



Royal Berkshire



NHS Foundation Trust

The Royal Berkshire  
NHS Foundation Trust

**Child Protection  
Annual Report  
2010 – 2011**

July 2011

## Executive Summary

This is our first annual report prepared by the Royal Berkshire NHS Foundation Trust (RBFT) Child Protection Steering Committee and represents child protection as part of child safeguarding across the Trust and through multiagency working. However, it builds on Annual Plans that have been in place and monitored regularly by us since the LSCBs of West of Berkshire audit of Section 11, Children Act 2004 carried out in 2008.

It is encouraging to acknowledge the achievements and improvements in child protection and safeguarding children and young people that have been made since the publication of "The Protection of Children in England: A Progress Report" on 12 March 2009 following the death of Baby P in which Lord Laming stated that too many agencies had failed to adopt reforms introduced following his previous review into the death of Victoria Climbié. We eagerly anticipate working with our partners to implement the recommendations from the recent Munro review of child protection to improve outcomes for children and young people.

Compliance with the Care Quality Commission Regulation 11, Outcome 7 'Safeguarding service users from abuse' and improved Ofsted ratings demonstrate that partnerships are working well and that the safeguarding community across the West of Berkshire is stable allowing us to focus on our declared aim of 'promoting the safety and well being of all children and young people who have contact with the services provided by RBFT.'

**Dr Jonathan Fielden**, Chief Medical Officer,  
Executive Lead for Safeguarding

**Patricia Pease**, Divisional Matron for Children and Young People, Lead for Child Protection

## Introduction

Welcome to the first Child Protection Annual Report. This report has been written to reflect the position of Child Protection (CP) as part of Safeguarding Children in Royal Berkshire NHS Foundation Trust (RBFT) which has become embedded as 'Everybody's Business'.

This has been achieved by establishing a culture in RBFT where staff who come into contact with children and families in their everyday work, including those working primarily with adults, understand the importance of safeguarding and promoting the welfare of children and recognising and acting on child protection concerns.

This cultural evolution has been brought about through strong clinical, operational and corporate leadership, management and engagement from 'Board to Ward' including:

- A training needs analysis to reflect the needs of the workforce as well as complying with national guidance and establishing a programme and plan of Child Protection training
- Delivering a significant quantity of high quality accessible Child Protection training
- Constantly reviewing policies, processes and systems so that they are up to date and robust
- Ensuring the organisation meets statutory safe recruitment requirements including Criminal Records Bureau checks
- Named professionals for Child Protection who are clear about their role, have sufficient time to undertake it and receive good supervision
- An Accident and Emergency department with clinical leadership that has worked together with the Named Professionals so that their staff are trained and receive coaching and supervision to enable them to identify children at risk and communicate their concerns effectively.
- Developing a system for following up children who miss outpatients appointments
- Developing a system for flagging up children for whom there are Child Protection concerns
- Having a Board level executive director and non-executive director lead for safeguarding children including child protection.
- Child safeguarding Key Performance Indicators being reported to the Board monthly
- Bi-monthly child safeguarding written and verbal reports to the Trust Clinical Governance Board
- Regular presentations to the Executive to monitor progress against the Child Protection Steering Committee Annual Plan
- A robust monitoring system including an audit programme, electronic reporting system and a Child Protection governance system to ensure that systems and processes are working

- Working within the organisation and with multiagency partners to identify and examine any concerns, issues or incidents to allow for learning including cooperating fully with Serious Case Reviews

RBFT is a large organisation providing acute and specialist healthcare services on sites across Berkshire and South Oxfordshire and specialist out reach health services into the community. It is one of the largest employers in Berkshire. Berkshire has six unitary authorities; each has a Local Safeguarding Children Board (LSCB) as does Oxfordshire. The RBFT engages actively with each of these local authorities and their LSCBs to safeguard and protect children. Working with this number of partners adds a degree of complexity to the 'business' of safeguarding and protecting all children who come into contact with the services of RBFT.

#### The RBFT in 2010/11:

Served a population of approximately 500,000

Approximately 24% are Children and Young People under 18 years

18497 children and young people attendances to the A&E Department

58827 adult attendances to the A&E Department

9,513 admissions of children and young people to paediatric wards

686 admissions of young people to adult wards

78728 adult admissions

5963 babies born

1140 under 16 years attended clinics providing sexual health services

62207 out patient appointments children and young people under 18 years

Work force 4971

#### RBFT sites:

Royal Berkshire Hospital Reading

West Berkshire Community Hospital Newbury

Townlands Hospital Henley

Prince Charles Eye Unit Windsor

Royal Berkshire Bracknell Clinic (31st May 2011)

Renal Dialysis Unit Windsor

#### Maternity services provided in:

Royal Berkshire Hospital, Reading

West Berkshire Community Hospital, Newbury

Wokingham Community Hospital

Children's Centres across the West of Berkshire

GP practices

**On 31 December 2010, 1240 (95%) clinical staff in services identified by the CQC as priority had completed Child Protection Training in the previous year:**

A&E Department

Midwives and Obstetricians

Paediatrics

Pharmacists

Sexual Health

Surgeons, Anaesthetists and Theatre Nurses

Therapists

**Sexual health services for young people are provided in:**

Royal Berkshire Hospital core service, 21A Craven Road

Outreach Clinics

West Berkshire Community Hospital

Whitley Clinic, Northumberland Avenue

Juice Clinics - Young people's outreach clinics providing sexual health, smoking cessation, substance misuse, emotional well-being and relationships support (multi-agency delivery) provided in:

Waterside Youth Centre, Newbury

Newbury College

Overdown Road Surgery, Tilehurst

Reading Girls School

John Madejski Academy

South Reading Youth Club – One Stop Shop

Connexions Friar Street

Reading College

Wokingham Hospital

Bulmershe Youth Centre

## Key Achievements

### A&E

A Paediatric Accident & Emergency area that is child friendly and audio visually separate from adults was opened in December 2010. Extra children's nurses have been recruited so that at least one children's nurse is always on duty in the department.

A system has been developed with Reading and West Berkshire local authorities so that children with a child protection plan can be 'flagged' when they attend A&E or are admitted to the hospital when the first phase of a new Electronic Patient Record 'goes live' in 2011.

Close partnership working with the local authorities of the West of Berkshire to support the management of child protection cases where the child is from 'out of area' has led to more timely assessment and planning to protect this particularly vulnerable group.

Working in partnership with Berkshire Healthcare NHS Foundation Trust and Berkshire West PCT a CAMHS liaison clinical nurse specialist based in the A&E department has been agreed, this post will improve the quality of care for children and young people who present following Deliberate Self Harm and specifically address the needs of 16/17 year olds.



## Maternity services

Community maternity teams have identified child safeguarding champions for each clinical area and community setting.

Maternity services, in conjunction with local authorities and health visitors have developed a system involving a more detailed social assessment for women as part of their booking. This allows for early identification of mothers and babies at high risk, notification to the appropriate Children's Centre, further assessment of the family and early additional support from Health Visitors, GPs and other agencies

Working in partnership with Berkshire Healthcare NHS Foundation Trust 24/7 pathways of referral to mental health services have been established for mothers who present with antenatal or postnatal mental health needs.

## Sexual Health

A sexual health youth outreach nurse specialist post has been made substantive.

Multi agency agreement and funding has been secured for the implementation of a specialist outreach nurse for vulnerable women. The focus of this post is to work with women who have:

- already had a child or children removed from their care
- been identified by children's social services as being at high risk of losing a child from their care

Interagency pathways have been developed to ensure robust safeguarding across agencies e.g. with Marie Stopes International

A quality agenda in relation to safeguarding young people has been embedded in the service specification for Juice young people's out reach clinic delivery.

## Child protection team

The child protection team of experienced and trained named professionals is well established. They work skillfully together, with colleagues within the Trust and in other agencies to create a climate where the welfare and protection of children is the focus. The team receives regular supervision and has built good relationships with Children's Social Care Services, the Child Abuse Investigation Unit and Named and Designated Child Protection professionals in other organisations. This team is responsible for providing all child protection training in the RBFT; their contact details are widely available for staff through the intranet and child protection posters.



In partnership with the Designated Nurse for Child Protection, children's social care managers, health visitors and the Berkshire Emergency Duty Team the child protection team has successfully reviewed and developed the Child Protection Medical Examination service and the quality of our referrals for children 'at risk' and 'in need' to allow for early identification by:

- Meeting regularly with partner agencies, participating in interagency audit and inviting feedback on our services
- Developing a simple 'How to refer for child protection medicals' information sheet
- Developing a comprehensive child protection/ child in need assessment tool for use in our urgent & emergency care pathway
- Introducing a 'Safeguarding and child protection protocol' for babies admitted to the Neonatal Unit which has been included in the Berkshire Child Protection Procedures.
- Revising our child protection referral form and child protection training to enhance the information sharing methods used by frontline practitioners
- Introducing a system so that frontline practitioners have up to date health visitor contact details to ensure important information about a child who attends the A&E department or is admitted as an emergency to the Paediatric Wards is shared as soon as possible.

### Child protection training

By December 2010 95% of our clinical staff in key services identified by the Care Quality Commission and Monitor had completed child protection training appropriate to their role in the previous year

3903 staff, 78 % of our entire workforce attended child protection training in 2010/11

Our training requirements are that our clinical staff, around 50% of staff, undertakes annual training and the other 50% who are scientific and technical, estates and facilities or administration and clerical undergo training 3 yearly

We have a robust child protection training plan for 2011/12 with more than 5200 places for face to face child protection training available to staff.

### Human Resources

There has been significant investment and work to ensure that RBFT electronic staff record (ESR) is able to provide accurate reports of staff up to date with child protection training, it now has the facility to do this.

There has been significant work to pilot the National Learning Management System this provides staff with a single point of access to e learning, including child protection. It is a module of ESR. This means that when e learning is completed it is automatically recorded on the individual's staff record.

Reviews of our CRB and Independent Safeguarding Authority plan approved by the Board show that progress is ahead of plan.

An Allegation Management Policy was approved by the Board in September 2010.

## Senior Commitment

The commitment of nonexecutive and executive Board members and senior managers across the Trust to child protection as part of safeguarding children has become embedded. Responsibility for children and their safety is taken seriously. A system of child protection clinical governance reporting to the Child Protection Steering Committee chaired by the chief medical officer demonstrates a clear line of accountability. The CMO, CNO and CEO have an open door policy if any problem arises.

We have worked with our partners in the West of Berkshire to carry out a strategic review of 'Working Together to Safeguard Children 2010' and a new RBFT 'Child Safeguarding and Child Protection Policy' has been approved by the Board.

One internal management review was completed in 2010/11, graded by Ofsted as good and we commissioned external reviews of our radiology services to provide additional assurance about their quality.

Working effectively with the joint chair of the local safeguarding children's boards of Reading, West Berkshire and Wokingham we have examined and agreed different approaches to our representation at the LSCBs of the West of Berkshire.

Working effectively with the Child Death Overview Panel (CDOP) we have maintained the functions of the Designated Doctor for Child Death including a rapid response service for unexpected child death, completed an audit of rapid response 2008 – 11 and reported cases to CDOP meetings.

A standardised, trustwide system that including automated letter production to parents or young people and GPs to identify children and young people who do not attend out patient appointments has been developed. As part of this since December 2010 the child protection team has had access to a daily report so that they can review children with multiple DNAs and acting accordingly.

There are some services where the automatic letters will not be generated where this is in the best interests of children and young people e.g. sexual health, obstetrics and gynaecology. These services will continue to use their existing DNA processes.

## Principal challenges

The number of children presenting to the A&E department at the Royal Berkshire Hospital (RBH) with conditions that would be more appropriately cared for at home or by primary care continues to present a challenge. Working with Berkshire West PCT, South Central Ambulance Trust, Reading LA and a team from NHS Institute for Innovation and Improvement we have identified the need to create a 'single front door' to our urgent and emergency services for children at the RBH; provide better information to parents about what to do when their child is unwell or injured; for paediatricians and children's nurses to work in partnership with GPs, health visitors and professionals in Children's Centres to further develop knowledge and skills in the assessment and management of ill and injured children and to increase the size of our Children's Community Nursing Team.

The difficulty in recruiting a professional with the knowledge, skills and experience necessary to the CAMHS liaison clinical nurse specialist post based in the A&E department that was agreed in 2010.

Maternity services roll out of working with multiple Children's Centres across the West of Berkshire and the resources and planning required to achieve this presents a challenge. This has been accomplished in two Reading Children's Centres, Brambles Children's Centre in Wokingham and in the Newbury Children's Centre.

Fixed term funding for sexual health outreach posts and services poses challenges for service and work force planning development.

Since the retirement of the Designated Doctor for Child Protection for Berkshire West in July 2010 it has not been possible to recruit an appropriately experienced community paediatrician to that post. Maintaining essential elements of that role present a significant challenge:

- Strategic decisions about child protection at a time of considerable change in the NHS
- Advice for Serious Case Reviews
- Functions of the Designated Doctor for Child Death including rapid response and CDOP representation
- The role of medical advisor for looked after children
- Support and advice to the Child Protection Team.

All of this is against the background of a national shortage of community paediatricians and difficulty filling other vacant community paediatric consultant posts in Berkshire West.

RBFT has not been in a position to provide forensic examinations for suspected child sexual abuse for children under twelve since July 2010; this has required children and social workers to travel to Buckinghamshire for examinations.

The capacity of our representatives to effectively participate in the breadth and depth of work for three LSCBs in the West of Berkshire and to work with the LSCBs of the East of Berkshire and Oxfordshire as needed.

The capacity of our representatives to participating in the review and production of guidance and protocols needed for the Berkshire Child Protection Procedures and maintain a clinical case load.

Difficulty gathering data about children and young people in a large and complex organisation to support service development internally and with other agencies and for monitoring purposes until the phased introduction of an electronic patient is underway.

- support those professionals who come into contact with children, parents and carers in the course of their work to be aware of their safeguarding responsibilities
- ensure that all health professionals can recognise risk factors and contribute to reviews, enquiries and child protection plans.

## Annual plan 2011/12

This plan is designed to promote the safety and wellbeing of all children, who have contact with the services of the Royal Berkshire NHS Foundation Trust and as part of Berkshire's Multi-Agency Child Protection Framework and to ensure compliance with the Children Acts 1989 and 2004; Working Together to Safeguard Children 2010; the revised edition of the Berkshire LSCBs Child Protection Procedures and the CQC/Monitor minimum safeguarding requirements for Foundation Trusts.

To achieve these effective arrangements to safeguard and promote the welfare of children will be in place to:

- ensure all affected children receive appropriate and timely therapeutic and preventative interventions
- support those professionals who work directly with children to ensure that safeguarding and promoting their welfare forms an integral part of all stages of care they offer

Action	Individual Responsibilities	Director	Timescale	Evidence
<b>Demonstrate senior management commitment to the importance of safeguarding and promoting children's welfare.</b>				
Recruit to vacant positions: Designated Doctor for Child Death Designated Doctor for Child Protection Doctor for Looked After Children (LAC) Community Paediatricians	Susan Timperley Susan Edees Ann Gordon Patricia Pease	Jonathan Fielden	Consultants in post by December 2011. Dependent on suitable applicants	Professionals in post, Strategic Clinical Leadership in place to support and develop existing Child Protection and Safeguarding systems
Provide and monitor interim arrangements until suitable professionals recruited for: Child Protection examinations for social services Child Death Overview Panel representation Rapid Response for unexpected child death			Specifically monitored bi-monthly by the child protection clinical governance committee, the child protection steering committee and through the Trust Clinical Governance Board	Minutes of meetings of CP Clinical Governance, CP Steering Committee, Trust Clinical Governance.
Monitor and review the effectiveness of Trust representation and membership of the LSCBs of the West of Berkshire and their joint subgroups.	Patricia Pease Stephanie Seigne	CEO Jonathan Fielden	Specifically monitored bi-monthly by the child protection clinical governance committee, the child protection steering committee and through the Trust Clinical Governance Board	Trust representatives with the capacity and capability to attend and participate in all agreed meetings of the LSCBs of the West of Berkshire and joint subgroups.
				Minutes of LSCB meetings  LSCB reports to CP Steering Committee
Work together with Wokingham Local Authorities to implement access to an electronic data base of child protection plans to ensure that Children's Services are alerted when the child attends A&E Consider extension of flagging to other Berkshire LAs after EPR introduced and tested	Patricia Pease	Jonathan Fielden	October 2011	Automatic alerts available for staff when any child in the West of Berkshire with a Child Protection Plan attends A&E
Work together with Reading Local Authority to manage complex out of area child protection/safeguarding cases	Patricia Pease Louize Evans Ann Gordon Denise Waugh	CEO Jonathan Fielden	On a case by case bi-monthly by the child protection clinical governance committee	Safe, timely assessment and planning to protect a particularly vulnerable group.  Case Audit
Work with commissioners and Berkshire Healthcare Foundation NHS Trust to establish pathways to ensure compliance with:  • NICE clinical guideline on Antenatal and Postnatal Mental Health • NICE guideline on Deliberate Self Harm • Recruit to vacant position of CAMHS liaison CNS for DSH children and young people	Gill Valentine Patricia Pease	Jonathan Fielden	Monitor at CP Steering committee  April, July, Nov	Clear pathways of referral for mental health assessment in place 24/7  CAMHS CNS in post by December 2011  Dependent on suitable applicants
				Professional in post providing training and leadership to the current DSH service for CYP

Action	Individual Responsibilities	Director	Timescale	Evidence
Internal Management Reviews undertaken as part of Serious Case Reviews will carried out within the timeframe and to the specification laid down in 'Working Together to Safeguard Children' 2010. Each IMR will be presented to the Board for adoption and action.	Stephanie Seigne Patricia Pease	Jonathan Fielden	As SCRs arise	IMRs and action plans available and monitored. Board minutes
Six monthly presentations to the Executive against this plan and following the quarterly Child Protection Steering Committee meeting.	Patricia Pease	CEO Jonathan Fielden	September 2011 February 2012	
<b>Demonstrate a clear line of accountability within the organisation for work on safeguarding and promoting the welfare of children</b>				
Recruit a Named Midwife for CP and allow sufficient time to carry out the duties.	Gill Valentine	Nigel Davies	Autumn 2011	A Named Midwife for CP in post with capacity and capability to fulfil the role as described in the Job Description
Ensure that the roles and responsibilities of Trust Lead for Child Protection are reflected in the new Trust structure		CEO	Autumn 2011	
<b>Ensure there is appropriate training on safeguarding and promoting the welfare of children for all staff working with, or in contact with, children and families</b>				
For there to be at least 95% of all Trust staff with up to date annual rolling child protection training	Patricia Pease Louize Evans Ann Gordon Denise Waugh	Jonathan Fielden	Monitor at CP Steering committee April, July, Nov	Reports from ESR
For the electronic staff record to provide accurate reports of staff up to date with child protection training	Stephanie Hayward Suzanne Emerson – Dam	Janine Clarke	October 2011	
For the Trust internal full day child protection training to be approved as Level 3 training by the LSCB sub training group	Patricia Pease Louize Evans Ann Gordon Denise Waugh	Jonathan Fielden	March 2012	
To roll out and promote e learning for child protection through the National Learning Management System	Rowena Perry	Janine Clarke	March 2012	

Action	Individual Responsibilities	Director	Timescale	Evidence
<b>Ensure there are safe recruitment and allegations management policies and processes in place</b>				
All clinicians who work directly with children to have an enhanced CRB check Update against ISA/CRB Safeguarding Action Plan to Child Protection Steering Committee meetings	Miriam Palk Suzanne Emerson -Dam	Janine Clarke	November 2011	
New Trust CRB policy to provide information and assessment tools to reflect:  CRB new guidance reviewed by NHS Employers January 2011  Recommendations from the March 2011 Vetting & Barring Scheme Remodeling Review (phase 1) currently before ministers as they are implemented.	Suzanne Emerson -Dam	Janine Clarke	March 2012	
All managers who recruit for positions working with children and young people will be specifically trained in safe recruitment and interviewing skills	Suzanne Emerson -Dam	Janine Clarke		Training plan  Pack used to deliver training
Implement 'Guidance for Safer Working Practice for Adults who Work with Children and Young People' 2009, previously adopted	Suzanne Emerson -Dam	Janine Clarke	December 2011	Clear guidance in place for staff and a standard for the Trust to make judgements about suitability to work with children and vulnerable adults.
All managers to be aware of and trained according to their role to implement 'Managing Child Protection Concerns and Allegations Policy, 2010.'	Suzanne Emerson -Dam	Janine Clarke	December 2011	
All Executive and Board members to receive training on Section 11 expectations, roles and responsibilities as detailed in 'Working Together to Safeguarding Children', 2010	Patricia Pease	Jonathan Fielden	Monitor at CP Steering committee  April, July, Nov	
<b>Demonstrate effective inter-agency working to safeguard and promote the welfare of children, including the referral for assessment to social services whenever a child spends more than three months in hospital</b>				
Establish and maintain a network of internal and external locality links to ensure communication and coordination of policy, protocol and practice	Louize Evans Ann Gordon Denise Waugh Patricia Pease	Jonathan Fielden	Monitor at CP Steering committee  April, July, Nov	Each area of the Trust will have a Safeguarding Champion and through the Named Professionals for Child Protection there will be operational links with children's services in each local authority in the West of Berkshire, CAIU and other health care providers.

Action	Individual Responsibilities	Director	Timescale	Evidence
Approval of new Safeguarding Children and Child Protection Policy	Patricia Pease	Jonathan Fielden	Approved at by the Trust Clinical Governance Board May 2011	Policy available on the Trust intranet. Minutes of the Trust Clinical Governance Committee, May 2011
Review Child Protection Protocol, 2008 against: <ul style="list-style-type: none"><li>• NICE Guidance</li><li>• Working Together</li><li>• Results of referral audit, Sept 2010</li></ul>	Louize Evans Patricia Pease	Jonathan Fielden	October 2011	Revised protocol available.
To contribute to the development of the Berkshire LSCB Child Protection Procedures by participating in reviews of and contribute to protocols for: <ul style="list-style-type: none"><li>• Domestic Abuse in the Emergency Department</li><li>• Fabricated or Induced Illness</li><li>• Alcohol and Substance Abuse in Young People</li><li>• 'Safeguarding disabled children' 2009</li><li>• 'Safeguarding Children and Young People from Sexual Exploitation' 2009</li></ul>	Louize Evans Ann Gordon Denise Waugh Janice Burnett Georgie Brown Sarah Hughes Sheila Huelin	Jonathan Fielden	Monitor at CP Steering committee April, July, Nov	
Implement the audit cycle agreed through the child protection steering committee and share results and action plans with the LSCBs of the West of Berkshire as agreed:  <b>Annually</b> <ul style="list-style-type: none"><li>• Teenage pregnancy pathway compliance</li><li>• Domestic abuse screening maternity</li><li>• Midwifery attendance and reports to child protection conference</li><li>• Child protection/child in need assessment tool</li><li>• Safeguarding children and vulnerable adults assessment tool</li><li>• Child protection awareness, 'What to do if you are worried about a child'</li></ul> <b>Six monthly</b> <ul style="list-style-type: none"><li>• Child protection medicals, Dingley</li><li>• Quality of child protection referrals</li></ul>	Louize Evans Denise Waugh  Kat Young	Jonathan Fielden	Monitor at CP Steering committee April, July, Nov	

Action	Individual Responsibilities	Director	Timescale	Evidence
<b>Share information effectively</b>				
Work towards a 'single' child health record in RBFT  Achieved by phased introduction of Electronic Patient Record (EPR)  First phase: <ul style="list-style-type: none"><li>• Accurate flagging of West of Berkshire children with child protection plans</li><li>• Include child protection/child in need assessment tool</li><li>• Include child protection referral and discussion forms</li></ul>	Elizabeth White	CEO	Monitor at CP Steering committee  April, July, Nov	
Ensure accurate and appropriate data collection to allow for reporting to the LSCBs of West of Berkshire by local authority area:  <b>Quarterly</b> Under 18 emergency admissions to hospital  <b>Six Monthly</b> Under 18s presenting to A&E with DSH Under 18s second presentation to A&E with DSH  <b>Annually</b> Hospital admissions caused by unintentional or deliberate injuries to children and young people Number of Under 18s presenting to A&E Number of Under 18s presenting to A&E Number of Under 18s presenting to A&E Number of mothers identified to have additional needs/ vulnerability by maternity per locality	Elizabeth White	CEO		
Implement the standardised, trustwide for automated letter production to parents or young people and GPs to identify children and young people who do not attend out patient appointments.  Initial phase manually Include in first phase of EPR	Patricia Pease Vanessa Harding Elizabeth White	CEO  Jonathan Fielden	October 2011	
Continue to implement the Common Assessment Framework in the Trust.  Embed the use of the new child protection/child in need assessment tool in Paediatric A&E  Expand the use of the new child protection/child in need assessment tool in to Paediatric inpatients wards	Louize Evans	Jonathan Fielden	March 2012	Increases in the number of CAFs completed where an unborn or child is identified as 'in need'.  Audit.

Child Protection Organisational Structure			
Position	Name	Contact Details	Role & responsibilities
Chief Executive Officer	Edward Donald	edward.donald@royalberkshire.nhs.uk PA Wendy Burden 0118 3227230	Caldicott Guardian Director of Clinical Standards & Quality Governance of all CYP safeguarding systems and processes including Child Protection, NSF Children and Young People, SCR/IMR process and scrutiny of statutory and mandatory compliance Member of LSCB
Chief Medical Officer Executive Director for Safeguarding	Dr Jonathan Fielden	jonathan.fielden@royalberkshire.nhs.uk PA Clare Gibb 0118 3228224	
Divisional Matron for Children & Young People, Lead for Child Protection	Patricia Pease	patricia.pease@royalberkshire.nhs.uk 0118 3228253 07795 120628	Governance and quality of CYP safeguarding systems and processes including NSF Children and young People and engagement Member of LSCB Coordination of Rapid Response and CDOP
Deputy Director Corporate Affairs, Head of Legal Services	Stephanie Seigne	stephanie.seigne@royalberkshire.nhs.uk 0118 3227156	Governance and quality of SCR/IMR process Scrutiny of statutory and mandatory compliance Member of LSCB
Head of Midwifery Divisional Matron for Women	Gill Valentine	gill.valentine@royalberkshire.nhs.uk 0118 3227269	Governance and quality of midwifery safeguarding systems and processes including NSF and engagement
Named Midwife for Child Protection	Denise Waugh	denise.waugh@royalberkshire.nhs.uk 07767 441156	Training for midwives midwifery CP operational governance Specialist Midwife for Domestic Abuse
Named Doctor for Child Protection	Dr Ann Gordon	ann.gordon@royalberkshire.nhs.uk 0118 3227439	Training for doctors CP medical governance Member of Berkshire LSCB Policy & Procedure Subgroup
Named Nurse for Child Protection	Louize Evans	louize.evans@royalberkshire.nhs.uk 0118 3228046	Training trustwide and CP operational governance Member of West of Berkshire Training Subgroup
Matron A&E	Georgina Brown	georgina.brown@royalberkshire.nhs.uk 0118 3228088	Lead in A&E for children including child protection systems and processes
Consultant Community Paediatrician	Dr Sarah Hughes	sarah.hughes@royalberkshire.nhs.uk 0118 3225213	Community Paediatrician at Dingley Specialist Children's Centre
Lead Nurse Children's Community Nursing Team	Julie Hughes	julie.hughes@royalberkshire.nhs.uk 0118 3227532	Lead for CCNT who case manage and quality assure care of children with complex health needs

Child Protection Organisational Structure			
Position	Name	Contact Details	Role & responsibilities
Operational Manager Therapies	Thea Thomson	thea.thomson@royalberkshire.nhs.uk 0118 3225440	Operational management of paediatric physiotherapists and occupational therapists
Operations Manager Paediatrics	Elizabeth Aylward	elizabeth/aylward@royalberkshire.nhs.uk 0118 3227480	Operational management of paediatric wards and units including neonatal unit
Assistant Deputy Director Human Resources	Suzanne Emerson - Dam	suzanne.emerson-dam@royalberkshire.nhs.uk 0118 3228949	Member of West of Berkshire Safe Recruitment & Allegation Management Subgroup
Designated Senior Manager for Allegations			

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