

<u>The Independent Inquiry into Child Sexual Abuse – Interim findings</u> <u>Report for Nottinghamshire CCGs 4th May 2018</u>

The Independent Inquiry into <u>Child Sexual Abuse (IICSA)</u> published its Interim Report on Wednesday 25 April 2018. It provides an overview of the work undertaken by the Inquiry to date and sets out emerging themes. It includes recommendations which will help to better protect children from sexual abuse.

Profile of victims and survivors of child sexual abuse

"A significant proportion of the victims and survivors have said that they were abused by people in a position of trust. Nearly one in three (28%) were abused by family members and around a quarter (23%) have said that they were abused by teaching or educational staff. A further fifth (20%) were abused by perpetrators such as friends of the family or trusted members of the community, and nearly one in eight (12%) have indicated that they were abused by other professionals, such as medical practitioners, social workers and police".

General recommendations from the report

- Institutions involved in child migration programmes which have not apologised for their role should give such apologies as soon as possible, not only through public statements but specifically to those child migrants for whom they were responsible. The Government is urged to develop a financial redress scheme.
- The Ministry of Justice should revise Criminal Injuries Compensation Authority (CICA) rules, so that awards are not automatically rejected in circumstances where an applicant's criminal convictions are likely to be linked to their child sexual abuse.
- The Chair and Panel recommend that the UK Government ratifies the Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse (the 'Lanzarote Convention') without further delay.
- Any police officer who wants to progress to the Chief Officer cadre must first be required to have operational policing experience in preventing and responding to child sexual abuse, and achieve accreditation in the role of the police service in preventing and responding to child sexual abuse.
- The Department for Education introduces arrangements for the registration of staff working in care roles in children's homes with an independent body charged with setting and maintaining standards

Health specific recommendations

• The Safeguarding Vulnerable Groups Act 2006 is amended so that, where a fitness to practise hearing has been conducted by the keeper of a

professional register and has resulted in removal of a practitioner from that register for reasons relating to harm or risk of harm to children:

- the keeper of the register has a duty to refer that information to the Disclosure and Barring Service (DBS), and
- the DBS, on receiving the referral, has a duty to automatically bar the practitioner from working with children.
- The Department of Health and Social Care should develop a national policy for the training and use of chaperones in the treatment of children in healthcare services.
- The Care Quality Commission considers compliance with national chaperone policies (once implemented) in its assessments of services.
- The Department of Health and Social Care, the Department for Education, the Ministry of Justice and the Home Office work together to establish current levels of public expenditure, and the effectiveness of that expenditure on services for child victims and adult survivors of child sexual abuse in England.

CCG Position in relation to health recommendations

- The CCG is already engaged in a range of initiatives through the Nottinghamshire Domestic and Sexual Abuse Executive to develop and improve responses and services to victims of child sexual abuse
- The CCG continues to contribute to work-streams resulting from Operation Equinox Strategic Management Group and the Nottinghamshire Survivors Group
- Victims of child sexual abuse have spoken to over 500 Primary care staff at PLT events throughout 2017 to raise awareness of the impact of child sexual abuse
- Use of chaperones across NHS Provider services has already been promoted in the following ways: -
 - The NHS England National Chaperone Policy was distributed to all NHS Provider organisations in 2017 and assurance gained from safeguarding leads that chaperone policies were in place.

Recommendations for CCGs

- Await the anticipated DoH Chaperone Policy, but in the interim ensure that the NHS England Chaperone Policy is utilised in the following ways: -
 - Contract Review and Quality Scrutiny panels should seek assurance from NHS providers that Chaperone Policies are up to date and effective within individual organisations
 - CCG GP briefings should include an update on the importance of effective Chaperone Policies in GP practice
- The CCGs continue to progress work already underway with Nottinghamshire Local Authority and the Office of the Police and Crime Commissioner into

transforming mental health services for child victims and adult survivors of child sexual abuse

• The CCGs continue to work with the Nottinghamshire Domestic and Sexual Abuse Strategic Partnership and the Health and Wellbeing Board to ensure a system wide approach to support victims and survivors of child sexual abuse

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