

Annex 2

Safeguarding Children and Vulnerable adults: general practice reporting - Statutory, professional and contractual duties

General Practitioners are subject to professional and statutory obligations in relation to safeguarding. These obligations are described below.

GMC Position

The GMC document, "Protecting Children and Young People" makes it clear that information must be shared for Child Protection Purposes:

- 26. If you are asked to take part in child protection procedures, you must cooperate fully. This should include going to child protection conferences, strategy meetings and case reviews to provide information and give your opinion. You may be able to make a contribution, even if you have no specific concerns (for example, general practitioners are sometimes able to share unique insights into a child's or young person's family).
- 27. If meetings are called at short notice or at inconvenient times, you should still try to go. If this is not possible, you must try to provide relevant information about the child or young person and their family to the meeting, either through a telephone or video conference, in a written report or by discussing the information with another professional (for example, the health visitor), so they can give an oral report at the meeting.

Furthermore, this GMC document references "Working together to Safeguard Children 2018," as a key document that all doctors must follow.

Working together to Safeguard Children 2018

Page 78 of this Working Together to Safeguarding Children 2018 states:

- 28. Organisations and agencies within a strong multi-agency system should have confidence that information is shared effectively, amongst and between them, to improve outcomes for children and their families. Safeguarding partners may require any person or organisation or agency to provide them, any relevant agency for the area, a reviewer or another person or organisation or agency, with specified information. This must be information which enables and assists the safeguarding partners to perform their functions to safeguard and promote the welfare of children in their area, including as related to local and national child safeguarding practice reviews.
- 29. The person or organisation to whom a request is made must comply with such a request and if they do not do so, the safeguarding partners may take legal action against them.

NHS England and NHS Improvement



GP contracts

There is a view that GP practices may be required to comply with requests from local authorities for child protection reports under their contractual duties to "comply with all relevant legislation" and "have regard to all relevant guidance".

The national General Medical Services contract regulations state:

(Paragraph 125, Compliance with legislation and guidance) "The Contractor must comply with all relevant legislation and have regard to all relevant guidance issued by the Board or the Secretary of State or local authorities in respect of the exercise of their functions under the 2006 Act."

However, this does not make explicit provision of child protection reports. The national contract goes on to state:

(Paragraph 1, Schedule 5, Regional 24 Fees and Charges) "The contractor may demand or accept a fee or other remuneration— (a) from any statutory body for services rendered for the purposes of that body's statutory functions"

As the contract therefore allows contractors to seek payment from local authorities in respect of child protection report requests (as the local authority is requesting so it can discharge its statutory safeguarding duty – that fact if it is also a professional duty of general practitioner to comply with requests is immaterial) and historically payments in some parts of the country have been made for some considerable time - it is NHS England's position that a legitimate expectation exists that this work would be funded.

The framing of overarching NHS legislation is also important.

- The 2006 NHS Act provides NHS England the ability to make GP services available to enable local authorities to discharge their functions.
- This Act does not provide an obligation to do so nor any requirement for NHS
 England to fund and these matters are left for agreement between NHS England
 and local authorities (and clearly allows for payment terms to be agreed).
- If the intention was for such services to be provided free of charge (i.e. a child protection report should be provided under national GP contracts), there would not have been the need to include reference to agreeing payment terms.

Other relevant duties and obligations include:

 Children and Social Care Act 2017 – sets out local authorities lead role and responsibilities in protecting children and prescribes CCGs as a safeguarding partner to assist.

•	CQC Registration - ensuring (through inspection) GP practices, have the right systems and processes in place to safeguard children and adults.