009 Updated 2017) *When to suspect child maltreatment* [www.nice.org.uk/nicemedia/pdf/CG89FullGuideline.pdf](http://www.nice.org.uk/nicemedia/pdf/CG89FullGuideline.pdf)
- oo) NHS England (2019) *Safeguarding Children, Young People and Adults at Risk in the NHS: Safeguarding Accountability and Assurance Framework 2019.* <https://www.england.nhs.uk/wp-content/uploads/2015/07/safeguarding-children-young-people-adults-at-risk-saaf-1.pdf>

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## 17. Appendix A Flowchart



## 18. Appendix B Training Chart

<b>Appendix B: SAFEGUARDING CHILDREN TRAINING CHART</b>			
<b>COURSE</b>	<b>FREQUENCY</b>	<b>STAFF</b>	<b>KNOWLEDGE, SKILLS, ATTITUDES AND VALUES AND COMMENTS</b>
<b><u>Induction Programme</u></b>	On commencement of employment	All staff	See Intercollegiate Documents (March 2019 and March 2015)
<b><u>Level 1</u></b>	Every 3 years for non-clinical staff.	All Clinical Commissioning Group staff (apart from those staff identified as requiring a different level - see below).	See Intercollegiate Documents (March 2019 and March 2015)
<b><u>Level 2</u></b>	4 hours over a 3 year period.	All staff whose work brings them directly into contact (however small) with children, young people, parents and carers.	See Intercollegiate Documents (March 2019 and March 2015)
<b><u>Level 3</u></b>	12 – 16 hours over a 3 year period	Clinical staff working with children, young people, parents and carers. This includes GPs, Practice Nurses and children continuing care team	See Intercollegiate Documents (March 2019 and March 2015)
<b><u>Level 4</u></b>	24 hours over a 3 year period	Specialist roles – named professionals	See Intercollegiate Documents (March 2019 and March 2015)
<b><u>Level 5</u></b>	24 hours over a 3 year period	Specialist roles - designated professionals	See Intercollegiate Documents (March 2019 and March 2015)
<b><u>Governing Body</u></b>	Every 3 years	Chair of the Governing Body, Chief Officer, Directors and Members	See Intercollegiate Documents (March 2014 and March 2015) (Level 1 e-learning and specific Governing Body learning)

## Governance Back Page

**Version:**

This is version 1.0 of the Cheshire CCGs having a shared policy for this subject. This document therefore supersedes the following previous versions that were in operation at the individual CCGs:

NHS Eastern Cheshire CCG: Current version 3.0

NHS South Cheshire CCG: Current version 4.0

NHS Vale Royal CCG: Current version 4.0

NHS West Cheshire CCG: Current version 8.0

**Date Issued:**

NHS Eastern Cheshire CCG: 13 November 2019

NHS South Cheshire CCG: 31 October 2019

NHS Vale Royal CCG: 31 October 2019

NHS West Cheshire CCG: 31 October 2019

**Date Ratified:**

NHS Eastern Cheshire CCG: 13 November 2019

NHS South Cheshire CCG: 31 October 2019

NHS Vale Royal CCG: 31 October 2019

NHS West Cheshire CCG: 31 October 2019

**Ratified by:**

NHS Eastern Cheshire CCG: Quality and Performance Committee

NHS South Cheshire CCG: Quality and Performance Committee

NHS Vale Royal CCG: Quality and Performance Committee

NHS West Cheshire CCG: Quality Improvement Committee

**Review Date:**

NHS Eastern Cheshire CCG: October 2021\*

NHS South Cheshire CCG: October 2021\*

NHS Vale Royal CCG: October 2021\*

NHS West Cheshire: CCG October 2021\*

*\*Reviews may be undertaken sooner in line with timetable for planned structural changes for the Cheshire CCGs*

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