

Meeting of  
Lanarkshire NHS Board  
27 February 2008

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## **SUBJECT: CHILD PROTECTION**

### **Purpose**

To confirm the arrangements for the multi-agency inspection of child protection arrangements taking place concurrently in both North and South Lanarkshire and to highlight issues that have particular relevance to the role of the Board.

### **Background**

The Board will recall previous reports on this important matter and the recent seminar. Two teams of inspectors, drawn from the relevant inspectorates including NHS QIS, will be undertaking their assessment of the multi-agency arrangements for child protection. Their assessment will draw upon three sets of information:

- The case records held by all the agencies (police, NHS, social work, education, criminal justice, leisure services) for each child in a sample of more than 65, in both North and South Lanarkshire, to include those that are a cause for concern but not formally allocated a SW, those currently on the Child Protection Register and those who have been de-registered within the last year.
- Evidence compiled by the agencies of their processes for child protection. This includes the governance and management arrangements and the planning and operation of specialist and generic services which have a part to play in child protection, such as the specialist child protection team, the child and adolescent mental health service, accident and emergency care, alcohol and addictions services, maternity services and public health nursing services.
- Interviews with individual children, their parents, and staff either in groups or individually.

The assessment against national standards will seek to answer the following key questions:

- How effective is the help children and young people get when they need it?

- How effectively do agencies and the community work together to keep children safe?
- How good is the delivery of key processes?
- How good is operational management in protecting children and meeting their needs?
- How good is individual and collective strategic leadership?

A rating of 1 (poor) to 6 (outstanding) will be given against each of the 18 indicators.

### **Issues of particular relevance to the Board**

The Board's role is one of governance. It must satisfy itself that:

- Suitable governance and management arrangements are in place. Annexe A shows the governance, management and planning structures along with the roles of the officers who have principal responsibility for child protection.
- There is a shared strategic aim or vision with its partner agencies. Annexe B reproduces the shared vision for child protection to which all the Lanarkshire agencies (in both North and South Lanarkshire) are committed.
- That key issues are identified and addressed by its officers. Annexe C identifies the key policy and practice issues on which briefing has been previously provided to the Board and operational issues which may be raised with the inspectors by front-line staff.

### **Self Assessment of Key Standards**

Several self assessments have taken place against the national standards. The latest NHS Lanarkshire self assessment against standards in which the Board will have particular interest is as follows:

- Participation of children in policy development - adequate (3)
- Recruitment, Retention, Development of staff - Good (4)
- Vision, Values, Aims - Good (4)
- Leadership and Direction - Good (4)
- Leadership of People and Partnerships - Good (4)
- Leadership of Change & Improvement - Good (4)

After careful consideration these are considered to be prudent assessments.

**Key Dates:**

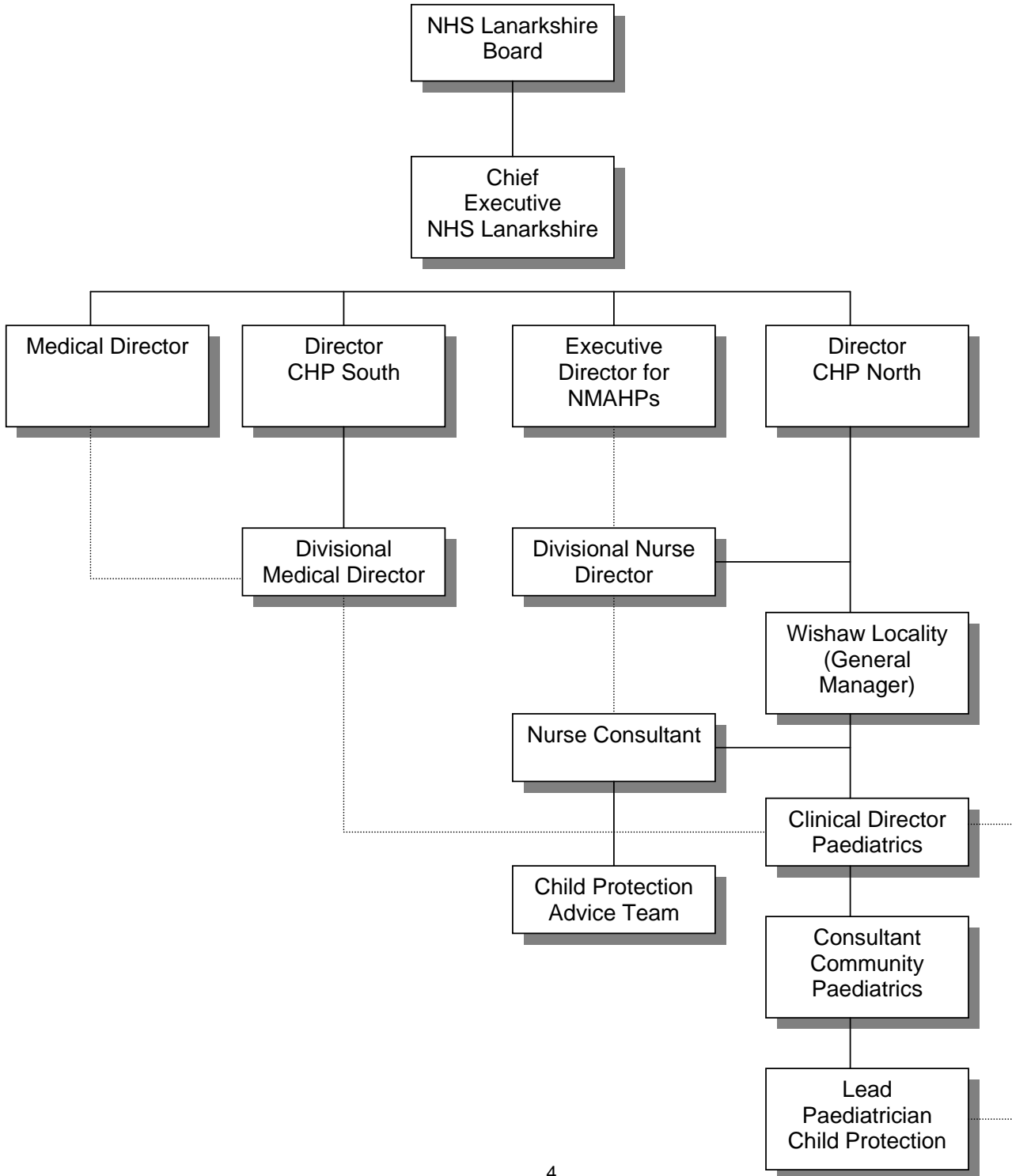
- Opening multi-agency presentation to Inspectors and case reading by Inspectors; 25 – 29 February 2008
- Interviews with individuals and groups; 10 – 20 March 2008
- Oral feedback by Inspectors; 22 April 2008 (north) and 23 April (South)
- Feedback by senior leaders to front-line staff and operational managers involved; 23 April 2008 (need to review date for South Staff)
- Draft of written report received; June 2008
- Publication of final report; Mid September 2008

**Next Steps**

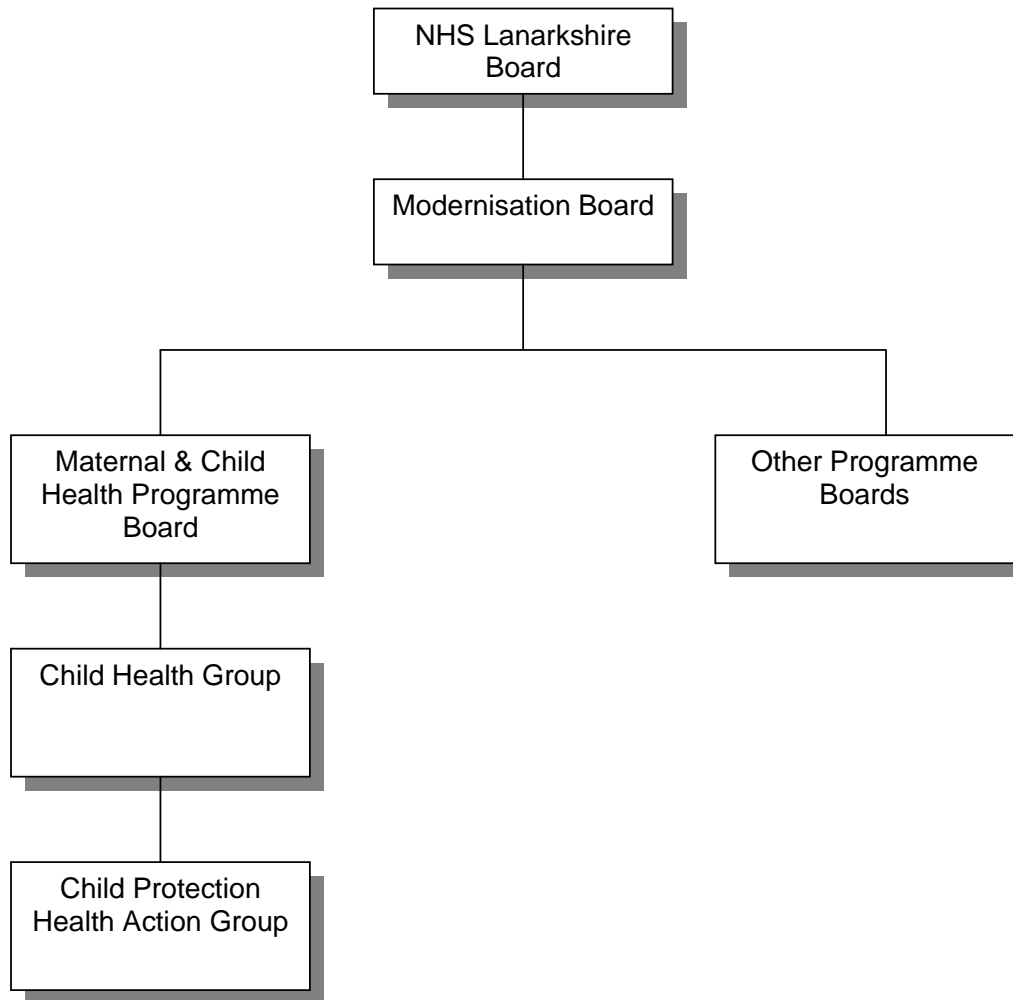
A briefing will be sent to all Board members following the inspectors' oral feedback and a written report will come before the Board when the draft written report is received, but will be subject to the timing of the receipt of the written draft and the Board's scheduled meetings.

**Paul Wilson**  
**20 February 2008**

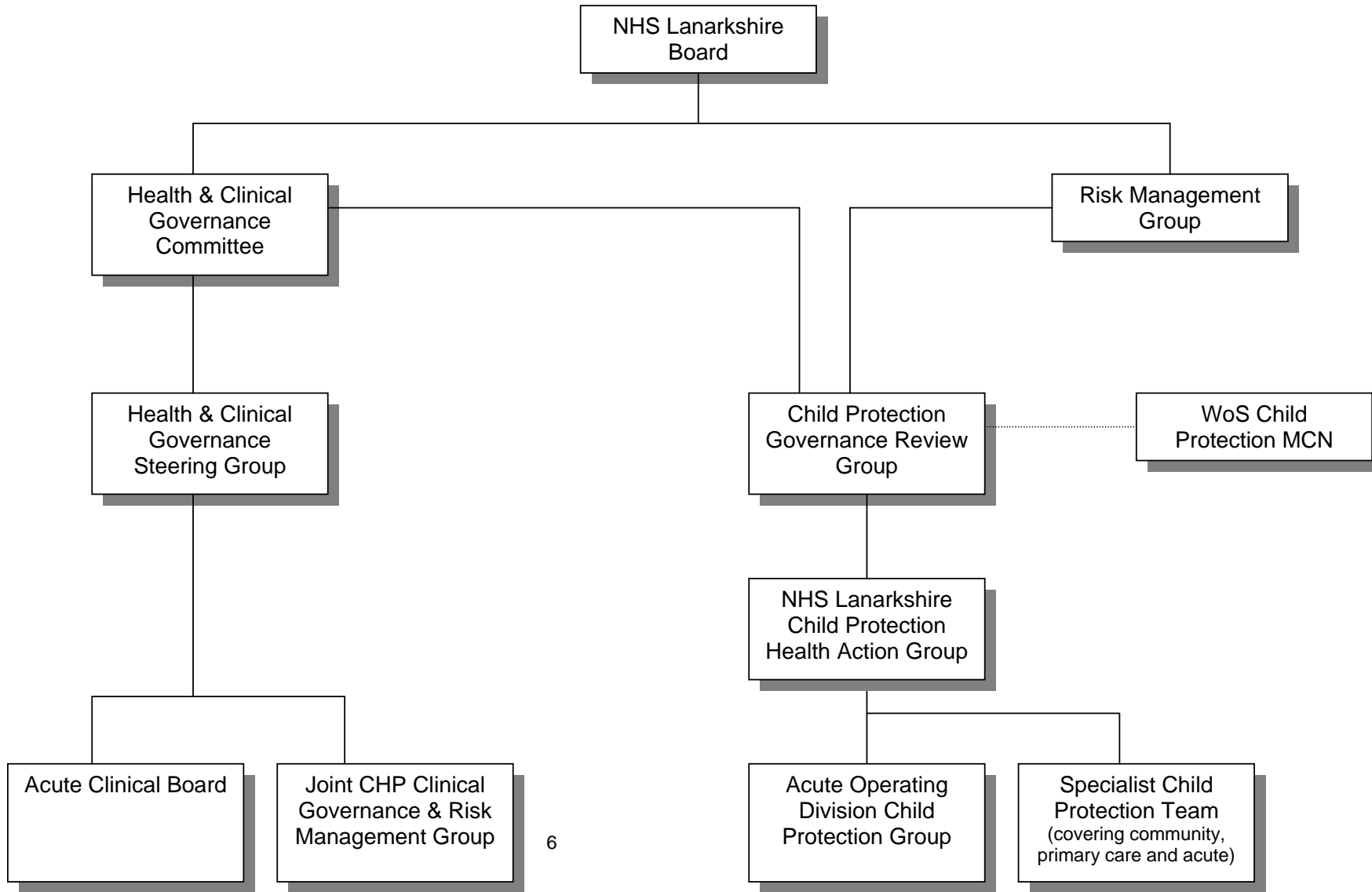
**NHSL Child Protection Organisational Arrangements**  
**Management and Professional Relationships**



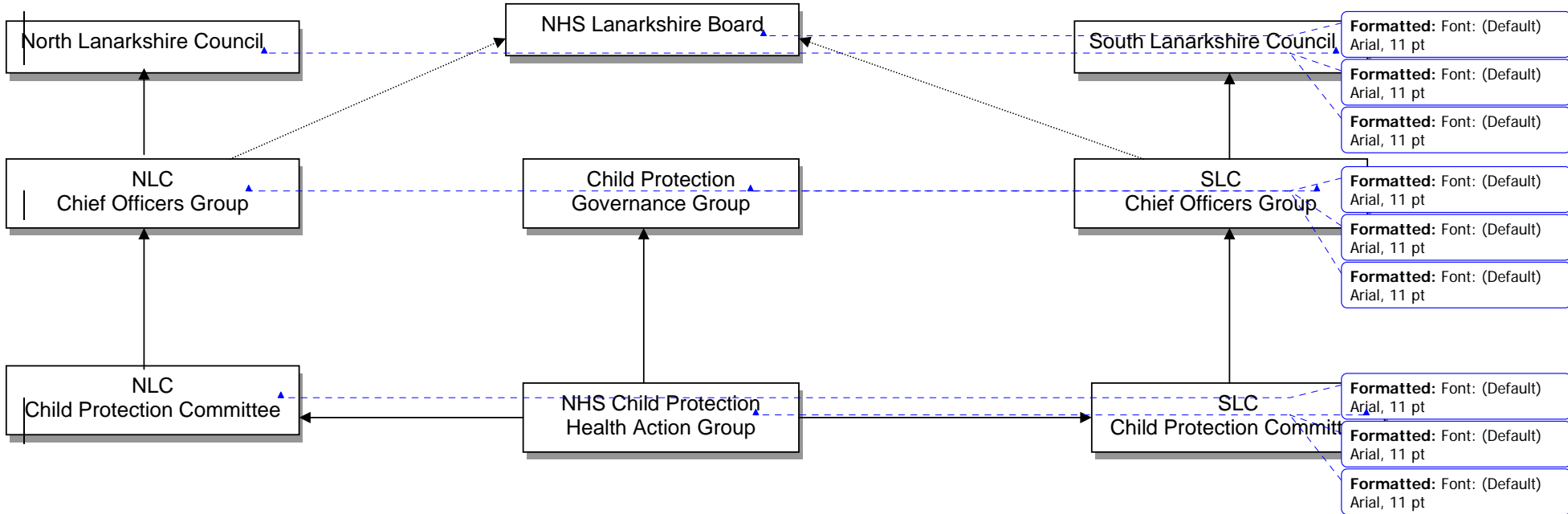
**Child Protection NHSL Planning and Development Arrangements**



**Child Protection NHSL Governance Arrangements**



## Child Protection – NHS Lanarkshire and Local Authority Interface Arrangements



## NHS LANARKSHIRE MANAGEMENT AND GOVERNANCE ARRANGEMENTS

### Organisational Layout

The arrangements fall into four parts and a separate schematic for each is shown:

1. The Governance arrangements whereby the Board, as the statutory body, assures itself that appropriate arrangements are in place for the effective delivery of services.
2. The management and professional accountabilities for specialist NHS Lanarkshire's child protection services.
3. The planning and development arrangements for children's services and within that child protection.
4. The interface between the specialist child protection arrangements within NHS Lanarkshire and the two interagency partnerships hosted by North and South Lanarkshire Councils.

### Roles and Responsibilities

Position	Name	Role	CP Responsibilities	Notes
Chief Executive	Tim Davison	Corporate Strategy and Performance	Interagency development	
Executive Director NMAHPs	Paul Wilson	Professional head of NMAHP services	Executive lead for CP policy development	
Director for South Lanarkshire Community Health Partnership	Colin Sloey	Executive Director responsible for portfolio of strategy development and performance	<ul style="list-style-type: none"> <li>• Executive delivery of specialist CP services</li> <li>• Leads NHS strategy development of child health services</li> </ul>	
Director for North Lanarkshire Community	Alan Lawrie	Executive Director responsible for portfolio	<ul style="list-style-type: none"> <li>• Executive delivery of public health Nurses in South</li> </ul>	

<b>Position</b>	<b>Name</b>	<b>Role</b>	<b>CP Responsibilities</b>	<b>Notes</b>
Health Partnership		of strategy development and performance	Lanarkshire <ul style="list-style-type: none"> <li>Leads NHS strategy development of Primary Health Care Services</li> </ul>	
Child Health Commissioner	Charles Clark	Board's adviser on children's health and welfare	Develops wider context of child health policy within which child protection sits	
Divisional Nurse Director (Primary Care)	Anne Armstrong	Professional head of nursing services across North and South CHPs	<ul style="list-style-type: none"> <li>Leads operational development of CP services</li> <li>Vice Chair of North Lanarkshire CPC</li> </ul>	
General Manager: Wishaw Locality	Richard Burgon	Operational management	Ensures operational delivery of child health services and within that specialist CP services	
Nurse Consultant	Juliet Norman	Specialist adviser	<ul style="list-style-type: none"> <li>Advanced practice advice to health care professionals</li> <li>Advises on policy and practice</li> <li>Leads team of advisers supporting clinical and operational staff</li> <li>Single point of contact for other agencies on child protection cases</li> </ul>	
Lead Paediatrician	Linda Hunter	Medical Specialist	<ul style="list-style-type: none"> <li>Specialist advice on medical aspects of policy and process</li> <li>Leads team undertaking specialist medical examinations</li> </ul>	

**Child Protection: Multi-Agency Shared Vision**

- All children and young people in Lanarkshire have the right to be cared for and protected from abuse and harm in a safe environment in which their rights are respected.
- All agencies will work together in a collaborative way to promote the safety and wellbeing of children and young people in Lanarkshire.
- The Chief Officers and Child Protection Committees of North and South Lanarkshire are the driving force for ensuring that agencies, individually and collectively, work to protect children and young people as effectively as possible.

## Key NHS Child Protection Issues

### Previous Briefing given to Board Members

- Arrangements for NHSGG population in “Northern Corridor” of North Lanarkshire Council and Cambuslang and Rutherglen of South Lanarkshire Council
- Electronic Messaging
- Case Records
- Case Supervision

### Issues that Front line staff may raise with Inspectors:

- Volume/type of documentation involved in the new single agency child assessment form which is seen as time consuming. Documentation is based on the West of Scotland forms and is being amended in light of the review of the family health record undertaken by Glasgow Caledonian University. Public Health Nursing staff will be fully involved in this process
- Insufficient clerical assistance
- Staffing levels in public health nursing particularly in Coatbridge and Wishaw Localities due to sick leave and vacancies. Measures are currently being put in place to address this issue on a pan Lanarkshire basis such as:-
  - The re-deployment of suitably qualified Bankaide staff to areas of highest need
  - National recruitment campaign
  - Review of NHSL Specialist Practitioner training programme
- Increase in Public Health Nursing workload due to:
  - Introduction of new national immunisation programmes (Hib catch – up, selective BCG programme in schools, HPV vaccine);
  - Implementation of Hall 4 where the new assessment process takes considerably longer to complete and staff are identifying far more school age children than previously who may require additional or intensive input;

- Introduction of Getting it Right for Every Child agenda which includes the introduction of a multi agency assessment process and family health record.

The CHP's are currently undertaking a review of the NHSL community nursing workforce plan in light of these developments and will make recommendations for amendments once the review has been completed.