

CQC Action Plan - Review of Health Services for Children Looked After & Safeguarding in Portsmouth

Portsmouth Clinical Commissioning Group PCCG - updated 210518

Number	Recommendations	Actions	Assigned To	Completion Due Date	Progress	Comments/Evidence	RAG
	Support primary care in the introduction, implementation and evaluation of the local risk assessment tool for CSE in young people so that victims may be identified and supported at the earliest opportunity.	1. Deliver further train the trainer courses.	Sarah Shore, Associate Designated Nurse	COMPLETED	<p>10.11.17 Dates arranged. Also planned presentation at TARGET (Training for GPs) in January. Incorporated in Level 2 and level 3 training</p> <p>03.01.18 CSE Training provided to majority of School Nurses 07.09.17 & to CAMHS 11.09.17</p> <p>Training Community Paediatricians and LAC Nurses - 28.02.18</p> <p>03.01.18 Emailed GP Surgeries who did not take up initial CSE training, offering to attend surgery and train staff.</p> <p>190318 - 24th March 2018 delivering training to GP Surgery. Plan to deliver training in TARGET on 25.04.18.</p>		

2.1	2. Explore IT solutions to ensure that Primary Care use the shortened tool for all under 18 year olds requesting sexual health or contraceptive advice.	Sarah Shore, Associate Designated Nurse	31.01.18 Request extension on completion date to 31.08.18	<p>10.11.17 Temporary solution implemented by adding shortened tool to Systemone under sexual health, Contraception, mental health pathways. The tool can currently be bypassed but this action makes them more obvious to GPs whilst we explore other options.</p> <p>190318 Awaiting response from IT to see if this can be made mandatory for all contraception requests for children aged 13-17.</p> <p>21.05.18 Work on this is continuing. Currently working to transfer the last GP practice in Portsmouth on to System one.</p>		
	3. Monitor number of referrals from health agencies to MASH related to concerns regarding CSE.	Sarah Shore, Associate Designated Nurse	30.06.18	<p>10.11.17 Initial stats requested and being collated by MASH Nurse. This will given a benchmark of current referral rate. 190318 This is being reported into the MET Strategic Group and will be monitored there. Also reporting to NHSE on a quarterly basis</p>		
	4. Audit GP awareness of CSE and local tools.	Sarah Shore, Associate Designated Nurse	30.07.18	<p>10.11.17 Not yet started as requires previous steps to be embedded first.</p> <p>190318 - No change. Audit to be undertaken in Jun 18.</p> <p>21.05.18 Audit tool is under development</p>		

2.2	Ensure the arrangements and job descriptions for the designated and named doctor for LAC are compliant with the intercollegiate guidance and that there are clear accountability arrangements for the strategic and operational responsibilities for each postholder.	1. Meet with Solent NHS Trust to explore options.	Tina Scarborough Deputy Director Safeguarding and Quality	COMPLETED	<p>10.11.17 Initial Exploratory meeting held. Further meeting to be convened once JD updated.</p> <p>19.03.18 JD updated in line with the Intercollegiate document. Follow up meeting held on 12.12.17. Agreed that due to increasing work load caused by increase in UASM that the designated Dr hours would temporarily be used to deliver the IHA's and the Designated post would not be filled. Solent to develop a business case to present to the CCG for more funding. Currently awaiting business case to be presented to CCG. This is currently on the CCG risk register. 21.05.18 CCG have formally written to Solent NHS Trust requesting update by 31.05.18. If no resolution PCCG to take forward under contract processes.</p>		
		2. Review and update Job Descriptions.	Tina Scarborough Deputy Director Safeguarding and Quality	COMPLETED	<p>10.11.17 DRAFT JD circulated to key individuals for comment.</p> <p>12.12.17 JD agreed</p>		
		3. Separate Roles and functions of the Named and designated LAC Posts.	Tina Scarborough Deputy Director Safeguarding and Quality	31.12.17 Extension requested to 30 June 2018	<p>19.03.18 Awaiting business case from Solent NHS Trust to be submitted.</p> <p>21.05.18 CCG have formally written to Solent NHS Trust requesting update by 31.05.18. If no resolution PCCG to take forward under contract processes.</p>	CCG have escalated this to contract team	

3.4	Ensure that the local MARAC arrangements are fully inclusive of all partners, including primary care.	1. Work with MASH Board and MARAC Steering Group to develop and plan new model for Portsmouth ensuring the Health Services are involved in the new process.	Tina Scarborough Deputy Director Safeguarding and Quality	This work is being managed via the Community Safety Partnership.	<p>10.11.17 Portsmouth CCG and health partners are engaged with the MARAC steering groups to progress this work</p> <p>19.03.18 MARAC Working Group met on 09.03.18 Health services are engaged in this work. IT systems being explored at present. ASC will be using system 1 shortly. All GP practices have now agreed to use System1. work being undertaken to implement System 1 into one GP practice. Solent NHS Trust provide representation on MARAC (Safeguarding and AMH). This will continue. Information is entered into System one and GPs can then access that information directly.</p>		
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