

CO15: Safeguarding Children and Cared for Children Policy



Contents

1.0	Introduction.....	4
2.0	Definitions	5
3.0	Safeguarding Children – the legislative framework	8
4.0	Governance and Accountability.....	9
5.0	Safeguarding Children Standards	10
6.0	Allegations against staff and volunteers	11
7.0	Whistle Blowing.....	11
8.0	Incidents, Near Misses and Child Safeguarding Practice Reviews	12
09.0	Implementation	13
10.0	Training Implications.....	13
11.0	Supervision.....	13
12.0	Documentation	14
13.0	Monitoring, Review and Archiving.....	14
	Appendix 1 - Equality Impact Assessment.....	15
	Appendix 2 – procedure for staff to follow if they have a child concern.....	188
	Appendix 3 - Sunderland CCG safeguarding contact details.....	19

Version Control

Version	Date Approved	Committee	Date of next review	CCG Lead
V1	28/02/2013	Quality Safety and Risk Committee	January 2014	Head of Safeguarding
V2	January 2014	Quality Safety and Risk Committee	January 2016	Head of Safeguarding
V3	September 2015	Quality Safety and Risk Committee	September 2018	Head of Safeguarding
V4	07/10/2018	Quality and Safety	October 2021	Lead Nurse Safeguarding Children/Designated Nurse Children Looked After
V5	10 August 2021	Quality and Safety	July 2024	Designated Nurse Safeguarding Children

1.0 Introduction

For the purposes of this policy, Sunderland Clinical Commissioning Group will be referred to as “the CCG”.

The CCG aspires to the highest standards of corporate behaviour and clinical competence, to ensure that safe, fair and equitable procedures are applied to all organisational transactions, including relationships with patients their carers, public, staff, stakeholders and the use of public resources. In order to provide clear and consistent guidance, the CCG will develop documents to fulfil all statutory, organisational and best practice requirements and support the principles of equal opportunity for all.

The CCG is required to fulfill its legal duties under the [Children Act 1989](#) , [Section 11 of the Children Act 2004](#), [Promoting the health and wellbeing of Looked After Children DfE, DOH 2015](#) and statutory responsibilities in [Working Together to Safeguard Children \(HM Government 2018\)](#). All staff working within the CCG’s health economy that commission or provide children’s services must make safeguarding and promoting the welfare of children an integral part of the care they offer to children and their families.

This policy outlines how as a commissioning organisation the CCG will fulfil its legal duties and statutory responsibilities effectively both within its own organisation and across its local health economy via its commissioning arrangements. The CCG will ensure it has in place robust structures, systems, standards and an assurance framework, which are in accordance with the legal structure and with Sunderland Safeguarding Children Partnership (SSCP).

The CCG’s arrangements will ensure that both its own functions and services provided on its behalf are discharged with regard to the need to safeguard and promote the welfare of children.

The CCG champions the rights of all children and young people not to be abused, neglected or exploited and to have the right to be happy, healthy, safe and productive in their contributions to society.

This policy needs to be read in conjunction with the following:

- SCCG Quality Strategy
 - SCCG Safeguarding Training Strategy
 - SCCG Safeguarding Adults Policy
 - SCCG Safeguarding Commissioning Policy
 - SCCG Domestic Violence in the Workplace Policy
 - SCCG Managing Allegations Policy
 - SCCG Safeguarding Supervision Policy
- <https://www.sunderlandccg.nhs.uk/news-media/publications/policies/>

and the multi-agency Safeguarding Children & Adults Procedures agreed by the Sunderland Safeguarding Children Partnership (SSCP) [SSCP procedures online](#) and the Sunderland Safeguarding Adults Board (SSAB) [SSAB procedures online](#)

1.1 Status

This is a corporate policy.

1.2 Purpose and scope

- 1.2.1 This policy describes how the CCG will discharge its responsibility for ensuring its own organisation and the health services it commissions, fulfill the duty to safeguard and promote the welfare of children. The CCG will ensure compliance with the requirements [Section 11 of the Children Act 2004](#), Statutory Guidance on [Promoting the health and wellbeing of looked-after children DH 2015](#) and [Working Together to Safeguard Children \(HM Government 2018\)](#)
- 1.2.2 This policy applies to all staff employed by the CCG - including any agency, self-employed or temporary staff.
- 1.2.3 All managers must ensure their staff are made aware of this policy and how to access it and ensure its implementation in their line of responsibility and accountability.
- 1.2.4 All CCG personnel have an individual responsibility for the protection and safeguarding of children and must know what to do if concerned that a child is being abused or neglected. All CCG staff have a statutory duty to report child protection concerns and need to discuss any concerns about a child or adult with their line manager and/or the CCG Safeguarding team. All concerns should be reported to the relevant Local Authority. See Appendices 1 and 2 (For Sunderland – see the Sunderland Safeguarding Children Partnership - Safeguarding Children Procedure)

2.0 Definitions

- 2.1 [Working Together to Safeguard Children \(HM Government 2018\)](#) definitions are used throughout this Policy:

- 2.1.1 **Child or young person:** In this document, as in the [Children Act 1989](#) and [Children Act 2004](#) a '**child**' is anyone who has not yet reached their 18th birthday. For disabled children this will be inclusive of those up to and including 18 years of age. The fact that a child has reached 16 years of age, is living independently or is in further education does not change their entitlement to services or protection under the [Children Act 1989](#) (para.1.19). Where '**child**' or '**children**' is used in this document, this refers to children and young people.

2.1.2 Safeguarding and promoting the welfare of children is the process of protecting children from abuse or neglect and/or preventing impairment of their health or development. This includes ensuring children are growing up in circumstances consistent with the provision of safe and effective care so as to enable them to have optimum life chances and to enter adulthood successfully.

2.1.3 Looked after Children (LAC) known locally in Sunderland as **Cared for Children (CfC)** - This term applies to children currently being looked after and/or accommodated by Local Authorities/Health and Social Care Trusts, including unaccompanied asylum-seeking children those children in custody and those children where the agency has authority to place the child for adoption.

2.1.4 Child Protection – This is part of safeguarding and promoting children’s welfare. Child protection refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm. [Working Together to Safeguard Children \(HM Government 2018\)](#) defines **four categories of abuse**:

- **Physical**
- **Emotional**
- **Sexual**
- **Neglect**

2.1.5 The concept of significant harm - some children are in need because they are suffering, or likely to suffer, significant harm. The Children Act 1989 introduced the concept of significant harm as the threshold that justifies compulsory intervention in family life in the best interests of children. It gives local authorities a duty to make enquiries to decide whether they should take action to safeguard or promote the welfare of a child who is suffering, or likely to suffer, significant harm.

2.1.6 All staff in health care settings should receive training at level one or above in line with the SCCG Safeguarding Training Strategy dependent on their role and responsibility and be able to recognise potential signs/indicators of the above. In addition, all staff are expected to understand how to respond to wider aspects of safeguarding children as outlined in sections 2.1.7 – 2.1.12. See also section 3.5

2.1.7 Domestic Abuse – the definition of domestic violence and abuse now states: Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality - [SSCP DA](#)

2.1.8 Forced Marriage - In forced marriage, one or both spouses do not consent to **the** marriage and some element of duress is involved. Duress can include physical, psychological, financial, sexual and emotional pressure. Forced Marriage **cannot** be justified on religious or cultural grounds - [SSCP FM](#)

2.1.9 Female Genital Mutilation (FGM) - FGM is illegal in England and Wales under the [FGM Act 2003](#). In 2015 the Government introduced a [Mandatory Reporting duty 2015](#) which requires regulated health and social care professionals and teachers in England and Wales to report 'known' cases of FGM in children/young people under 18 years of age to the police. The duty is a personal one and professionals are individually responsible for reporting.

2.1.10 Child Sexual Exploitation - Child Sexual Exploitation (CSE) is a form of Sexual Abuse and can have a serious impact on every aspect of the lives of children involved. It involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g., food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example, being persuaded to post sexual images on the internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources

2.1.11 Child Abuse and the Internet - 'Internet Abuse' relates to three main areas of sexual abuse to children:

- Child pornography (abusive images).
- A child or young person being groomed for the purpose of sexual exploitation or criminal exploitation.
- Exposure to pornographic or other offensive material on the Internet. [SSCP E-Safety](#)

2.1.12 PREVENT – Supporting individuals vulnerable to violent extremism The national Prevent strategy ensures action to ensure that vulnerable children and adults, who are at risk of the abusive process of radicalisation, receive protection and support. Radicalisation is defined as the process by which a person comes to support terrorism and forms of extremism leading to terrorism. To ensure that the Prevent agenda is both effective and efficient it was agreed that across the Northumbria Police force area it must be mainstreamed and embedded within existing local safeguarding practices.

2.1.13 County lines – is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs into one or more importing areas within the UK, using dedicated mobile phone lines or other form of ‘deal line’. They are likely to exploit children and vulnerable adults to move and store the drugs and money, and they will often use coercion, intimidation, violence (including sexual violence) and weapons. [SSCP County Lines](#)

2.2.14 Child criminal exploitation - where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or the threat of violence. The victim may have been criminally exploited even if the activity appears consensual. Child criminal exploitation does not always involve physical contact; it can also occur through the use of technology. [SSCP criminal exploitation](#)

3.0 Safeguarding Children – the legislative framework

3.1 [The Children Act 1989](#) provides a comprehensive framework for the care and protection of children. The fundamental principle that underpins the act is that the welfare of the child (under 18 years) is paramount.

3.2 From 1 April 2013 all CCGs have a statutory duty under the [Children Act 2004](#) to make arrangements for ensuring that its own functions, and services provided on its behalf, are fulfilled with regard to the need to safeguard and promote the welfare of children.

3.3 As vulnerable children and adults face more challenges and the NHS commissioning system matures, it is important to have a framework that sets out with greater clarity the responsibilities of each part of the system and the key individuals who work within it. This policy complies with the [Safeguarding children, young people and adults at risk in the NHS: Safeguarding accountability and assurance framework 2015 \(updated September 2019\)](#).

3.4 [Working Together to Safeguard Children 2018](#) outlines how organisations and individuals should work together to safeguard and promote the welfare of children and provides clear direction for those responsible for commissioning and providing health services.

3.5 [Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff - Intercollegiate document January 2019](#) and [Looked after Children: roles and competencies for healthcare staff December 2020](#) set out levels of competencies, which all staff working in health care settings are expected to achieve. All staff must ensure they have the required skills, knowledge and competency for their role as set out in this document. These competencies are the minimum requirement for safeguarding children training and are used by the Care Quality Commission when inspecting health services.

- 3.6** The National Institute for Clinical Excellence [NICE Guidance 76](#) provides all NHS staff with guidance about when health staff should consider and when they should suspect child maltreatment and what to do about it.
- 3.7** This CCG Policy should be read in conjunction with Sunderland Safeguarding Children Partnership (SSCP) multi-agency procedures and Sunderland Safeguarding Adults Board (SSAB) multi-agency procedures, which state what staff must do where child abuse or neglect is considered, suspected or alleged and promote the importance of safeguarding the “whole family” by considering the safeguarding needs of both children and adults.

4.0 Governance and Accountability

- 4.1** The CCG Governing Body is responsible for making certain all its provider services have arrangements in place to meet statutory requirements relating to safeguarding and promoting the welfare of children and young people and that these arrangements are being complied with. The CCG governing body will assure itself that safeguarding children is a priority across the health economy and will receive regular reports and updates with reference to safeguarding children matters across its health economy.
- 4.2** The CCG has a key statutory role, along with the Local Authority and the Police to ensure there are robust safeguarding children arrangements in place across Sunderland as outlined in the [Children and Social Work Act 2017](#). The CCG will ensure effective leadership, commissioning and governance of safeguarding children services across the local health community by:
- Ensuring a robust governance structure is in place to support the work of the SSCP and the CCG Governing Body in delivering safeguarding children's responsibilities.
 - Ensuring all commissioned services are fully aware of their local and statutory responsibilities regarding safeguarding children and that the CCG's commissioning, contracting, contract monitoring and quality assurance processes fully reflect this.
 - Ensuring service specifications, invitations to tender and service contracts fully reflect safeguarding requirements as outlined in this policy with specific reference to the clear standards for service delivery.
 - Monitoring safeguarding children compliance both within the CCG and across commissioned services, addressing weaknesses as a matter of priority.
 - Supporting Child Safeguarding Practice Reviews and their subsequent action plans and ensuring that learning from these is reflected in the strengthening of commissioning, quality assurance and practice.
 - Ensuring a system is in place for escalating risks.

4.3 The objective of a Sunderland Safeguarding Children Partnership (SSCP) established under [section 13 of the Children Act 2004](#) is —

- (a) to co-ordinate what is done by each person or body represented on the Partnership for the purposes of safeguarding and promoting the welfare of children in the area of the authority by which it is established; and
- (b) to ensure the effectiveness of what is done by each such person or body for those purposes.

4.3.1 [Part 2 of the 2017](#) legislation abolished the statutory Local Safeguarding Board (LSCB) and allowed the 3 key statutory partners to determine how safeguarding children arrangements will be governed. The LSCB was replaced by the Sunderland Safeguarding Children Partnership (SSCP)

4.4 The CCG Chief Officer, Executive Lead and the Designated Professionals are members of the SSCP

4.5 The Executive Safeguarding Children's lead in the CCG is the Director of Nursing, Quality and Safety.

4.6 The Safeguarding Lead in the CCG is the Designated Nurse Safeguarding Children.

4.7 The Designated Nurse Safeguarding Children is supported by a team of doctors and nurses undertaking the statutory named and designated roles outlined in [Working Together to Safeguarding Children 2018](#) , and supporting safeguarding children, Cared for children and child death review arrangements. See appendix 2 for contact details. Also provide safeguarding supervision and peer review to other lead professionals across the health economy. The Named and Designated Professionals have clear job descriptions and specific work plans. They access personal supervision/peer review and support a range of local and regional specialist networks and forums.

5.0 Safeguarding Children Standards

5.1 The CCG ensures clear service standards for safeguarding children and promoting their welfare are included in all commissioning arrangements as appropriate to the service. These can be found in the SCCG Safeguarding Commissioning Policy and the self-assessment tool enables providers to monitor themselves against their statutory responsibilities.

5.2 The CCG seeks additional assurance from providers from quarterly safeguarding dashboards reviewed at the CCG Designated and Named Safeguarding Assurance Group. Safeguarding arrangements are regularly reviewed at Quality Review Groups and reported to the Quality Surveillance Groups and NHS E Safeguarding Forum.

6.0 Allegations against staff and volunteers

- 6.1** The SSCP Procedures [Allegations](#) outline the agreed arrangements for responding to allegations against staff, carers and volunteers in line with Working Together to Safeguarding Children 2018. When the behaviour of a member of staff gives rise for concern these procedures must be followed.
- 6.2** The aim of the procedure is to afford greater safeguarding to children with regard to those working with them and to allow for allegations and concerns to be dealt with expeditiously, fairly, thoroughly and avoiding delays.
- 6.3** The procedures apply when an allegation or concern has arisen that a person who works with children has:
- Behaved in a way that has harmed a child or may have harmed a child.
 - Possibly committed a criminal offence against or related to a child.
 - Behaved towards a child or children in a way that indicates he/she is unsuitable to work with children.
- 6.4** The CCG Director of Nursing is the Designated Officer dealing with allegations against staff and is responsible for:
- Ensuring that the organisation deals with allegations in accordance with the SSCP procedure and the CCG's own HR policies and procedures.
 - Instigating a serious incident if appropriate.
 - Resolving any inter-agency issues.
- 6.5** On receiving an allegation, and if the allegation meets the criteria detailed in procedures, the Designated Officer will report it to the applicable Local Authority Designated Officer within 1 working day. The LADO's role is to:
- Be involved in the management and oversight of individual cases and monitor their progress.
 - Provide advice and guidance to employers and voluntary organisations.
 - Liaise with the police and other agencies.

7.0 Whistle Blowing

- 7.1** The [Freedom to speak up: raising concerns \(whistleblowing\) policy for the NHS 2016](#) enables concerns about malpractice to be raised at an early stage and in the right way without fear of reprisals or concern for safety. Safeguarding children issues should continue to be referred through as per SSCP procedures.

8.0 Incidents, Near Misses and Child Safeguarding Practice Reviews

- 8.1** The CCG will assure itself that all providers have in place policies, which ensure that employees record any near misses, incidents, unmet needs or serious incidents in relation to safeguarding children on their incident management forms and systems. All near misses, incidents or unmet needs will be investigated and managed by the relevant line manager in accordance with their incident management policies. A variety of reviews may be conducted following serious incident or near miss.
- 8.2** All providers and commissioners will notify the Designated Nurse Safeguarding Children of serious incidents when the child/children could become the subject of a Child Safeguarding Practice Review. The CCG has a statutory duty to work in partnership to support local arrangements for undertaking Child Safeguarding Practice Reviews and those undertaken by the national panel as in accordance with Chapter 4 in [Working Together to Safeguarding Children 2018](#) .
- 8.3** The Designated Nurse Safeguarding Children will inform NHS England within five days of when a Child Safeguarding Practice Review is commissioned.
- 8.4** The CCG is required by the SSCP to commission a review of primary care services and to ensure that all Providers identify personnel to support the review process. The Executive Lead for safeguarding or their nominated deputy will formally sign off the individual agency review for their organisation.
- 8.5** The Designated Professionals will ensure that there is a review and evaluation of the practice of all involved health professionals. The designated professionals will provide leadership and support Safeguarding Children's Partnership in managing the Children Safeguarding Practice Review process, and quality assuring the process, reports and subsequent action plans.
- 8.6** Organisations will ensure that named and designated professionals are given sufficient time and necessary support the process.
- 8.7** Staff who have been involved in cases that are subject to review will be supported by their managers and the relevant named or designated professionals.
- 8.8** The Designated Professionals will ensure wide dissemination of learning from reviews across the health economy and ensure all providers support the board in delivery of learning sessions across the partnership.

8.9 The CCG will act on the relevant recommendations arising from reviews, which will be monitored by the Quality and Safety Committee, the Designated and Named Safeguarding Assurance Group and NHS England.

9.0 Implementation

9.1 This policy will be available to all Staff for use in the circumstances described on the title page.

9.2 All managers are responsible for ensuring that relevant staff within the CCG have read and understood this document and are competent to carry out their duties in accordance with the procedures described.

10.0 Training Implications

10.1 All staff in the CCG will be trained and competent to be alert to potential indicators of abuse and neglect in children, know how to act on their concerns and fulfil their responsibilities in line with SSCP procedures and the [SCCG Safeguarding Training Strategy](#).

10.2 All CCG staff will adhere to the mandatory safeguarding children training programme and complete the level of training commensurate with their role and responsibilities.

10.3 The CCG will keep a training database detailing the uptake of all staff training so that Directors can be alerted to unmet training needs.

10.4 The Designated Nurse will ensure CCG staff are aware of any new guidance or legislation and any recommendations from local and national Child Safeguarding Practice Reviews and Internal Management Reviews.

11.0 Supervision

11.1 Designated Professionals should receive one to one supervision as a minimum on a quarterly basis and have access to ad hoc supervision as required.

11.2 The Designated professionals for safeguarding children are responsible for provision of safeguarding children supervision and support to the Named professionals within the CCG's health economy both on a formal basis quarterly and on an ad hoc basis.

11.3 Support and supervision regarding safeguarding children is available from the Designated Professionals to all employees of the CCG. The level of the employee's involvement with children will determine the frequency of the supervision and this will be agreed in discussion with the Designated Professionals and in accordance with the CCG Safeguarding Supervision Policy.

12.0 Documentation

12.1 Related Policy documents

- Confidentiality & Data Protection Policy
- Information Governance and Risk Policy
- Information Access Policy
- Information Security Policy
- Records management Policy & Strategy
- Serious incidents Management Policy
(<http://sunderlandccg.nhs.uk/news-media/publications/policies/>)

13.0 Monitoring, Review and Archiving

13.1 Monitoring

The governing body will agree a method for monitoring the dissemination and implementation of this policy. Monitoring information will be recorded in the policy database.

13.2 Review

The governing body will ensure that this policy document is reviewed in accordance with the timescale specified at the time of approval. No policy or procedure will remain operational for a period exceeding three years without a review taking place.

13.3 Staff who become aware of any change which may affect a policy should advise their line manager as soon as possible. The governing body will then consider the need to review the policy or procedure outside of the agreed timescale for revision.

13.4 For ease of reference for reviewers or approval bodies, changes should be noted in the 'document history' table on the front page of this document.

NB: If the review consists of a change to an appendix or procedure document, approval may be given by the sponsor director and a revised document may be issued. Review to the main body of the policy must always follow the original approval process.

13.5 Archiving

The governing body will ensure that archived copies of superseded policy documents are retained in accordance with Records Management: NHS Code of Practice 2009.

Equality Impact Assessment Initial Screening Assessment (STEP 1)

As a public body organisation we need to ensure that all our current and proposed strategies, policies, services and functions, have given proper consideration to equality, diversity and inclusion, do not aid barriers to access or generate discrimination against any protected groups under the Equality Act 2010 (Age, Disability, Gender Reassignment, Pregnancy and Maternity, Race, Religion/Belief, Sex, Sexual Orientation, Marriage and Civil Partnership).

This screening determines relevance for all new and revised strategies, policies, projects, service reviews and functions.

Completed at the earliest opportunity it will help to determine:

- The relevance of proposals and decisions to equality, diversity, cohesion and integration.
- Whether or not equality and diversity is being/has already been considered for due regard to the Equality Act 2010 and the Public Sector Equality Duty (PSED).
- Whether or not it is necessary to carry out a full Equality Impact Assessment.

Name(s) and role(s) of person completing this assessment:

Name: Wendy Proctor

Job Title: Designated Nurse Adult Safeguarding

Organisation: Sunderland CCG

Title of the service/project or policy: Safeguarding Children and Children Cared For Policy

Is this a;

Strategy / Policy

Service Review

Project

Other [Click here to enter text.](#)

What are the aim(s) and objectives of the service, project or policy:

To advise the Quality and Safety Committee of key changes /updates to the policy

Who will the project/service /policy / decision impact?

(Consider the actual and potential impact)

- **Staff**
- **Service User / Patients**
- **Other Public Sector Organisations**
- **Voluntary / Community groups / Trade Unions**
- **Others, please specify** [Click here to enter text.](#)

Questions	Yes	No
Could there be an existing or potential negative impact on any of the protected characteristic groups?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Has there been or likely to be any staff/patient/public concerns?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Could this piece of work affect how our services, commissioning or procurement activities are organised, provided, located and by whom?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Could this piece of work affect the workforce or employment practices?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Does the piece of work involve or have a negative impact on: <ul style="list-style-type: none"> • Eliminating unlawful discrimination, victimisation and harassment • Advancing quality of opportunity • Fostering good relations between protected and non-protected groups in either the workforce or community 	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If you have answered no to the above and conclude that there will not be a detrimental impact on any equality group caused by the proposed policy/project/service change, please state how you have reached that conclusion below:

This policy has been reviewed and refreshed there are no significant changes or detrimental impact on any equality group caused by this refreshed policy

If you have answered yes to any of the above, please now complete the 'STEP 2 Equality Impact Assessment' document

Accessible Information Standard	Yes	No
Please acknowledge you have considered the requirements of the Accessible Information Standard when communicating with staff and patients. https://www.england.nhs.uk/wp-content/uploads/2017/10/accessible-info-standard-overview-2017-18.pdf	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Please provide the following caveat at the start of any written documentation: “If you require this document in an alternative format such as easy read, large text, braille or an alternative language please contact (ENTER CONTACT DETAILS HERE)”		
If any of the above have not been implemented, please state the reason: Click here to enter text.		

Governance, ownership and approval

Please state here who has approved the actions and outcomes of the screening		
Name	Job title	Date
Wendy Proctor	Designated Nurse Adult Safeguarding	19/07/2021
Presented to (Appropriate Committee)		Publication Date
Quality and Safety Committee		October 2021

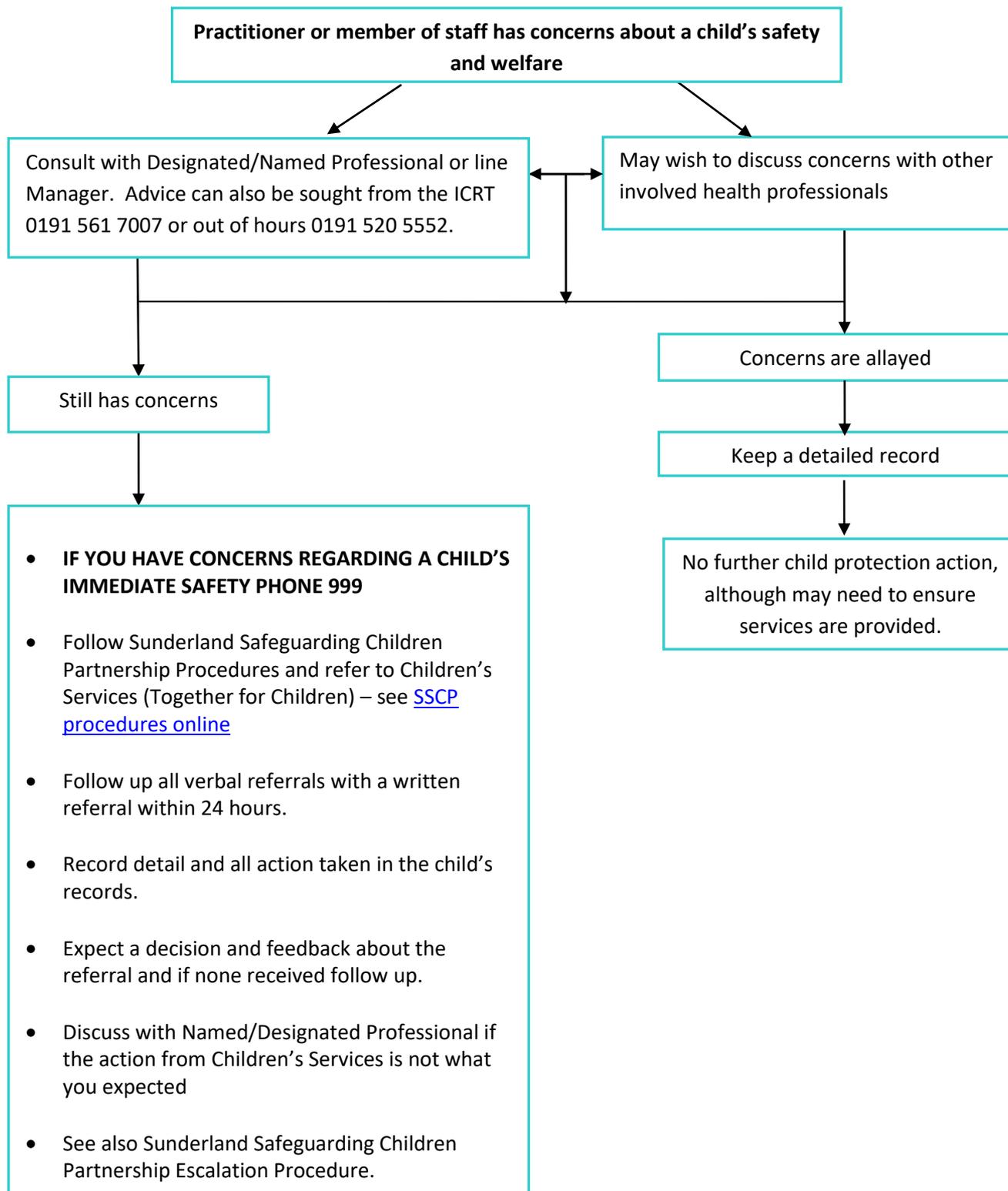
Publishing

This screening document will act as evidence that due regard to the Equality Act 2010 and the Public Sector Equality Duty (PSED) has been given.

If you are not completing 'STEP 2 - Equality Impact Assessment' this screening document will need to be approved and published alongside your documentation.

Please send a copy of this screening documentation to:
NECSU.Equality@nhs.net for audit purposes.

Appendix 2 – Procedure for staff to follow if they have a child concern



Appendix 3 - Sunderland CCG safeguarding contact details

Sunderland CCG Safeguarding Team Telephone: 0191 5128290 SCCG Generic Email: SUNCCG.SunderlandCCGsafeguardingTeam@nhs.net		
Name	Designation	Contact
Ann Fox	Director of Nursing, Quality and Safety. Executive Lead for Safeguarding	Mobile: 07768232275 ann.fox3@nhs.net
Children		
Stephen Edgeley	Designated Nurse Safeguarding Children (job share)	Mobile: 07771358202
Gary Stokes		Mobile: 07384546102
Shared safeguarding children email: sunccg.safeguardingchildrenteam@nhs.net		
Jo Morgan	Designated Nurse LAC	Mobile: 07825025974 jo.morgan1@nhs.net
Generic LAC email: sunccg.LAC@nhs.net		
Maria Farrow-Tait	Interim Named Nurse Primary Care Safeguarding Children (0.5) Safeguarding Adults (0.5)	Mobile: 07770971863 mariafarrow-tait@nhs.net
Dr Sian Firth	Named GP for Safeguarding Children - Sunderland	Mobile: 07919540082 Sian.firth@nhs.net
Dr Kim Barrett	Designated Doctor Safeguarding Children (Sunderland CCG)	Mobile: 07823327770 Kim.barrett@nhs.net
Dr Sarah Mills	Designated Doctor LAC (Sunderland CCG)	Mobile: 07899935688 Sarah.mills23@nhs.net
Dr Carl Harvey	Designated Paediatrician Child Death (Sunderland CCG)	Tel: 0191 5656256 carl.harvey1@nhs.net
Referral to Sunderland Children's Services	Office hours: 0191 520 5560 Out of hours: 0191 520 5552 Safeguarding.children@togetherforchildren.org.uk	
Adult Safeguarding		
Wendy Proctor	Designated Nurse Safeguarding Adults Sunderland	Mobile: 07796938519 wendyproctor@nhs.net
Dr Chandra Anand	Named GP Safeguarding Adults Sunderland	Mobile: 07980 942635 chandra.anand@nhs.net
Maria Farrow-Tait	Safeguarding Nurse Children and Adults	Mobile: 07770971863 mariafarrow-tait@nhs.net
Referral to Safeguarding Adults Sunderland	0191 561 8934 / 0191 561 8936 Out of Hours 0191 520 5550 Email: Safeguarding.adults@sunderland.gov.uk	
Admin support		
Jaclyn Hall	Quality & Safeguarding Admin Support Officer	Tel: 0191 512 8486 Jaclyn.hall@nhs.net
Sheila Webster	Safeguarding Administration Support Officer	Tel: 0191 512 8457 Sheila.webster3@nhs.net
Toni Taylor	Safeguarding & Quality Admin Support Officer	0191 512 8475 Toni.taylor1@nhs.net