

Terms of Reference : Review of NHS services for children

1. **Goal** : to identify the cultural obstacles that inhibit sustained improvement in frontline NHS services for children, and in particular NHS action to safeguard children; and to make recommendations to support sustained improvement for the medium and longer term in outcomes for children receiving services.
2. **Context** : improving children's health and wellbeing, including action to safeguard children, are identified as clear priorities for the NHS, and policies and guidance are in place. But successive HCC and CQC reports and other evidence indicate that good practice is not always embedded effectively. While the NHS responds positively to specific initiatives and reports, short term improvements tend not to be sustained. Child health is established as a priority through the NHS Operating Framework more firmly than ever before, and a comprehensive programme of action is being put in place in response to Lord Laming's recent report on child protection. So it is important to take the opportunity to secure the cultural change that will lead to lasting improvements in outcomes for children through improvements in practice and in the leadership of organisations.

The review will need to reflect the principles of change management in the NHS following the NHS Next Stage Review, and the focus on Quality, Innovation, Productivity and Prevention as key drivers as we enter tighter economic circumstances.

3. **The task** is to explore with staff and local leadership what are the cultural obstacles to improvement in outcomes to children, and how these can be addressed.
4. The scope covers :
 - dedicated children's services (including health visiting and other community services, paediatrics, CAMHS);
 - services dealing with children as part of their wider responsibilities, including primary care, A&E, ambulance and out of hours services; and some aspects of surgery
 - services working with adults whose condition may create pressures or risks for their families, including mental health, alcohol and substance misuse and domestic violence.
5. The review will need to explore with staff and local professional and organisational leaders the factors that inhibit change. This will need to be shaped by their views, but potential issues to explore include :
 - perceptions of health services' role in child health and wellbeing, and in safeguarding;

- the challenges to professional practice and how these can be met;
 - challenges to leadership, especially given the disseminated responsibilities across the NHS on children's health and their healthcare and safeguarding and between departments of state/government departments;
 - the balance between personal professional responsibilities and wider team responsibilities across the NHS and LA children's services for safeguarding;
 - wider social/cultural factors, for example concerning professional training and development, and the status of children and families.
6. The project should have a practical focus, and include workshops and discussions across SHA regions. A short report with recommendations for action should be submitted to David Nicholson by end March 2010.
7. **Wider engagement.** While the review is specific to the NHS, it will need to take account of the requirements for cross sector working on children and on safeguarding. At national level, the Government has recently put in place arrangements to strengthen cross sector co-ordination through creation of a cross-government National Safeguarding Delivery Unit, and the appointment of Sir Roger Singleton as National Adviser to Government on the Safety of Children. This project will be of interest to Sir Roger and the NSDU and appropriate involvement and sharing of insights will be agreed.