



# NORTH WALES SAFEGUARDING CHILDREN'S BOARD

## KEY MESSAGES

### **From meeting held on Friday 8<sup>th</sup> September 2017**

- Overview given of the Lessons Learnt from a Learning Event which involved Senior Managers from Social Care, Health and North Wales Police. Key findings included greater awareness around Skeletal Surveys process (See attached Briefing Paper)
- Presentation on the initial findings from the Knife Crime sub group meeting and a good practice example shared by Flintshire and Wrexham Youth Justice Service regarding the Knife's Edge Educational Awareness DVD
- Updated Quality Assurance Framework approved which includes some key performance data which will be shared at the Board every six months
- Reports were received by the Board regarding key Child Protection Indicators from each Local Authority for 2016/17. Key themes identified included:
  - Neglect followed by Emotional Abuse was the main registration category on the Child Protection Registers in North Wales
  - Four of the Six Authorities during 2016/17 had seen a reduction in the number of Children on the Child Protection Register
- Update provided in relation to National Safeguarding Week (13<sup>th</sup> to the 17<sup>th</sup> November)
- Update provided in relation to the Children Board's key priorities including the NSPPC Harmful Sexual Behaviour Project
- Reference made to the Learning from the Serious Case Review in Bradford regarding CSE (see attached Learning Points).



## **SKELETAL SURVEYS/ – BRIEFING PAPER**

A full skeletal survey is recommended in all children less than two years of age where physical abuse is suspected.

The purpose of the skeletal survey is to:

- Detect and date fractures
- Provide information on bone density and skeletal abnormalities

Decisions on whether a skeletal survey is indicated in a possible child protection case will normally be taken by a senior paediatrician, based on national guidance and on careful assessment of the case in conjunction with a paediatric radiologist and relevant multi agencies. In general, skeletal surveys should only be performed on children aged less than 24 months where there is a concern about possible non-accidental injury.

Parents or a carer holding parental responsibility should consent to the skeletal survey. Informed consent should be obtained by a senior paediatrician (registrar or above).

Reporting of skeletal survey requires careful attention to a number of images. It should be done by a radiologist who is trained and has experience in the field. The report will usually be available within 24hrs.

Multi Agency Practitioners in attendance at Child Protection Meetings will need to be aware that a follow up skeletal survey may take place

### **Follow-up**

A single skeletal survey may miss fractures, particularly of the ribs or bone ends (metaphyseal). A second skeletal survey after 11-14 days maybe required, particularly if the first skeletal survey was negative.

The purpose of the second skeletal survey is to:

- Check suspicious or unconfirmed findings on the initial survey ( e.g. to confirm normal variants)
- To look for additional injury (e.g. ribs and metaphyseal fractures not visible on the initial survey)

- To give more information about the age of a fracture

It is important practitioners are aware that the follow up skeletal survey may identify further issues for consideration in relation to the Child Protection Enquiry.



## **Overview of the Serious Case Review in Bradford**

This serious case review concerns the case of Jack, a teenage boy living in the Bradford area. The Bradford Safeguarding Children Board (BSCB) Serious Case Review Panel considered the case of Jack in 2015.

The panel concluded that there was compelling evidence that Jack had been sexually abused by multiple adult males and that this abuse commenced when he was 13 years old. It was apparent that agencies first became aware of the risk of sexual abuse in August 2010

### **Key Learning for all agencies across North Wales:**

- Ensure that the response to all safeguarding referrals is in accordance with the All Wales Child Protection Procedures
- Information Sharing between Key Partner agencies was not evident within this case and so it is crucial that agencies where appropriate share information regarding Children at Risk
- The need for all agencies working with Children at Risk of CSE to consider preventative measures to reduce the risk of CSE
- The failure to hold an initial Child Protection Conference and the over reliance of the use of CSE Strategy Meeting to monitor the young person's progress failed to keep him safe. It is important that all agencies who attend CSE strategy or panel meetings are aware of the need to consider an initial Child Protection Conference.
- Ensuring that supervision provided to front line staff working in Child Protection promotes good standards of practice and supports the individual staff member.