

**PROTOCOL ON THE INFORMATION SHARING ARRANGEMENTS BETWEEN
THE THAMES VALLEY LOCAL SAFEGUARDING CHILDREN BOARDS, NHS
England (THE COMMISSIONERS)
and THE SEXUAL ASSAULT REFERRAL CENTRES (THE PROVIDERS)**

Summary:

This protocol sets out the arrangements between Thames Valley Local Safeguarding Children Boards (LSCBs), Thames Valley Police, NHS England and the Sexual Assault Referral Centres (SARC) as recommended by the Royal College of Paediatrics and Child Health (RCPCH).

Each of the organisations has distinctive and complementary roles in keeping our children safe.

The aim of this protocol is to support the organisations to operate effectively, being clear about their respective duties, inter-relationships and roles and responsibilities of all those involved in this important work.

Introduction:

The Children Act 1989 provides the statutory framework for safeguarding and promoting the welfare of children in need. Safeguarding and promoting the welfare of children is defined as including:

- Protecting children from maltreatment
- Preventing impairment of children's health or development
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care, and
- Undertaking that role so as to enable those children to have optimum life chances and to enter adulthood successfully.

Purpose:

The purpose of the protocol is to strengthen relationships between the NHS England, Thames Valley Police, SARCs and the LSCBs by building good communication links and agreement on how information is provided. The Protocol should also ensure effective arrangements are in place for reporting which ensure complainants under 18 are appropriately seen and the relevant supporting parties are informed.

1. SARCs

SARCs are specialist medical and forensic services for anyone who has been raped or sexually assaulted/abused/exploited. Medical Services are free of charge and provided to women, men, young people and children. The SARCs accept referrals of young people and children (0-18) who have suffered an acute sexual assault/abuse, and there is also provision for examination of historic cases via appointment. Referrals can also be made directly by the police, young people themselves or via a third party, including other professional agencies.

The provider of the SARC will ensure it:

- provides the NHS with quarterly data and an annual report that can be used by the LSCBs; including evidence of S11 compliance;
- provides case information for each case as it happens and maintain close contact with the relevant local authority when complainants have attended the SARC;
- reports incidents to the police and local authority promptly.
- responds to concerns raised by the commissioner or LSCBs about the service where this impacts on safeguarding;

2. NHS England

NHS England is an autonomous non-departmental public body, which operates within the wider health and social care system. Its overarching role is to ensure that the NHS delivers continuous improvements in outcomes for patients within the resources available. NHS England will fulfil this role through its leadership of the reformed commissioning system and working in partnership with clinical commissioning groups (CCGs) and a wide range of stakeholders.

The new system of commissioning for the NHS requires NHS England to provide national consistency in areas like quality, safety, access and value for money, whilst promoting the autonomy of CCGs to make decisions that are in the best interests of their community and working within the legal framework set by the Health and Social Care Act 2012.

One of NHS England's responsibilities is to directly commission Sexual Assault Services in collaboration with Police Forces, who commission the forensic medical aspects and related support; Local Authorities on going support and social care and Police and Crime Commissioners and their Community Safety Partnerships.

The Thames Valley Area Team is lead commissioner for the SARC in the Thames Valley Police area

NHS England TV area team will ensure:

- the LSCBs are informed of performance issues that impact on safeguarding:
Specifically:
 - How many cases of people under the age of 18 years are seen at the SARC with postcodes for the relevant area
 - Information about any trends that emerge from the data
 - Any key safeguarding concerns
- and be responsible for transfer of quarterly data and an annual report on the service to the LSCBs as part of their performance management role; ensuring compliance of S11
- that the information passed to LSCBs is done so in a secure manner.

3. Thames Valley Local Safeguarding Children Boards (LSCBs)

In the Thames Valley there are nine local safeguarding children boards; one for each of the nine local authority areas. The LSCB is a statutory partnership created under the Children Act 2004 with statutory guidance on making arrangements to safeguard and promote the welfare of children and has responsibility for agreeing how relevant local organisations will co-operate to achieve this. Its role is to monitor and evaluate the effectiveness of local arrangements made by individual agencies and the wider partnership. The LSCB is a statutory partnership. It is not a delivery body; it is a scrutiny body and as such requires partner agencies to provide information in order for it to fulfil its scrutiny role.

The LSCBs will:

Provide a secure single point of contact for information to be transferred from the provider or commissioner for distribution to all nine LSCB's.

- Produce and publish an Annual Report on the effectiveness of safeguarding arrangements within their local area ;
- Work with commissioners and the provider to ensure that partner agencies provide appropriate and relevant information in order to deliver the service;
- Scrutinise quarterly data and challenge where necessary.

In order for services to be effective the LSCBs, NHS England and the SARC will:

- Have an ongoing and direct relationship, communicating regularly through identified lead individuals;
- Work together to ensure action taken by one body does not duplicate that taken by another;
- Work together to ensure there are no unhelpful strategic or operational gaps in policies, protocols, services or practice;
- Develop a clear approach to understanding the effectiveness of current services and identifying priorities for change – including where services need to be improved, reshaped or developed;
- Ensure effective approaches are made to understand the impact of specialist services on outcomes for children, young people and families and use this understanding constructively to challenge lack of progress and drive further improvement.
- Ensure this protocol has been agreed by all parties and will be reviewed on an annual basis.

This document is not legally binding and cannot constrain either organisation in exercising their respective roles and responsibilities and recognises our respective statutory responsibilities.

Approved by SARC Board 16.9.2013