Countess of Chester Hospital

SAFEGUARDING STRATEGY BOARD

FRIDAY 15th APRIL 2016 AT 12 NOON **IN CONFERENCE ROOM B**

AGENDA

ITEM	DESCRIPTION	NAME
1.	Apologies - D Semple, P Lewis, S Taylor, C Healey, H Isaac, A Murphy, J O'Grady	
2.	Minutes of the meeting held on 5 th February 2016 (Attached)	
3.	Matters Arising	
4.	 Safeguarding Children / IDVA Reports SGC Training compliance Joint Targeted Area Inspections – Inspection Framework & Guidance (Attached) & CSE and Children Missing from home, care or education (Deep dive theme for JTAIs February-August 2016) (Attached) IDVA Update Audit of compliance with the Trust's DA Policy for cases presenting to the A&E Department November 2014-November 2015 (Attached) and Maternity Department (Attached) 	K Milne
5.	Female Genital Mutilation – update • CoCH patient enquiry re. FGM (Attached)	J Fisher
6.	Child Sexual Exploitation – update	K Milne
7.	 Adult Safeguarding & Learning Disability Reports ASG Training compliance CCG Improvement plan actions (Attached) ASG Board Report (Attached) 	L Cleary
8.	Local Authority update	G Butler
9.	CoCH Incidents / LADO cases	A Kelly
10.	 Learning Lessons/Improving Practice SCRs feedback Child A - Actions CWaC LSCB Practice Learning Reviews feedback CWaC LSCB Multi Agency Audits Learning from Significant Incidents – Local/National Justice Lowell Goddard Inquiry (Attached) 	K Milne R Mittal N Poole
11.	Inspections • Ofsted • CQC	A Kelly
12.	 Feedback from – Local Safeguarding Children's Board (07.03.16) Senior Prevent Development Session (29.02.16) Cheshire West Domestic Abuse Partnership Strategic Management Group (20.01.16) 	

Countess of Chester Hospital

SAFEGUARDING STRATEGY BOARD

MINUTES OF THE MEETING HELD ON FRIDAY 5th FEBRUARY 2016 AT 9.00AM IN CONFERENCE ROOM B

Attendees			Apols
Director of Nursing & Quality	Alison Kelly (AK)		N
Deputy Director of Nursing & Quality	Sian Williams (SW)		
Head of Risk & Patient Safety	Ruth Millward (RMil)	V	
Risk & Patient Safety Lead	Lindsay Cleary (LC)		
Head of Nursing – Urgent Care	Karen Rees (KR)		
Head of Nursing – Planned Care	Carmel Healey (CH)		
Head of Midwifery	Julie Fogarty (JF)		
Consultant Obs & Gynae	David Semple (DS)		V
Named Midwife/Professional Safeguarding Children &	Karen Milne (KM)		
Lead Domestic Abuse			
Specialist Safeguarding Children Practitioner	Paula Lewis (PL)	V	
Independent Domestic Violence Advocate (IDVA)	Sara Taylor (ST)		
Consultant Community Paediatrician (Named Doctor)	Howie Isaac (HI)	V	
Consultant Community Paediatrician	Rajiv Mittal (RM)		V
(Designated Doctor for Safeguarding)			
Lead Nurse Children's Services	Anne Murphy (AM)		
In-Patient Lead Therapist	Alex Holroyd (AH)		
Equality & Diversity Manager	Joe O'Grady (JOG)		V
Adult Safeguarding Manager, CWaC	Gavin Butler (GB)		V
Antenatal Clinic Manager (FGM Lead)	Jean Fisher (JFi)		V

In Attendance: Karen Owen, ASG Team Manager, CWaC (for Gavin Butler) Mary Crocombe, PA (note taker)

1. Apologies

Apologies were received from Alison Kelly, Rajiv Mittal, David Semple, Jean Fisher, Gavin Butler and Joe O'Grady.

2. Minutes of the meeting held on 27th November 2015

The minutes were agreed as a true and accurate record.

3. Matters Arising

DNA Policy

Needs to be a very clear pathway as the Trust has to complete an annual audit of compliance, and needs to have been thoroughly tested. Medical and Admin staff will be critical to this pathway/test. HI said that it had not been taken forward yet and that she was waiting for a response from AK, as HI thought it had been ratified. Members suggested using ENT as one of the 'test' specialties and asked HI to draft a directive for the staff explaining that they had been selected to test the Policy.

<u>Action</u>

Child Protection ISP – update

SW informed members that there was going to be a Pan Cheshire Working Group with John Glover as the Trust's representative on it.

4. Safeguarding Children / IDVA Reports

DA Patient story



IDVA update

Continue to deal with high levels of DA, selective enquiry needs to be increased and staff reminded about checking Meditech alerts. Have received a number of disclosures from staff this week so linking in with Occupational Health to ensure staff are aware of support available. Minor changes have been made to the DA Policy, including updating the references, definitions and it now includes one combined Risk Assessment.

SGC Training compliance

KM updated members on the latest SGC training compliance figures. Group 2 staff was now around 78%, Groups 1 and 3 are above 80%. A face to face Group 2 training session was held on 21^{st} January and a further one is planned for 15^{th} February.

Compliance with the Safeguarding & Promoting the Welfare of Children Policy – ED & Maternity

Members received and noted the above reports following the annual audit of a random sample of 25 cases. Compliance was excellent in Maternity and very good in ED. Actions for ED included ED Senior Managers to raise awareness re. the audit findings with regard to the need to always complete the Paediatric Injury Flowchart (Safeguarding Children checklist) on every child (under the age of 18) that attends the ED. AM then raised the issue of Surgeons not using 'Paeddoc' on the ward and HI asked how they are told this is something they have to do. Agreed this was an action for the DMD in Planned Care (DS) and the Clinical Directors.

5. Female Genital Mutilation – update

Irrelevant & Sensitive

6. Child Sexual Exploitation – update

Irrelevant & Sensitive

2

Key Points:

- Starting Point.
 - Escalation and early action, as per safeguarding policy, and immediate suspension.
- Early disbelief must be an explanation.
- Main areas of concern throughout the year.
- Communications with:
 - Patients and families (past and present).
 - Our staff (immediate and wider).
 - Shared services (13 Trusts).
 - Wider stakeholders (CCG, NHS England, CQC, DoH, NSPCC, LSCB).
- Superb support from Police at beginning and throughout the year-long experience.

