



Sharing Information in Pregnancy Procedure (Safeguarding Children)

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Brief Summary of Document:	This document provides guidance on the arrangements for the Sharing of Information in Pregnancy (SIP) following the antenatal assessment from the Midwife, Health Visitor and GP and vice versa.
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Scope	This document relates to all Midwives, SCBU/NNU Nurses, Health Visitors and GP's who work within the Health Board. This procedure applies to all pregnant persons presenting to maternity services in Hywel Dda University Health Board (HDdUHB).
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To be read in conjunction with:	192- Health Records Management Policy 320 – Acceptable use of Information and Communication Technology (ICT) Policy Wales Accord on the Sharing of Personal Information (WASPI)-Information Sharing Protocol for the Safeguarding of Children, Young People and Vulnerable Adults within the Mid West Wales Region
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Owning group	Obstetrics and Maternity Guideline Documentation Group
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Version control

Version	Comments	Approval date
1	New procedure	25.7.2019

Glossary of terms

Term	Definition
SIP	Sharing Information in Pregnancy
SCBU/NNU	Special Care Baby Unit/Neo Natal Unit
GP	General Practitioner
ACE	Adverse Childhood Experiences
FGM	Female Genital Mutilation
CSE	Child Sexual Exploitation
HDdUHB	Hywel Dda University Health Board

Keywords	SIP, safeguarding children
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1. INTRODUCTION

Section 28 of the Children Act 2004 stipulates that all health professionals have a statutory duty to safeguard and promote the welfare of children and young people. In order to discharge these functions effectively this must include the sharing of information where it is thought that an unborn baby or a child is at risk of suffering harm.

This sharing of information procedure was originally developed by the Supervisors of Midwives in Dyfed Powys, following a serious child protection incident. It is intended to assist in the transfer of safeguarding information following the antenatal initial assessment from Midwife to Health Visitor and GP and vice versa. In adhering to this procedure, staff will become increasingly effective in the lawful, secure sharing of information, for the benefit of vulnerable babies who may be in need of protection, during the ante and post-natal period.

This procedure is to be used in conjunction with the All Wales Child Protection Procedure, the Social Services and Well-being (Wales) Act and the Health Board Safeguarding written control documentation.

2. SCOPE

This document relates to all Midwives, SCBU/NNU Nurses, Health Visitors and GP's who work with pregnant persons presenting to maternity services in HDdUHB.

3. AIM OF PROCEDURE

The aim of the procedure is to promote the safeguarding of the unborn and new born infant through information sharing.

4. OBJECTIVES

The aim of the procedure will be achieved by:

- Transferring safeguarding information securely throughout the pregnant person's pregnancy and postnatal period.
- Ensuring all staff are aware and trained on the completion of the SIP templates.

5. PROCEDURE

5.1 TRAINING AND AWARENESS RAISING

In 2015, Public Health Wales completed a comprehensive piece of research on Adverse Childhood Experiences and the effect this can have on both a child and adult's future wellbeing. This procedure will incorporate these identified risk indicators which will provide evidence based guidance to health professionals.

The relevant health staff will be made aware of this procedure upon commencement with HDdUHB during their departmental induction training.

All current HDdUHB employed Midwives and SCBU/NNU Nurses will be trained to complete the SIP templates and upload onto the Safeguarding Maternity Database. Training will be provided for Band 7 Midwives and SCBU/NNU Nurses by the Named Safeguarding Midwife. Cascade training will be provided to Band 5 and 6 Midwives and SCBU/NNU Nurses.

The Team Leaders for Health Visitors and GP Practice Managers will be made aware of the procedure by the Community Midwifery Team Leaders.

6. RECORDS MANAGEMENT

All completed SIP templates generated under this procedure are official records of HDdUHB and will be managed, stored and utilised in accordance with HDdUHB Policy 192 -Health Records Management.

7. THE SHARING OF INFORMATION IN PREGNANCY

Refer to Appendix 1 for an overview of procedure for the completion of the SIP1 template, SIP2 template and SIP3 template.

7.1. Completion of SIP 1 template

- The **SIP1** template (Appendix 2) is to be completed with all pregnant persons during the initial antenatal booking appointment. This appointment should ideally occur within the first trimester to ensure a full social assessment is undertaken. If a pregnant person presents after the first trimester then a **SIP1** template should still be completed at the initial booking appointment. If a pregnant person transfers to the area from another area then a **SIP1** template is to be completed.
- The procedure should be discussed with the pregnant person, and the individual advised of the routine nature of this information gathering and sharing with the GP and Health Visitor. The pregnant person should be asked to sign the SIP1 template to acknowledge that they have been informed and understand what information will be shared with the GP and Health Visitor.
- If not signed by the pregnant person then this is to be documented on the **SIP1** and shared with the GP and Health Visitor and filed in the pregnant person's hospital notes.
- Completed paper copies of the **SIP1** template are to be sent to the Health Visitor and GP within **5 working days** following the initial antenatal booking appointment. The original **SIP1** template is to be filed in the pregnant person's handheld All Wales Maternity Record.

7.2. Completion of SIP2 template

- If the booking Midwife is aware of any safeguarding concerns then a **SIP 2** (Appendix 3) is to be completed on the Safeguarding Maternity Database. This is to be emailed to the GP practice manager for sharing with the allocated GP and emailed to the Health Visitor.
- If on receipt of the **SIP1** the GP and Health Visitor are aware of any safeguarding concerns then a **SIP 2** is to be completed and emailed to the booking Midwife / Midwifery Team Leader within **5 working days** and uploaded onto the Safeguarding Maternity Database.
- If at any time during the antenatal, intrapartum or postnatal period safeguarding concerns are identified by the Midwife, Health Visitor or GP then the **SIP2** is to be completed electronically and shared with those health professionals involved.
- Any safeguarding concerns should be discussed with the pregnant person who has the right to be informed that the **SIP2** will be shared with the relevant health professionals.
- Once a **SIP2** has been completed the **SIP box** on page 27 of the All Wales Maternity Record is to be ticked to indicate to staff that there is an identified safeguarding concern.

Once the baby has been delivered the **SIP box** on page 3 of the HDdUHB Postnatal Care record is to be ticked.

- If no safeguarding concerns have been identified the SIP box should be left blank

7.3. Completion of SIP 3 Template

- If during the antenatal period a **SIP2** has been completed then a **SIP3** should be completed by the discharging community Midwife and shared electronically with the Health Visitor and GP.
- If a baby has been discharged to the care of the Local Authority the **SIP3** should be completed by the discharging Midwife and shared with the baby's Health Visitor, GP and Midwife if the baby is residing in another team/area.
- The **SIP3** is to be filed in the postnatal notes together with all the safeguarding documentation printed from the Safeguarding Maternity Database.
- Any additional safeguarding concerns following completion of **SIP3** must be shared with the Health Visitor and GP.

7.4. If a Pregnant person moves out of the Health Board area

If a safeguarding concern has been identified relating to a pregnant person who moves/receives part of their care in another Health Board area, all safeguarding information must be shared with the relevant Midwife, Health Visitor, GP and Safeguarding Midwife/Team in the other Health Board area.

It is the responsibility of the Named Community Midwife and Team Leader to:

- Confirm the pregnant person's new address and telephone number.
- Confirm the address and telephone number of the new GP.
- Contact and handover verbally to the new Community Midwife.
- Securely email all relevant safeguarding documentation for the pregnant person to the new Midwife.
- Complete an **Updated SIP2** and email to the new Health Visitor and GP informing them of the pregnant person's move out of HDdUHB area.
- Advise HDdUHB Named Safeguarding Midwife who will liaise with the Safeguarding Midwife/Team in the new area.
- Document clearly in pregnant person's All Wales Maternity Record/Postnatal Record, details of the transfer prior to photocopying the records.
- Original records to be maintained by HDdUHB and filed in the hospital records.

7.5. Pregnant person moves into the Health Board area

When a pregnant person with safeguarding concerns moves into HDdUHB area a **SIP2** must be completed and shared with the relevant Health Visitor and GP.

It is the responsibility of HDdUHB Named Community Midwife and Team leader to:

- Contact the previous Midwife for handover and to request relevant safeguarding documentation.
- Liaise with all professionals involved in the pregnancy.
- Inform HDdUHB Named Safeguarding Midwife who will liaise with the Safeguarding Midwife/Team.
- Document clearly in the All Wales Maternity Record/Postnatal Record details of the transfer to HDdUHB.

7.6. Identifying the risk of harm

The Mid and West Wales Safeguarding Children Board (CYSUR) Regional Threshold and Eligibility for support document: the right Help at the Right time (2017), provides guidance for multi-agency professionals, advising when and where to refer a child/children and their families for support depending on their needs.

The importance of pre-birth plans has been highlighted in Serious Case Reviews/Child Practice Reviews to protect children.

Statutory intervention cannot begin prior to birth. However an assessment can be initiated by Local Authority Children's services, providing professionals with a plan of protection and support for when the unborn baby is born.

This procedure should be used in conjunction with the All Wales Child Protection Procedures, 2008.

8. AUDITABLE MONITORING

The safeguarding midwife will be responsible for the biannual audit of the completion of the SIP2 and SIP3 templates. Learning from the audit report will be discussed in the community maternity team leader meeting and hospital Band 7 meetings.

DATIX reporting in relation to the Sharing Information in Pregnancy Procedure will be also be monitored by the safeguarding midwife.

Criteria for completion of SIP2 (this list is not exhaustive)

Pregnant person who;

- has undergone FGM (Female Genital Mutilation)
- has significant mental health concerns e.g. history of psychosis, schizophrenia
- has history of domestic abuse with the current partner/father of unborn baby

- has history of alcohol or substance misuse
- has herself/ current partner/father of unborn baby been incarcerated
- is under the age of 18yrs
- is under the age of 18yrs and the father of the unborn baby is 4yrs older risk of CSE (Child Sexual Exploitation)
- history of emotional, physical, sexual, financial abuse or neglect
- pregnant person/father of unborn baby was a Looked After Child (LAC)
- any children currently or previously been placed on the Child Protection Register/have been removed at birth/adopted
- has a partner/relative/friend who is a Registered Sex Offender (RSO)
- has significant learning difficulties which may potentially impact on the parent's capacity to safeguard the child
- is a persistent non-attender of antenatal appointments/no access visits
- presents with a concealed pregnancy
- non-compliant with treatment which could potentially have a detrimental effect on the unborn baby
- by 34 weeks gestation been unable to ask the Routine Enquiry

9. REFERENCES

All Wales Child Protection Procedures, 2008

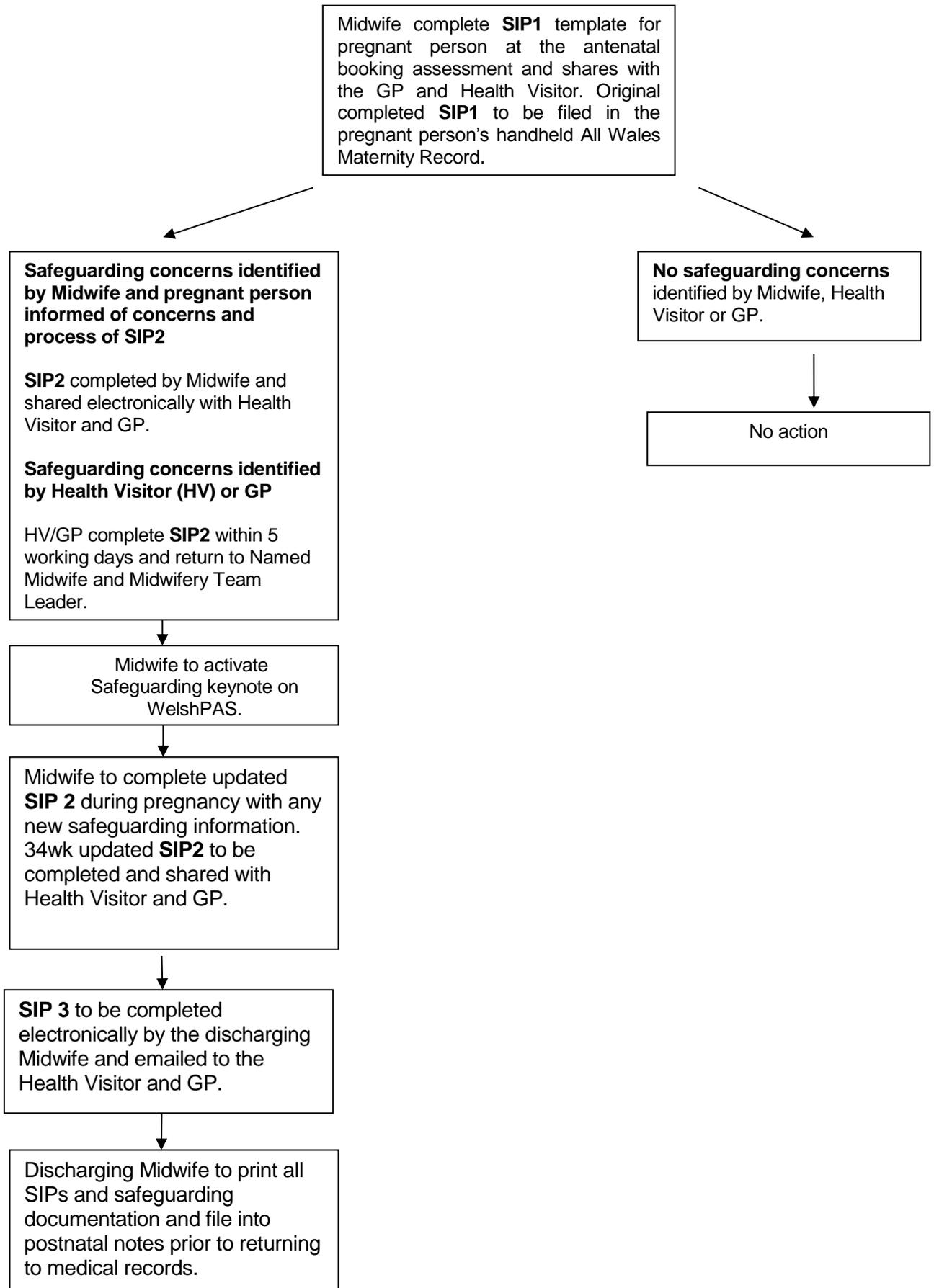
Social Services and Well-being (Wales) Act, 2014

Welsh Adverse Childhood Experiences (ACE) study, 2015

CYSUR: The Mid and West Wales Safeguarding Children Board, Regional Thresholds and Eligibility for Support Document, 2017

'General Data Protection Regulations, 2016' and 'Data Protection Act 2018'

10. APPENDIX 1 FLOWCHART



11. APPENDIX 2 -SHARING INFORMATION IN PREGNANCY (SIP 1)



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Sharing Information in Pregnancy (SIP 1)
(To be completed by the Midwife at the initial antenatal assessment)

<p>Pregnant person's full name:</p> <p>Pregnant person's previous surname:</p> <p>NHS no:</p> <p>Hospital no:</p> <p>DOB:</p> <p>Address:</p> <p>Postcode:</p>	<p>GP:</p> <p>Address:</p> <p>Postcode:</p> <p>HV:</p>	<p>EDD:</p> <p>Midwifery Team:</p> <p>Named Midwife:</p> <p>Contact no:</p> <p>Email address:</p> <p>Team leader Midwife:</p> <p>Contact no:</p> <p>Email address:</p>
<p>Father of Unborn:</p> <p>DOB:</p> <p>Address:</p> <p>Postcode:</p>	<p>Current Partner of pregnant person (if different from father of unborn):</p> <p>DOB:</p> <p>Address:</p> <p>Postcode:</p>	<p>Other Adults living in household:</p> <p>1.Full name:</p> <p>DOB:</p> <p>2.Full name:</p> <p>DOB:</p> <p>3.Full name:</p> <p>DOB:</p>

Children living at home / looked after by LA / living elsewhere

Midwife to tick box if

I have relevant safeguarding information to share and have attached a SIP 2

I do not have any relevant safeguarding information to share

GP / Health Visitor

Please **email** the named community midwife **and** team leader within **5 working days**, to confirm

I have relevant safeguarding information to share and attach SIP 2

I do not have relevant safeguarding information to share

I have been informed and understand the information sharing process between Midwifery, Health Visiting and GP services.

Signature of pregnant person:

Date:

Midwife: (Print)

Signature:

Date:

Paper copy to GP / HV / and a copy to be filed in pregnant person's handheld All Wales Maternity Records



12. APPENDIX 3 - SHARING INFORMATION IN PREGNANCY (SIP 2) TO SAFEGUARD UNBORN BABIES/CHILDREN

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Initial SIP 2
Update SIP 2
34wk Update SIP 2

Pregnant person's full name: NHS no: Hospital no: DOB: Address: Postcode:	Midwifery Team: Named Midwife: Contact no: Team leader: Contact no:	EDD: Place booked to deliver baby:
	GP: Surgery: Contact no: Health Visitor: Surgery: Contact no:	
Social worker: Contact no:	Support/PA/IDVA worker: Contact no:	
Substance Misuse worker: Contact no:	Perinatal MH/ CPN: Contact no:	

<p>Team Around the Family (TAF) worker:</p> <p>Contact no:</p>	<p>Flying Start Midwife:</p> <p>Contact no:</p>								
<p>Other agencies:</p> <p>Contact no:</p>									
<p>Current partner's name:</p> <p>DOB:</p> <p>Address if different:</p> <p>Postcode:</p>									
<p>Children of pregnant person and current partner</p> <table border="1"> <thead> <tr> <th>Name of child</th> <th>DOB</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> </tbody> </table>	Name of child	DOB			<p>Children with former partners</p> <table border="1"> <thead> <tr> <th>Name of child</th> <th>DOB</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> </tbody> </table>	Name of child	DOB		
Name of child	DOB								
Name of child	DOB								
<p>Routine Enquiry asked: Y/N</p> <p>Negative/positive:</p> <p>RIC form completed: Y/N</p>	<p>MARF for UBB sent on:</p> <p>Care and Support Plan Y/N</p> <p>Child Protection Register Y/N</p> <p>Category of abuse: emotional/physical/sexual/neglect</p>								

13. **APPENDIX 4- SAFEGUARDING MATERNITY INFORMATION (SIP 3)**



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Safeguarding Maternity Information (SIP 3)
(To be completed by the midwife at discharge from maternity services)

<p>Mother's full name : Hospital no: NHS no: DOB:</p>	<p>Infant's place of birth:</p>
<p>Address: Postcode:</p>	<p>Midwifery Team: Midwife's name: Contact no:</p>
<p>Infant / s Name: DOB: Male / female / intermediate Infant/infant's discharge address: Postcode: If baby not discharged to mother's address document reason:</p>	<p>GP: Contact no: Health visitor: Contact no: Social Worker: Contact no: Support/PA/IDVA worker: Contact no: Substance Misuse worker: Contact no: Perinatal Mental Health/CPN worker:</p>

TAF worker : Contact no:	Contact no:
	Flying Start worker:
	Contact no:

Infant placed on Child Protection Register Y/N

Category of abuse: emotional/physical/sexual/neglect

Infant has Care and Support plan Y/N

Discharged to Mother and Baby placement Y/N

Infant removed from care of mother at birth Y/N

Summary of concerns

Has the Routine Enquiry (RE) been asked: Y/N

Has a referral been made to MARAC: Y/N

If RE has not been asked please give reason why:

Discharging Midwife: _____ **Date:** _____

Email to pregnant person's GP Practice manager / HV / copy to be filed in hospital records when discharged from maternity services