

Climbié inquiry recommends national agency for children

Harvey Marcovitch *London*

Lord Laming's report on the torture and murder of 8 year old Victoria Climbié by her carers calls for "rigorous attention to the medical model" when evaluating children diagnosed as possibly abused.

Lord Laming added: "The systematic approach commonly applied by paediatricians to the diagnosis and treatment of physical disease should be applied."

His independent statutory inquiry into how the authorities failed to protect Victoria, who died in London three years ago, criticises many of those who dealt with her during the last seven months of her life. But it reserved its harshest strictures for "managers and senior members of the authorities whose task it was to deliver good quality support to children and families."

Alan Milburn, the secretary

of state for health, has responded by promising a green paper on children at risk, to be published this spring.

Lord Laming urged the government to set up a new national agency for children, to be headed by a children's commissioner for England, which would be a newly created post. He asked Prime Minister Tony Blair to support the establishment of a children and families board chaired by a cabinet minister.

Lord Laming has given the government two years to set up these structures. Hospital doctors, nurses, and managers will need to be quicker off the mark. Mr Milburn has issued a checklist giving them until the end of April to revolutionise how they deal with children such as Victoria.

Unsurprisingly, more thorough, more accurate note keeping is demanded, including records of every telephone call and face to face discussion. Members of the inquiry team were worried about doctors going off duty without clear verbal and written handovers. All nursing, medical, and other case notes should be kept in a single folder, and no child should be discharged from hospital without a written management plan. NHS

chief executives are given six months to monitor compliance.

Mr Milburn has promised to replace all existing local guidance on child protection with new, shorter, clearer information, "which will reach every one of the 1 million professional staff dealing with safeguarding children."

In his statement to the House of Commons he accepted the report's recommendation to invite the Royal College of Paediatrics and Child Health (RCPCH) and the Royal College of General Practitioners (RCGP) to help to oversee the training of NHS staff.

Lord Laming has called on the colleges to support his proposed revalidation of all consultant paediatricians in this area of their work, as well as three yearly training updates for GPs.

David Hall, president of the RCPCH, welcomed the emphasis on training, pointing out that the college, helped by a grant from Johnson and Johnson, was already working with the National Society for the Prevention of Cruelty to Children to devise training modules. □

The Victoria Climbié inquiry is available from the Stationery Office, price £42.50.



Lord Laming (right) touring sites with one of the inquiry's expert assessors Dr Nellie Adjaye

Shaken baby syndrome requires a national prevention strategy

David Spurgeon *Quebec*

A 10 year retrospective review of 364 children in Canada with "shaken baby syndrome" shows that almost a fifth of the children died and two thirds had long term damage.

Sixty nine (19%) of the children died from their injuries. Of the children who survived, 162 (55%) had ongoing neurological

injury and 192 (65%) had visual impairment.

The study, published last week in the *Canadian Medical Association Journal* (2003;168: 155-9), examined medical records between 1988 and 1998 in 11 paediatric tertiary care hospitals across Canada.

The authors say that at least

40 cases of the syndrome occur each year in Canada, from which eight children will die, 18 will have permanent neurological injury requiring lifelong assistance, and 17 will be taken into foster care.

The study defined the syndrome as any case of "intracranial, intraocular or cervical spine injury resulting from a substantiated or suspected shaking, with or without impact, in children aged less than five years." The median age of the children in the study was 4.6 months (range 7 days to 58 months),

56% of whom were boys. Presenting complaints were seizure-like episode (45%), decreased level of consciousness (43%), and respiratory difficulty (34%). Bruising was noted in 46%.

A history or clinical evidence of previous maltreatment was noted in 220 children (60%), while 80 families (22%) had had previous involvement with child welfare authorities.

Medical charts documented poverty in 87 families (28%) and an unsafe or inappropriate environment in 73 (20%). □