



## **Terms of Reference**

### **East Midlands Neonatal Operational Delivery Network (EMNODN) Safeguarding Group**

#### **Aims**

To work together to improve information sharing and understanding of safeguarding within neonatal services.

#### **Scope**

- 1) Identify good practice for information sharing between midwifery and neonatal services
- 2) Identify good practice for routine enquiry within neonatal services
- 3) Identify good practice for safe discharge and communication with community services
- 4) Share learning from local safeguarding cases involving babies on neonatal units
- 5) Share learning from serious incidents involving ex-preterm infants readmitted with non-accidental injury or neglect.
- 6) Facilitate shared review when babies present across more than one service/Trust
- 7) Share learning across the Network
- 8) Report to the EMNODN Board and Clinical Governance Group

#### **Core Membership**

The membership of the group is not exclusive and may include representatives of members where required.

- 1) Chair – Network Clinical Lead (or representative)
- 2) Safeguarding Medical, nursing and midwifery representation from all services within EMNODN
- 3) Network management representation
- 4) Outreach services
- 5) Family Care Team/Discharge Planning Coordinator

#### **Interested Parties for whom attendance is welcomed**

- 1) Obstetric/midwifery representation from East Midlands Clinical Network
- 2) Risk managers
- 3) CenTre Neonatal Transport Service
- 4) PICU representation for appropriate cases
- 5) Social care representation

The meeting shall be quorate (only required when formal recommendations are required in the meeting) if there is single representation from all units within EMNODN and the chair.

## **Membership Responsibility**

The responsibilities of the Group members will be –

- 1) To ensure appropriate cases are brought for learning discussion to each meeting
- 2) To champion information sharing within their own organisations
- 3) To engage with Oversight Group representatives within other Trusts to facilitate information gathering from services that were previously involved in the neonates care i.e. where transfer between units has occurred.
- 4) Anonymised information sharing and case presentations on the day at the Group meetings.
- 5) The Trust representative will feedback into the Trust processes to ensure that learning is disseminated
- 6) Representatives should ensure that learning is fed across the ICS and Safeguarding Partnerships in their local area.

## **Meetings**

Quarterly meetings.

## **Information Sharing**

The Oversight Group members will not disclose data regarding the neonates under discussion that is personally identifiable.

Should any points arise from discussion that requires feedback to parents or services, this will be undertaken by the appropriate clinician in the Trust in which the baby was cared for.

For babies who move across the region, between hubs or out of network, a formal round table meeting may be arranged to enable review of the whole care episode.

## **The Chair**

The Chair of the group will be one of the EMNODN Clinical Leads

Role of the Chair is to -

- 1) Ensure engagement of Trust representatives at Oversight Group meetings
- 2) Coordinate discussions and promote an open dialogue
- 3) Ensure group clarity regarding discussions and any resulting actions

In the absence of the chair, a nominated deputy may take that role

It is not the role of the chair to feedback to parents.

## **Outputs**

- 1) A quarterly report of learning distributed to all units in the form of a bulletin
- 2) A quarterly report to the Clinical Governance Group
- 3) An overarching report of recurrent themes will be produced every 2 years

Date ratified: 27 January 2022

Date to be reviewed:

Version 1