

# Child Protection Service Improvement Project

Progress Report Year 1: November 2023

It takes a

**VILLAGE...**





## PROJECT SUMMARY

Child abuse is a heart-breaking reality for many children in the Western Cape, causing lasting physical, emotional, and psychological harm. Health workers, often the initial and sometimes sole point of contact for these cases, play a vital role in providing compassionate care, including support, medical examination, treatment, and referrals. The Red Cross War Memorial Children's Hospital (RCWMCH) is committed to protecting every child it serves, and at the beginning of this year launched this comprehensive 5-year project, dedicated to strengthening its child protection services. Beyond the hospital, the project also seeks to extend its impact to local clinics and district hospitals, equipping healthcare professionals to handle the complexities of child protection cases.

The main focus in this first year has been on enhancing care coordination within RCWMCH and strengthening training and skills development for all healthcare workers. All milestones and deliverables have been successfully achieved, positioning the project on a trajectory to bring about a lasting positive impact in the lives of vulnerable children.

We extend our deepest appreciation for your support in improving care for vulnerable children who have experienced violence, abuse, or neglect.

## THEMBI'S\* JOURNEY - A Story of Resilience

For months, eight-year-old Thembi was battling with depression - at home she was withdrawn, at school she was aggressive to other children, and didn't want to play with her friends or siblings. Her parents were gravely concerned and following an appointment at her local clinic, she was admitted to a psychiatric ward for observation. However, Thembi still wouldn't open-up about what was troubling her and her behaviour started getting worse. Soon the doctors and nurses taking care of her suspected that there was something else underlying her distress.

Thembi was then referred to the Red Cross War Memorial Child Protection Unit, Philisa (meaning "To Heal"). Within the nurturing confines of Philisa, something remarkable began to happen. With patient guidance, Thembi gradually found her voice, expressing the detail of the horrific experience she had endured. Day by day, with patience and on-going support from the team, she took steps toward healing.

It was through playful colouring that Thembi shared her painful experience. She expressed that she was sexually assaulted by her neighbour who was just 10 years old. Ultimately, thanks to the tireless efforts of the Philisa team, Thembi's progress led to a turning point. Within a couple of weeks, she triumphantly walked out of hospital, her spirit uplifted, and her path to recovery significantly aided by the safe space provided by the Philisa Team.

Thank you for being the key player in Thembi's road to a lifelong recovery. Your generosity illuminates her path through these challenging times. It is not over yet, but through a unified and continued effort, Thembi will have an opportunity at a long-lasting recovery.



# PROJECT GOAL

The project aims to improve the coordination of the Hospital's child protection service, ensuring timely and effective care for children facing violence, neglect, and abuse. Additionally, it seeks to establish a Training Centre of Excellence to provide standardized evidence-based training programs for healthcare providers in the Western Cape, enhancing their capacity to manage child protection cases effectively.

## Project Objectives

<b>KEY OBJECTIVES</b>	<b>1</b>	<b>Strengthen Medical and surgical service co-ordination at RCWMCH</b>	<b>2</b>	<b>Skills development and development of training/ learning platform</b>	<b>3</b>	<b>Service integration &amp; facilitating sustainable improvements across the health system</b>
		<b>Year 1</b>		<ul style="list-style-type: none"> <li>Establish a multidisciplinary clinical forum to coordinate surgical, medical and social work functions and plan the flow of patients</li> <li>Systematic review of available guidelines</li> <li>Source and adapt material for updated guidelines</li> <li>Design a surveillance framework</li> </ul>		<ul style="list-style-type: none"> <li>Focus on local RXH platform and use access to international online programme to assist this.</li> <li>Establish sustainable cyclical in-reach service training program</li> </ul>
	<b>Year 2</b>	<ul style="list-style-type: none"> <li>Finalisation of guidelines</li> <li>Implementation of surveillance system</li> <li>Incorporating trained staff into new service delivery platform based on guidelines and protocols developed</li> </ul>	<ul style="list-style-type: none"> <li>Training CP champions at District Facilities</li> <li>Develop a modular programme for both existing and new employees in district hospitals e.g. NSH, Vic ,MPH, KDH</li> </ul>	<ul style="list-style-type: none"> <li>Engage with external stakeholders to ensure protocols are aligned                             <ul style="list-style-type: none"> <li>Tygerberg Hospital Clinical Forensic Team</li> <li>Forensic Pathology Services</li> <li>District Health Services</li> <li>Department of Social Development</li> <li>South African Police Service</li> </ul> </li> </ul>		
	<b>Year 3</b>	<ul style="list-style-type: none"> <li>Assessment of staffing capacity in relation to service needs</li> </ul>	<ul style="list-style-type: none"> <li>Develop online learning platform</li> </ul>			
	<b>Year 4</b>	<ul style="list-style-type: none"> <li>Propose a model to strengthen and sustain child protection services within fiscal constraints</li> </ul>	<ul style="list-style-type: none"> <li>Link with District Health Facilities and Forensics to supply training/education to district level services and regional services</li> </ul>			
	<b>Year 5</b>					

# KEY OUTCOMES

## Objective 1

### Strengthen medical and surgical service co-ordination for child abuse victims at Red Cross War Memorial Children's Hospital



**A strong core clinical team** is now in place and are successfully managing inpatients and outpatient cases in the dedicated Child Protection Unit (Philisa) located in the Hospital's Emergency Centre. This consists of mainly Western Cape Government funded posts which ensures long term sustainability and includes:

- **Clinical expert** responsible for upskilling the team, assisting with the technical aspects and equipment usability.
- **Forensic-trained nurse** who fulfils the role of clinical assistant for clinical examinations of children in the unit. She also plays a pivotal role in training of the trauma doctors and nurses, fostering a culture of continuous improvement and expertise.
- **Dedicated Medical Officer as Project Co-ordinator** who in addition to clinical examination of children, has instigated impactful changes to the clinical spaces and updated clinical protocols, presenting a tangible improvement in the quality of care.
- **Medical Officer** from Medical Outpatients Department that assists for two extra days per week of additional available clinical support
- **Part-time Trauma registrar** that assists once a week with clinical examinations of new patients. This will ensure that they have dedicated exposure to a wider range of case presentations, and the medico-legal procedures to ensure their safe-guarding (something that is not part of their standard registrar curriculum).



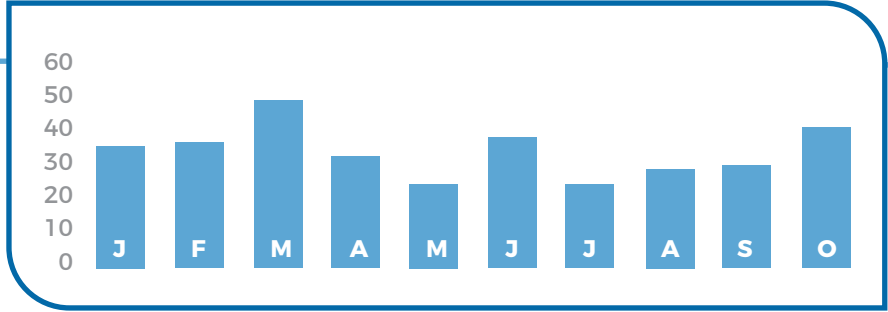
The establishment of a **Multidisciplinary Child Protection Forum** consisting of Social Workers, Law Enforcement liaison, Head of Trauma, Head of Surgery, as well as the Philisa medical team. This group meets weekly to discuss all suspected and confirmed child protection cases seen in the preceding week from **across all departments in the Hospital**. Working together they ensure each case is managed comprehensively and that they have a discharge plan in place. In 2024, this team will be joined by a clinical psychologist to oversee and safeguard the psychological needs of these children.



- The Project Co-ordinator has updated the following protocols and resources for both the acute and non-urgent management of patients.
- **Child sexual assault reference book** – this entails clinical examination techniques, updated HIV and STI protocols as well as check lists for what is required from every patient when being seen.
  - **Emergency vs. non urgent referral pathways**. This clearly defines emergency and nonurgent patient and how they can be managed. This includes the referral pathway for both inpatient and outpatient facilities available for the Metropole

## Child Protection Case Load at RCWMCH

Since the beginning of the year, the Hospital's multidisciplinary Child Protection Service has treated **360 children**. The most frequent types of child protection cases seen include:



**Physical Abuse 30%**

Children presenting with injuries such as bruises, fractures, burns, or head trauma that are inconsistent with the provided explanation from their caregiver. These children mainly enter the hospital via the Trauma unit.

**Sexual Abuse 15%**

Children with signs of genital or anal trauma, sexually transmitted infections (STIs), or pregnancy. Behavioral or emotional indicators such as withdrawal, fear, or age-inappropriate sexual knowledge are also warning signs. These children present across all departments in the hospital.

**Neglect 28%**

Cases where children exhibit signs of malnutrition, dehydration, poor hygiene, or lack of appropriate clothing.

**Gun violence 6%**

Gun shot wounds, often a result of gang violence in their community

**Abandonment**

Children left at the hospital or emergency room without appropriate arrangements for their care.

**Domestic Violence Exposure**

Children who have witnessed domestic violence between their caregivers and behavioral issues or emotional distress related to exposure to violence.

**Substance Abuse**

Cases where children are exposed to illegal drugs or alcohol, impacting their safety and well-being.

## Establish, evaluate and refine a training model for health service personnel in the multifaceted approach to child abuse

**The main focus of training for this first year has been on upskilling the core clinical team and providing in-reach training to trauma doctors and nurses and medical registrars.**



**Online accredited learning: 15 Doctors** have enrolled in the Evidentia Learning programme to date. This e-learning solution focuses solely on the field of child maltreatment and has been developed in partnership with the most experienced and respected clinical experts from around the world. The subscription allows for 20 healthcare workers to enroll every year.



The initiation of **in-reach service** training sessions by the Clinical Expert and project Forensic Nurse specialist has not only empowered the existing team but has also laid the foundation for a broader teaching program that aims to create a lasting impact on the approach to child protection. Training includes hands-on training, simulation exercises, and case-based learning to reinforce and enhance medical and procedural skills.

**To date, doctors and nurses in trauma and medical outpatients have received in-reach training on:**

- Correct use of the Rape Kit & completing a J88 Form (referral for suspected sexual assault)
- Basic anatomy and examination techniques for sexual assault
- New Post Exposure Prophylaxis (PEP) guidelines (HIV/HEP/STI and contraception)
- Sexually transmitted infections (STIs)- what to look for and management.
- How to identify Mimickers of abuse (conditions that are mistakenly confused with true physical child abuse.)

Notably, **105 nurses** from across the Hospital have received in-reach training to date.

### Service integration and facilitating sustainable improvements across the health system.

In 2024, a significant emphasis will be placed on fostering collaboration with other health facilities and government agencies involved in child protection services. The primary objectives are as follows:



**Enhancing Service Provision:** The goal is to introduce sustainable improvements to child protection services across all levels of the health service in the Metro. This includes fostering integration with Clinical Forensic Services within district health services, encompassing clinics, community health centers, and district hospitals, as well as General Specialist and Emergency Services at Tygerberg Hospital.



**Building Support and Integration:** A key focus is on establishing robust support and integration from pertinent Government Departments. This entails collaboration with the Department of Health, Department of Social Development, National Prosecuting Authority, and the South African Police and Forensic Services. The aim is to create a cohesive and coordinated approach to child protection that spans multiple sectors and services.





## IMPACT TO DATE

### On Improving Care for Abused and Neglected Children:

“Building a sanctuary of safety and comfort for children isn't just a project; it's a promise we uphold at the Children's Hospital. Together, through the Child Protection Project, we craft a haven where every child finds solace, strength, and a nurturing embrace”

Dr Fatima Khan, Project Co-ordinator

The achievements outlined above culminate in a transformative impact on the care provided to abused and neglected children within our hospital.

The project has:

**Enhanced Clinical Spaces:** The Philisa unit has been transformed to create a welcoming environment that promotes healing and comfort for the children undergoing treatment.

**Improved quality of care:** Upgraded protocols and ongoing training sessions ensure that the team is well-equipped to handle cases of abuse, offering standardized, evidence-based care to improve outcomes.

**Holistic Support:** Multi-disciplinary involvement and the creation of referral pathways signify the commitment to providing comprehensive, holistic support, addressing not only physical but also psychological well-being.

# FINANCIAL REPORT

	Budget Year 1	Expenditure Jan-October
Project support staff <sup>1</sup>	R 1 298 037	R 648 068
Training and skills material development <sup>2</sup>	R 333 000	R 220 024
Operational Costs	R 134 000	R 107 178
Monitoring and evaluation <sup>3</sup>	R 50 000	-
<b>Total</b>	<b>R1 825 037</b>	<b>R 975 271</b>

## Notes on variance

Project Co-ordinating Medical Officer started 3 April; Admin assistant started 1 August; Clinical Forensic Nurse funded through UCT secondment.

The international skills exchange for the Clinical Expert has been rescheduled for 2024

Significant strides have been made in the planning and layout of a patient database to ensure data-driven decision-making, track patient progress, and contribute to future research efforts. This will be fully operationalised in February 2024.

We express our deepest appreciation for your unwavering commitment to the Child Protection Services Improvement Project. Your support has not only transformed the lives of vulnerable children but has also laid the foundation for sustained, meaningful change. As we move forward, we remain dedicated to our mission and look forward to achieving even greater milestones in the coming year.



*Our heartfelt and sincere appreciation for supporting the Child Protection Service Improvement Project*