

Pre and early post-birth tracking Terms of Reference

Head of Assessment and Safeguarding

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1. Background

1.1 All partners have a responsibility under Working Together to Safeguard Children 2018 to work together to safeguard children in need of protection and ensure that the right systems are in place to support this.

1.2 The National Service Framework for Children, Young People and Maternity Services (2004) recommends that Maternity Services and Children's Social Care have in place joint working arrangements to respond to concerns about the welfare of an unborn baby and his/her future, due to the impact of the parents' needs and circumstances.

- 1.3 The number of serious incidents involving the non-accidental injury of babies under 12 months of age, often resulting in their death or life-long impairment, is significant (National Review panel 2020).
- 1.4 In Somerset, we know from serious case reviews and child safeguarding practice reviews that there is a need to focus on the quality and consistency of practice with younger children, during the pre-birth period. This should include the early identification of risk and close multi-agency assessment and intervention to ensure that babies and young children are kept safe.

2. Purpose

- 2.1 For Service leads from Midwifery, Children's Social Care (CSC) and Public Health Nursing (PHN), to have oversight of assessment and planning for vulnerable unborn and newborn babies open to CSC either under assessment, in receipt of support as a Child in Need, subject to a Child Protection Plan or as a Child Looked After in a parent(s) & child placement.
- 2.2 The purpose of the oversight is
- (i) to ensure that agencies are working together in the pre-birth period to assess need and risk
 - (ii) to ensure that pre and post-birth support and planning is timely. This oversight will continue for the first 28 days post-birth in the community or until a mid-point review (6 - 8 weeks) of a parent(s) & child placement.
- 2.3 Where there is concern that communication and joint working is not effective, actions will be agreed to understand and facilitate improvement. The service leads will be responsible for addressing any actions that are required from managers and practitioners within their own service.
- 2.4 Pre and early post-birth tracking does not replace usual safeguarding practices and procedures or processes including good quality line management supervision.
- 2.5 The meetings will ensure that pre-birth planning follows the South West Child Protection Procedures (SWCPP) Pre-Birth Protocol and Effective Support for Children and Families in Somerset guidance.

3. General responsibilities of the group

- 3.1 To share information that supports early identification and response to pregnancies, enabling timely assessments and monitoring.
- 3.2 To establish that all 3 agencies have a named professional allocated to the baby, if not the individual service lead will facilitate this.
- 3.3 To give collective assurance that pre-birth assessments and interventions are being undertaken in a timely fashion from time of notification of pregnancy to support best outcomes.
- 3.4 To agree service and practitioner actions which prevent any unnecessary drift in the pre-birth processes and ensure that the pre-birth timeline is being followed.
- 3.5 To identify cross cutting themes in relation to pre and post-birth assessment and multi service/agency working and agree/suggest plans to address gaps in provision.
- 3.6 To ensure that practitioners from all three services are receiving appropriate and timely supervision in respect of the assessment and planning for the baby.
- 3.7 To support good communication and understanding of any concerns between all agencies.
- 3.8 For service leads to facilitate practitioner feedback of any learning which can support practice improvements.

4. Meeting structure

4.1 Frequency

Monthly in each locality.

4.2 Locations as per CSC geographical localities

- South Somerset
- Mendip
- Taunton and West Somerset

- Sedgemoor

4.3 Attendees

- CSC Locality Operations Manager/Deputy
- Named Midwife for Safeguarding Children/Deputy
- Named PHN for Safeguarding Children/Deputy
- Guest where indicated Named Nurse for Safeguarding Children TFNHST

(where possible the senior lead professional from each agency should attend)

4.4 Cohort to be reviewed

- All identified unborn babies from the time of pregnancy being identified, up until 28 days post-birth in the community that are, at the time of meeting, open to CSC in assessment, as a Child in Need or subject to a Child Protection Plan.
- Babies who are in a Parent(s) & Child Placement from birth will be reviewed until the mid-point placement review (6 – 8 weeks) to enable oversight of the plan, particularly if parent(s) and child are returning to the community.
- The cohort to be reviewed will be identified by the Named Midwife/Deputy. This will be unborn babies referred to CSC. CSC will identify any unborn or newborn babies not identified by Midwifery Services using SSRS & LCS.

4.5 Standing agenda

- Review of the assessment and planning for identified unborn and newborn babies.
- Identification of themes/issues and agreement about how these will be taken forward to support practice improvements.

5. Chair Responsibility

- Meetings will be chaired by the Named Midwife for Safeguarding in Somerset (Somerset NHS Foundation Trust Safeguarding Service)
- Organisation of meetings e.g. arranging venue/virtual meeting and sending invitations.
- Creation of the list of families to be discussed (Appendix 1)

- Collation of relevant information provided from the attending agencies to populate the record of the meeting (Appendix 1)
- Compiling action log with agreement of group (Appendix 1)

6. Member Responsibilities

6.1 To be accountable for their own agency's practice in relation to pre-birth planning and adherence guidance and procedures.

6.2 To follow up any outstanding actions case specific actions with their own service practitioners.

6.3 To identify any particular learning themes for their own service and share with own service leads with view to inform service improvement planning.

6.4 To ensure that information discussed at meeting is accurate.

6.5 To provide details of the practitioners involved with individual families.

6.6 To record agreed actions on the relevant record. For CSC this will be as a Management Overview with the heading Pre-Birth tracking (appendix 2). For PHN's any PHN actions will be recorded on electronic recording systems. For Maternity this will be recorded on the woman's tracer.

7. Accountability

7.1. These groups are accountable to the Somerset Safeguarding Children Partnership (SSCP) Learning and Improvement Sub-Group in relation to any identified themes / concerns identified. An appointed representative from the group will request an L&I agenda timeslot, provide a progress update, identify any challenges linked to SSCP procedures or processes and participate in linked planning for practice improvement.

8. Review of Terms of Reference

8.1. Terms of reference should be reviewed within 6 months of introduction then yearly thereafter

Appendix 1

Children's Social Care and Health Senior Leads Pre-birth Review

Date:

Attendees:

Mother name & DOB	Father / Partner name & DOB	EDD	Current Concerns	Level of CSC input	Actions

Next meeting:

Appendix 2

CSC LCS recording of case discussion.

Management Decisions And Oversight case note
Reason for contact: Pre-birth tracking by OM (name), Named Midwife for Safeguarding (name) and Named PHN for children (name)
Bullet point key points of discussion/update
Record actions and timeframe