Board Nurse Director

NHS Greater Glasgow & Clyde
Outcome of Her Majesty’s Inspectorate of Education (HMie) Reviews – Child Protection

1. **Recommendations**

   Board members are asked to note the key messages for NHSGGC arising from the HMie Joint Child Protection Inspections for Inverclyde and Glasgow City, and note the overall progress being made as a result of all the HMie Inspections.

2. **Introduction**

   Board Paper No. 08/35 (December 16th 2008) described the HMie inspection process and provided a summary of strengths and areas of future development from the following reports:
   
   - East Renfrewshire, March 2008
   - South Lanarkshire, September 2008
   - Renfrewshire, October 2008

   This paper summarizes the recent HMIE Inspection reports for:
   
   - Inverclyde, February 2009
   - Glasgow City, March 2009.

3. **Background**

   A three year programme of Joint Inspections to Protect Children was introduced in 2005 and has now been completed. The inspections covered the range of services and staff working in each area who have a role to protect children. These included services provided by health, the police, the local authority and the Scottish Children’s Reporter Administration (SCRA), as well as those provided by voluntary and independent organisations. As part of the inspection process, inspectors reviewed practice through reading a sample of files held by services who work to protect children living in the area. Some of the children and families in the sample met and talked to inspectors about the services they had received.

   Inspectors visited services that provided help to children and families and met users of these services. They talked to staff with responsibilities for protecting children across all the key services, this included staff with leadership and operational management responsibilities as well as those working directly with children and families.

   Inspectors also sampled work that was being done in the area to protect children, by attending meetings and reviews.

4. **Summary of Overall Lessons Learned from Inverclyde and Glasgow HMie Inspection Reports**

   This section will focus on the findings of the Inverclyde HMie Report, firstly highlighting the overall strengths of the report and secondly highlighting areas for future development.
4.1 Key Strengths – Inverclyde

The following key strengths were recorded as:

- Sensitive and effective communication promoting positive relationships between staff, children and families
- A clear focus on early intervention and the provision of flexible support to children and families in their homes, schools and communities
- Joint working within and across services including the voluntary sector
- Involvement of children and families in reviewing and developing services
- Easily accessible training, support and supervision of staff across services
- Strong vision and commitment to improve children’s lives, demonstrated by elected members, Chief Officers and senior managers, understood by staff at all levels
- Robust processes for self evaluation which directed improvements.

4.2 Areas for Future Development – Inverclyde

The following areas of further development were recorded as:

- Ensure the involvement of health and medical staff at an early stage when there are child protection concerns
- Evaluate arrangements for medical examinations to ensure children’s needs are being fully met.
- Ensure all assessments are completed promptly.

4.3 This section will focus on the findings of Glasgow City HMie Report, firstly Highlighting the overall strengths of the report and secondly highlighting areas of future development.

4.4 Key Strengths – Glasgow City

The following key strengths were recorded as:

- Very effective arrangements to help children keep themselves safe
- Very effective promotion of public awareness of child protection
- Recently developed local support arrangements, including Local Management Reviews and Local Child Protection forums, for staff involved in child protection work
- Strong vision, values and aims to guide staff involved in protecting children
- High priority given to child protection within the Council’s plan to modernise its services
- Strong leadership of partnership working within and across services by elected members and Chief Officers.

4.5 Areas for Future Development – Glasgow City

The following areas of further development were recorded as:
• Put in place appropriate arrangements for the medical examination of children about whom there are child protection concerns and ensure that these take account of children’s ongoing needs

• Ensure that health staff are involved in initial referral discussions about all children for whom there are child protection concerns
• Ensure consistency and management overview of arrangements for identifying and planning to meet the needs of vulnerable individual children including unborn babies
• Ensure that staff from all relevant services contribute information to inform decision-making about vulnerable children involved in child protection processes
• Ensure that staff and managers across services are clear and consistent about when to initiate child protection procedures.

5. Progress Generally From All HMIE Inspections

The following section will provide an overview of some of the activity either underway or completed which HMIE Inspection Reports identified as areas of future development.

5.1 Early Involvement of Health Staff in Child Protection Processes

• All Child Protection Committees have an agreed Tripartite Discussion/Initial Referral Discussion protocol in place or have ensured that this is being developed

• NHSGGC Child Protection Unit has allocated additional resources to the Early Sharing and Collation of Information System and as a result response times have improved
• A management information report on uptake of the Early Sharing and Collation of Information system is regularly produced to monitor performance
• An evaluation of the effectiveness of the Early Sharing and Collation of Information system has been commissioned.

5.2 Medical Examinations of Children & Adolescents

• Paediatric Medical Services have been redesigned.
• Plans are underway to roll out the Archway service (acute sexual assault on adolescents and adults) across a wider area
• A review of overall medical services for adolescents is in progress
• A pilot clinic for comprehensive medical assessments has been completed in East Glasgow CHCP and an initial audit of findings produced
• NHSGGC CPU collate data on medical examinations of children across NHSGGC and produce management information to inform service planning
• A 24 hour service for all child sexual abuse cases requiring paediatric input is now in place across NHSGGC
• All requests for medicals are triaged by a trained and experienced Child Protection Nurse Advisor.

5.3 Supervision of Key Staff

• A model of supervision for Health Visitors and School Nurses has been agreed and training for this is currently being rolled out by Glasgow Caledonian University
• A tool to assist Team Leaders in the supervision of child protection cases is in draft form
• Consultation on complex cases by Child Protection Nurse Advisors has been introduced in some CHCP’s and is being rolled out across all CHCP’s.
6. **Conclusion**

The three year programme of Joint Inspections to Protect Children which commenced in 2005 is now complete, and the Board is working with all it’s Local Authorities through their Child Protection Committees to continue to improve Child Protection Services.

A new model of Inspection is being introduced later this year with East Dunbartonshire Council being the first local authority in the Board’s area to be inspected. Work is underway to understand the new inspection process and prepare for the inspection which will take place between 16 November and 30 November 2009.