



**Northern Devon Healthcare**  
NHS Trust

Northern Devon Healthcare NHS Trust Integrated  
Safeguarding Annual Report 2019/2020

---

April 2020

Compiled By: Anna Brimacombe MSc  
Nurse Consultant Safeguarding, Named Nurse Safeguarding Children

## Executive Summary

Northern Devon Healthcare NHS Trust (NDHT) continues to meet its statutory, regulatory and contractual responsibility to safeguard children and adults at risk of harm, abuse and neglect that access its services and premises.

There have been a number of challenges during 2019/20 for Safeguarding but overall the Trust is in a strong position for 2020/21. The Trust understands the areas which require focus and strengthening and these are being cited at the Operational Group and Integrated Safeguarding Committee. There have been many positive aspects to comment on over the last year and in particular the internal governance structures which have strengthened the engagement of practitioners in all areas of the Trust, working with the Devon Safeguarding Partnership and Local Authority to develop multi agency practices to support people with care and support needs. There has been learning from Section 42 enquiries caused out to NDHT, Safeguarding Adult reviews (SAR's) and Serious Case reviews (SCR's) which have provided valuable learning to develop practice within the Trust. We have an experienced and credible safeguarding team supporting staff with supervision, knowledge and training, who have in turn developed robust Link Practitioner network groups.

## Key Issues

The following key issues should be noted:

- The team members provide leadership, support, advice, training and multiagency liaison and work across the life course from pre-birth to death.
- The team has grown and developed. Under the leadership of the Nurse Consultant for Safeguarding there are two Specialist Nurses Safeguarding Adults (1 WTE), a Specialist Nurse Safeguarding Children and a Specialist Nurse SARC, Sexual Health and Exploitation. The Named Doctor for Safeguarding Children and the Named Midwife work closely with the team.
- Additional affiliated members include the Safeguarding Specialist Nurse from the Care Homes team and the Health IDVA. The Safeguarding Administrators work across the team with specialist additional responsibilities.
- The Nurse Consultant or a team member attends the Childrens Quality Assurance Delivery Group, Workforce Development Group and the Health Sub Group of the Devon Children and Families Partnership (DCFP). Team members are members of the Child Sexual Abuse, Child Exploitation Chairs group and Locality Early Help forums. The team are actively engaged in audit of multi-agency practice and developing Devon wide processes and policies to safeguard children.
- The Nurse Consultant or team member attends the Safeguarding Adults Board (SAB) Quality Assurance Group, SAB Mental Capacity sub group, SAB Learning and Development Group, PREVENT Board and Modern Slavery Partnership. They also attend various working groups which inform the SAB.
- The Nurse Consultant deputises for the Chief Nurse at the Safeguarding Adults Board and on the DCFP Quality Assurance Group.

- A Link Practitioner Network group has been introduced for adult link practitioners. This group of professionals from across the Trust meet quarterly and have additional training and support offered. They receive updates in between so that information can be cascaded to all staff.
- Safeguarding supervision training has been provided to an additional 50 practitioners from across the Trust by an external specialist training provider (InTrak) in March 2020. These staff will develop and deliver safeguarding supervision to their colleagues caring primarily for adults.
- Inter-agency information is provided by the DCFP, SAB and the Designated Safeguarding Team in the Clinical Commissioning Group to the Integrated Safeguarding Team and Named Professionals. This is discussed and reviewed at the Safeguarding Children Operational Group and Safeguarding Adults Operational Group and then cascaded through the Safeguarding Children and safeguarding Adult Link Practitioner Networks and Supervisors meetings to all staff within Northern Devon Healthcare NHS Trust (NDHT).
- Safeguarding adult mandatory training compliance has improved during this year. Safeguarding Children training remains above the level expected by the Devon Children and Families Partnership. Delivery of Level 3 training, in-house, is provided by members of the Safeguarding Team.
- A joint Children's and Adults newsletter is being produced every six months and sent electronically to all staff members via email.
- Systems for identifying children with safeguarding risks are robust and include the completion of MASH enquiry forms. A process for identifying and supporting families in need of Early Help is initiated by the completion of a Safeguarding Children Liaison Form (SCLF).
- Internal recording systems have been developed and improved and feedback is provided to staff when enquires are made to the LA. As a result of the successful implementation for children's referrals, and information sharing, the newly developed electronic application (App) has been developed by the IT systems developer and safeguarding team to make referrals to Adult Social care (Care Direct) safer, more intuitive and easier for staff.
- PREVENT WRAP training has been delivered across the Trust via Level 3 Children's training and also at bespoke training sessions. The Trust PREVENT lead has been part of the working group to review and develop a Devon wide training strategy.
- The safeguarding team members' work together to support the whole workforce but have additional dedicated responsibilities and specialist interests.
- A LPS working group was established to prepare for the responsibilities of the legislation around Liberty Protection Safeguards (LPS) as a result of the Mental Capacity (Amendment) Act 2019. When this is introduced NDHT becomes a Responsible Body. We are working with partners across Devon.
- A process for 16-17 year old self-referral has been developed which involved multi agency coordination and agreements from across the Peninsula.
- Pathfinder Domestic Abuse Project has supported the safeguarding team to develop and enhance the provision of the Trust response to domestic and sexual violence and abuse.

- Policies have been reviewed and a new Staff policy introduced. Bespoke training has been delivered to ED, maternity and sexual health staff. Trainers have been trained from within the Trust to deliver level 2 face to face DV training across the Trust. This will be mandated for all clinical staff over an 18 month period.
- The Trust intranet safeguarding page (BOB) has been fully updated and refreshed so that information for adult and children's safeguarding is easily accessed and up to date.
- Section 42 enquiries caused out to NDHT have increased significantly and been undertaken and completed by the safeguarding team. Positive feedback has been received from the LA and CCG regarding the quality of these investigations. Learning from these had been reviewed at the Operational group and practice changes have been introduced as a result. The work plan will identify areas for further practice development following identified themes.
- There are recognised risks in relation to staff understanding and applying the principles of the Mental Capacity Act (2005) and application of the Deprivation of Liberty Safeguards (DoLS) (amendment to MCA 2009). Audits of MCA practice and DoLS applications showed this to be a problem. Training has been delivered to clinical areas, medical, HCA and nurses groups and at level 3 monthly to address this knowledge gap. The work plan will address how we propose to continue to improve practice and mitigate against these risks
- Safeguarding Children supervision continues to be provided by specially trained child protection supervisors across the Trust. Supervision is reported to the Safeguarding Children Team Administrators who keep a record of this information. This process is to be replicated in adults this coming year and is included in the work plan.
- Delivery of the Safeguarding Adults Work Plan (attached as APPENDIX 1: SAFEGUARDING ADULTS GROUP WORK PLAN 2019-20)
- Delivery of the Safeguarding Children Work Plan (attached as APPENDIX 2: SAFEGUARDING CHILDREN GROUP WORK PLAN 2019-20).

## Appendices

- Safeguarding Children Work Plan 2019/20
- Safeguarding Adults Work Plan 2019/20

# INTEGRATED SAFEGUARDING ANNUAL REPORT APRIL 2019 TO MARCH 2020

## CONTENTS

<b>1.</b>	<b>INTRODUCTION .....</b>	<b>6</b>
<b>2.</b>	<b>BACKGROUND.....</b>	<b>6</b>
<b>3.</b>	<b>CURRENT POSITION .....</b>	<b>8</b>
3.1.	External Assurance .....	8
3.2.	Internal Assurance .....	9
3.3.	Integrated Safeguarding Team .....	10
3.4.	Learning, Development and Training.....	12
3.5.	Lanyards .....	14
3.6.	Safeguarding Supervision .....	14
3.7.	Audits .....	15
3.8.	Serious Case Reviews and Safeguarding Adult Reviews.....	18
3.9.	Safeguarding on BOB .....	19
3.10.	Policies and Procedures .....	19
3.11.	Maternity.....	19
3.12.	Safeguarding Newsletter .....	20
<b>4.</b>	<b>PERFORMANCE MEASURES.....</b>	<b>20</b>
4.1.	Multi Agency Safeguarding HUB (MASH) Enquiries .....	20
4.2.	Safeguarding Children Liaison Form (SCLF) Process.....	21
4.3.	Child Exploitation (including Child Sexual Exploitation (CSE), Criminal Exploitation (CE) and “County Lines”.....	21
4.4.	Sexual Assault Referral Centre (SARC) .....	24
4.5.	Court Requests for Evidence and Statements .....	25
4.6.	Safer Recruitment .....	25
4.8.	Safeguarding Adult Enquiries/Referrals and Incidents .....	26
<b>5.</b>	<b>ORGANISATIONAL RISKS.....</b>	<b>29</b>
5.1.	Existing Risks.....	29
5.2.	Mental Capacity Act .....	30
5.3.	Deprivation of Liberty Safeguards .....	32
5.4.	DoLS Applications .....	33
5.5.	PREVENT .....	34
5.6.	Modern Slavery.....	35
<b>6.</b>	<b>EARLY HELP .....</b>	<b>35</b>
<b>7.</b>	<b>DOMESTIC ABUSE .....</b>	<b>36</b>
7.1.	Pathfinder Project .....	37
7.2.	Independent Domestic Violence Advisor (IDVA).....	38
7.3.	Domestic Violence and Abuse Bill .....	39
<b>8.</b>	<b>CHILD AND ADOLESCENT MENTAL HEALTH SERVICES (CAMHS).....</b>	<b>40</b>
<b>9.</b>	<b>FEMALE GENITAL MUTILATION (FGM).....</b>	<b>40</b>
<b>10.</b>	<b>OBJECTIVES FOR 2020/2021 .....</b>	<b>40</b>
<b>11.</b>	<b>CONCLUSION.....</b>	<b>42</b>
<b>12.</b>	<b>APPENDIX 1: SAFEGUARDING ADULTS GROUP WORK PLAN 2019-20.....</b>	<b>44</b>
<b>13.</b>	<b>APPENDIX 2: SAFEGUARDING CHILDREN GROUP WORK PLAN 2019-20.....</b>	<b>61</b>

## 1. INTRODUCTION

This Annual Report highlights the work undertaken by the Northern Devon Healthcare NHS Trust in respect to its commitment and responsibilities in maintaining the safety and protection of children and safeguarding adults at risk of abuse and neglect. The report includes a review of progress in the Mental Capacity Act 2005, the Deprivation of Liberty Safeguards, Domestic Violence and Abuse and PREVENT.

Living a life that is free from harm and abuse is a fundamental human right of every person and an essential requirement for health and well-being. Healthcare staff are often working with patients who for a range of reasons may be less able to protect themselves from neglect, harm or abuse.

The responsibility to safeguard adults and children and promote their welfare is more comprehensive than protection. To be effective, this requires staff members to recognise their individual responsibility to safeguard and promote the welfare of children and adults who are vulnerable as well as the commitment of Trust management to support them in this. This includes ensuring staff have access to appropriate training, advice, support and supervision in relation to Section 11 of the Children Act 2004, The Care Act (2014), the Mental Capacity Act (2005), and the Prevention of Terrorism Act (2005). These place a duty on key people and bodies, including NHS Trusts, to make arrangements to ensure that their functions are discharged with regard to the need to safeguard and promote the welfare of children and adults with care and support needs. “*Working Together to Safeguard Children, 2018*” sets out how organisations and individuals should work together to undertake their duties to safeguard and promote the welfare of children and young people in accordance with the Children Acts 1989 and 2004.

Work has been undertaken to ensure that the required systems and processes are in place to ensure that safeguarding responsibilities are met by the Organisation.

## 2. BACKGROUND

The purpose of this report is to inform the Trust Integrated Safeguarding Committee and Executive Board of the safeguarding arrangements currently in place to ensure NDHT meets its statutory responsibilities to safeguard and promote the welfare of children and young people (Section 11, Children Act 2004) and adults with care and support needs. It provides a detailed review on key aspects of safeguarding activity and partnership working with agencies across Northern, Mid & Eastern Devon and the South West Peninsula.

The Trust's Integrated Safeguarding Service has the following overarching aims. To:

- Support all staff within the organisation with leadership, advice and support training and guidance so they recognise and act upon their individual responsibilities to protect children and adults at risk or experiencing abuse and neglect in all its forms.
- Implement PREVENT responsibilities and provide training support and leadership for people at risk of exploitation and radicalisation.
- Ensure that NDHT provides the highest level of identification, support and onward referral processes for people attending our services as patients and for staff who are experiencing Domestic Abuse including working with the Health Independent Domestic Violence Advisor (IDVA) and non-statutory and statutory partners.

#### Safeguarding Children:

- Ensure that all children and young people are protected from significant harm.
- Ensure the welfare of the child is paramount and the voice of the child is central to all interventions.
- Ensure compliance with the South West Child Protection Procedures.
- Implement national and local guidance in relation to safeguarding.
- Play an integral part in Devon Children and Families Partnership and sub groups to exercise its safeguarding functions.
- Promote best practice throughout the organisation.

#### Safeguarding Adults:

- Ensure the Trust has safeguarding arrangements in place as defined by the Care Act (2014).
- Ensure that the process of protecting adults with care and support needs from abuse or neglect is integral to all health care provision within the Trust.
- Ensure that 'making safeguarding personal' is central to the way the NDHT staff respond to people with care and support needs who may be in vulnerable circumstances and at risk of abuse or neglect by others. In these cases that we work together with local services to identify those at risk and take steps to protect them.
- Implement national and local guidance to safeguard adults and play an integral part in the Devon Safeguarding Adults Partnership (previously Board) and Sub Groups, to exercise its safeguarding functions.
- Ensure the Trust is compliant with its duties towards people under the statutory legislation including the Mental Capacity Act (MCA) 2005, Care Act (2014).

This report reviews the Trust's progress in meeting national/local standards and priorities. It also sets out safeguarding priorities for 2020/21.

## 3. CURRENT POSITION

### 3.1. External Assurance

#### 3.1.1. Devon Children and Families Partnership (DCFP)

The Devon Children and Families Partnership is the body with responsibility for safeguarding children across Devon. It reports to Devon County Council which must ensure that comprehensive arrangements are in place across the local area. This partnership work includes Police, Health (through CCG's) and Local Authorities, each being invested with specific duties to secure the safeguarding arrangements and responsibilities for children and that those duties should attach to the senior leaders in each of the organisations. The Trust has been involved in the planning and development of the partnership arrangements for services for children in Devon. The Trust is represented on the Devon Children and Families Partnership and is an integral decision maker in the development and progression of the local safeguarding agendas. The Trust representative plays a key role in informing the multi-agency board on the development of safeguarding initiatives specifically related to health in Northern Devon Healthcare NHS Trust.

The Trust is represented on a number of Devon Children and Families Partnership sub-groups, including the Quality Assurance Delivery Group, Northern Locality Forums, the Health Advisory Group, the Quality Assurance Delivery Group / Learning Group, the Child Sexual Exploitation (CSE) Sub Group and the Child Sexual Abuse Sub Group. The Executive Director for Safeguarding or Nurse Consultant / Named Nurse meets with the Director of Children Services at the Children and Young People STP meeting with health providers.

#### 3.1.2. Devon Safeguarding Adults Partnership (DSAP)

The overarching purpose of the Devon Safeguarding Adults Partnership is to ensure that adults with care and support needs are safeguarded from abuse and neglect. As part of the Trust's adult safeguarding responsibilities we engage in the activities of the DSAP, being an active Board member and fully participating in the sub-groups. The Trust is an integral decision maker in the development and progression of the local safeguarding arrangements. We are well represented on a number of DSAP sub-groups; including, Quality Assurance, Safeguarding Adults Review Group, PREVENT, Mental Capacity Act/Deprivation of Liberty Safeguard, Learning and Improvement group, Operational Leads sub-group, PREVENT sub group, Modern Slavery sub group and the DSAP Practice Quality Review group.



## **3.2. Internal Assurance**

### **3.2.1. Integrated Safeguarding Committee**

The Integrated Safeguarding Committee meets quarterly and seeks assurance that all safeguarding commitments and responsibilities for both adults and children are met. It oversees the work of the Safeguarding Adults Operational Group and Safeguarding Children Operational Group. It further seeks assurance that there are suitable processes in place to ensure that safeguarding arrangements are reviewed and updated on a regular basis through the Work Plans and those actions are completed within agreed timescales and reviewed on a regular basis.

### **3.2.2. Safeguarding Children Operational Group**

The Safeguarding Children Operational Group is a subgroup of the Trust Integrated Safeguarding Committee and is chaired by the Associate Director Unscheduled Care & Mental Health Interface. The group meets 8 times a year and takes relevant action in regard to any operational safeguarding children issues which have been identified. The Terms of Reference have been developed, reviewed and membership identified. The group maintains an overview of the progress of the Safeguarding Children Work Plan.

### **3.2.3. Safeguarding Adults Operational Group**

The Safeguarding Adults Operational group is a subgroup of the Trust Integrated Safeguarding Committee and is chaired by the Associate Director Unscheduled Care & Mental Health Interface. The group meets monthly and takes relevant action in regard to any operational safeguarding adult issues, MCA and DoLS, Learning Disability, Domestic Abuse, PREVENT and Modern Slavery. The group maintains an overview of the progress of the Safeguarding Adult Work Plan. The Terms of Reference have been developed, reviewed and membership identified.

### **3.2.4. Safeguarding Children Lead Practitioner Network Group (North) & (East)**

These professional network groups support the delivery of the Safeguarding Children Work Plan and are chaired by the Nurse Consultant Safeguarding/Named Nurse. The purpose of the network groups is to disseminate key learning from cases, incidents and audits, and support the development of safeguarding leadership within services to ensure that they are understood. The network groups meet quarterly in North Devon and six monthly in Exeter and report to the Trust Safeguarding Children's Board. Staff from Exeter sites are invited to join the North Devon meetings. Safeguarding Leads continue to have on-going relevant updates and training. They provide safeguarding children supervision to their teams.

### **3.2.5. Safeguarding Adults Link Practitioner Network Group**

The network group for safeguarding adults was first held in April 2019. These professional network groups support the delivery of the Safeguarding Adult Work Plan and are chaired by the Nurse Consultant Safeguarding. The purpose of the network groups is to disseminate key learning from cases, incidents and audits, and support the development of safeguarding leadership within services to ensure that they are understood. The network groups meet quarterly and report to the Trust Integrated Safeguarding Committee. Safeguarding Link Practitioners have been provided with additional training opportunities this year in Level 3 Domestic Violence, MCA and LPS, themes from Section 42 enquiries and SAR's. Safeguarding supervision training has been sourced from an external provider in March 2020 which will develop and enable these practitioners to become specialist safeguarding supervisors within their areas.

## **3.3. Integrated Safeguarding Team**

### **3.3.1. Safeguarding Executive Lead**

Darryn Allcorn, Chief Nurse has executive responsibility for safeguarding within the Trust and is the Chair of the Trust Integrated Safeguarding Committee.

### **3.3.2. Nurse Consultant Safeguarding / Named Nurse Child Protection**

The Nurse Consultant/Named Nurse for Safeguarding Children and Young People is Anna Brimacombe. She ensures the delivery of the Work Plan, provides assurance to the Trust Integrated Safeguarding Committee and delivers strategic objectives. Anna continues to be the lead for ensuring compliance in NDHT with the safeguarding agenda both locally and nationally. She represents the Trust at multi agency meetings, engages in DCFP and DSAP Sub Groups, develops and delivers safeguarding children and adult training, provides staff support with safeguarding, child protection issues, court statements and appearances, safeguarding supervision, advice, leadership, and empowers staff to be confident in safeguarding people young and old attending our services. Anna is the PREVENT lead.

### **3.3.3. Named Doctor Children**

The Named Doctor is Dr Rebecca Rub, Consultant Paediatrician.

The Named Doctor provides support, advice and leadership to NDHT Medical Staff, primarily to Paediatric Consultant colleagues undertaking child protection medicals and writing reports for social care or court proceedings. Bespoke training is delivered to Tier 1 doctors in Paediatrics, Obstetrics and Gynaecology, and the Emergency Department at induction. External speakers are coordinated and promoted to add variety and depth to the safeguarding training programme covering complex topics such as 'Risk and Adolescents'. The Named Doctor also represents NDHT at multi agency meetings.

#### **3.3.4. Named Doctor Adults**

This post has not been filled during the timescales for this report.

#### **3.3.5. Named Midwife**

Joanne Hayward is the Named Midwife for Safeguarding. She provides leadership, advice, safeguarding children supervision and training within maternity services. She engages in county wide safeguarding children representation, health related policies and processes and represents NDHT at multi agency meetings and ensures compliance in NDHT with the safeguarding agenda both locally and nationally.

#### **3.3.6. Specialist Nurses Safeguarding Adults**

This post was introduced in October 2018 and is jointly held by Alison Bradshaw and Mary Fisher. The specialist nurses provide advice, support, training and practice and policy development. They lead section 42 Enquiries and support Trust staff during investigations.

#### **3.3.7. Specialist Nurse Safeguarding Children**

This post is held by Laura Lethaby who leads on the early help agenda through the Trust. She provides supervision for the safeguarding children supervisors and works closely with the Paediatric services in the Trust and multi-agency partners to develop practice and ensure the best outcomes for children. Laura works as part of the team to develop and provide Level 3 training.

#### **3.3.8. Specialist Nurse SARC/Sexual Health & Exploitation**

Louise Barraclough was transferred from sexual health services to take up this substantive role for which she was seconded in 2017-18. Louise leads on safeguarding within the SARC providing bespoke supervision for staff working in this complex area. She also supports the sexual health services and leads the multi-agency element of the Trust's responses to exploitation. Louise works as part of the team to develop and provide Level 3 training.

#### **3.3.9. Safeguarding Nurse Care Homes Team**

Sarah Winfield-Davies is the safeguarding specialist nurse working alongside the care homes nursing team, which works to provide training and support to care homes in Northern Devon. The role involves investigation and monitoring of whole service alerts and will help provide learning by linking the activity to preventative and quality improvement delivery. The care homes team offers free training and support to independent care home providers to improve the safety and quality of care for residents, while promoting closer working between organisations. Sarah has strong links with the Integrated Safeguarding Team with regular 6 weekly meetings and supervision.

### 3.3.10. Safeguarding Team Administrators

Rachel Phillips, Juliet Rees, Judith Latcham and Penny Bridges provide the administrative support for the team. They co-ordinate and manage the various IT systems and reports, and receive enquiries to the team.

## 3.4. Learning, Development and Training

Northern Devon Healthcare NHS Trust has aligned its staff statutory training requirements to the Skills for Health Core Skills Training Framework (Skills for Health 2018). Included in this is the need for completion of safeguarding training for both adults and children which are separately underpinned by an Intercollegiate Document for Children RCPC 2019 and Intercollegiate Document Guidance for Safeguarding Adults NHS England 2018. The Trust complies fully with these documents.

The Intercollegiate Document Guidance for Safeguarding Adults was introduced in 2018. This provided the opportunity to review all the adult safeguarding training provision including MCA and DoLS. The training levels for staff were reviewed and adapted to fully meet the requirements of this document.

The Nurse Consultant has been a member of the DSAP Operational delivery group which has adopted a Devon wide multi agency Safeguarding Adults Training Strategy.

The importance of staff being aware of their responsibilities under the MCA was reinforced as a result of learning from Section 42 Enquires and audit. Both safeguarding and MCA and DoLS training has now been developed by the specialist Nurses Safeguarding Adults and they deliver monthly face to face training in safeguarding adults and MCA.

Each level of training requires that staff need to complete a minimum number of hours training over a three year period and that these training hours can be met by undertaking a variety of different training interventions. To capture this, an Annual Declaration of Safeguarding Training was introduced across the Trust and staff would be able to use this declaration process as evidence of their training compliance. A 'hard copy' training diary and use of the annual appraisal process captures on going learning for Adults, and the electronic format continues to be used by those requiring level 3 children training. This will provide an opportunity to record this training without increasing the staff or managers work load.

We offered shorter bespoke training sessions covering both children and adult safeguarding subjects.

Many bespoke training sessions have been delivered to Wards, Community settings and departments including Doctors in Surgical teams.

Domestic Abuse training has been delivered by the Pathfinder DVSV project to 50 key staff, including Link Practitioners at level 3. These people will be the DV champions across the Trust. Also bespoke training has been delivered to ED,

maternity and sexual health staff by the same team. We have also been given the opportunity to train 15 trainers to deliver level 2 training in DVSV so they can cascade this training across the Trust.

We provide a monthly training session on application of the MCA in the induction training 'essential skills for support workers'.

The Midwifery Team Leaders and Safeguarding Supervisors provide additional level 3, bespoke training for midwives. They have been supported through the year by the safeguarding team members.

A joint safeguarding newsletter will form part of the information sharing and training at Level 1 for both safeguarding areas.

The safeguarding team now attend every Trust induction to deliver the safeguarding element of the teaching. We believe this reinforces the values of the Trust and the commitment to make safeguarding 'Core Business'.

### Children

	<b>March 2017</b>	<b>March 2018</b>	<b>March 2019</b>	<b>March 2020</b>
Level 1	96.1%	96.1%	95.0%	94.8%
Level 2	83.5%	89.1%	89.6%	85.1%
Level 3	78.9%	83.5%	90.7%	86%

Level 1 has remained above the compliance target this year.

Level 2 is above the compliance target this year.

Level 3 has remained above the 85% target for this year.

Content of training has been reviewed during 2019/20 to reflect national and local guidance and policy and include learning from Serious Case Reviews. Face to face Level 3 training is now delivered by 2 members of the safeguarding team.

### Adults

	<b>March 2017</b>	<b>March 2018</b>	<b>March 2019</b>	<b>March 2020</b>
Level 1	97.8%	97.8%	98.0%	96.4%
Level 2	81.5%	90.5%	89.1%	85.3%
Level 3	44.5%	70.0%	79.1%	68.5%

Level 1 has remained above the compliance target this year.

Level 2 is above the compliance target this year.

Level 3 (Practitioner Training) has seen a steady increase throughout the year but continues to be slightly below target levels. It is envisaged that the introduction of the safeguarding declaration of learning document will support staff to capture their

compliance. This will be further supported by the training being delivered in house by the safeguarding team.

### **Trust Induction Training**

A member of the IST now provides the Trust Induction safeguarding training every fortnight.

## **3.5. Lanyards**

This year we have introduced information Lanyards for all staff. These include information on safeguarding adults, safeguarding children, Domestic Abuse and Mental Capacity. This very easily accessible guidance has supported staff to have reference to information. They have been extremely well received. Flow charts and information guides have also been developed and distributed to the wards and departments in Hospital and also the community. These include Deprivation of Liberty, Mental Capacity, and Decision making in safeguarding adults. All Trust staff have received these and they are provided at induction training to all new staff joining the organisation.

## **3.6. Safeguarding Supervision**

### **3.6.1. Safeguarding Children Supervision**

Safeguarding children supervision is a requirement for all staff who have face to face contact with children and young people. It is accessed via safeguarding specialists or via the trained safeguarding supervisors. The Supervisors have received annual update training provided by the Nurse Consultant and the Specialist Nurses for Safeguarding Children and SARC/Sexual health and Exploitation. The Supervisors continue to provide staff with safeguarding children supervision in their work areas. All safeguarding children supervision undertaken is reported to the Safeguarding Children Team so that compliance can be monitored.

The Safeguarding Multi-Agency Review Team (SMART) and Peer Review, chaired by the Named Doctor, meets quarterly to review cases and share learning. These meetings are attended by paediatric medical and nursing staff, and often a representative from the Police Child Protection team. Paediatricians can access supervision from the Named Doctor as required.

### **3.6.2. Safeguarding Adults Supervision**

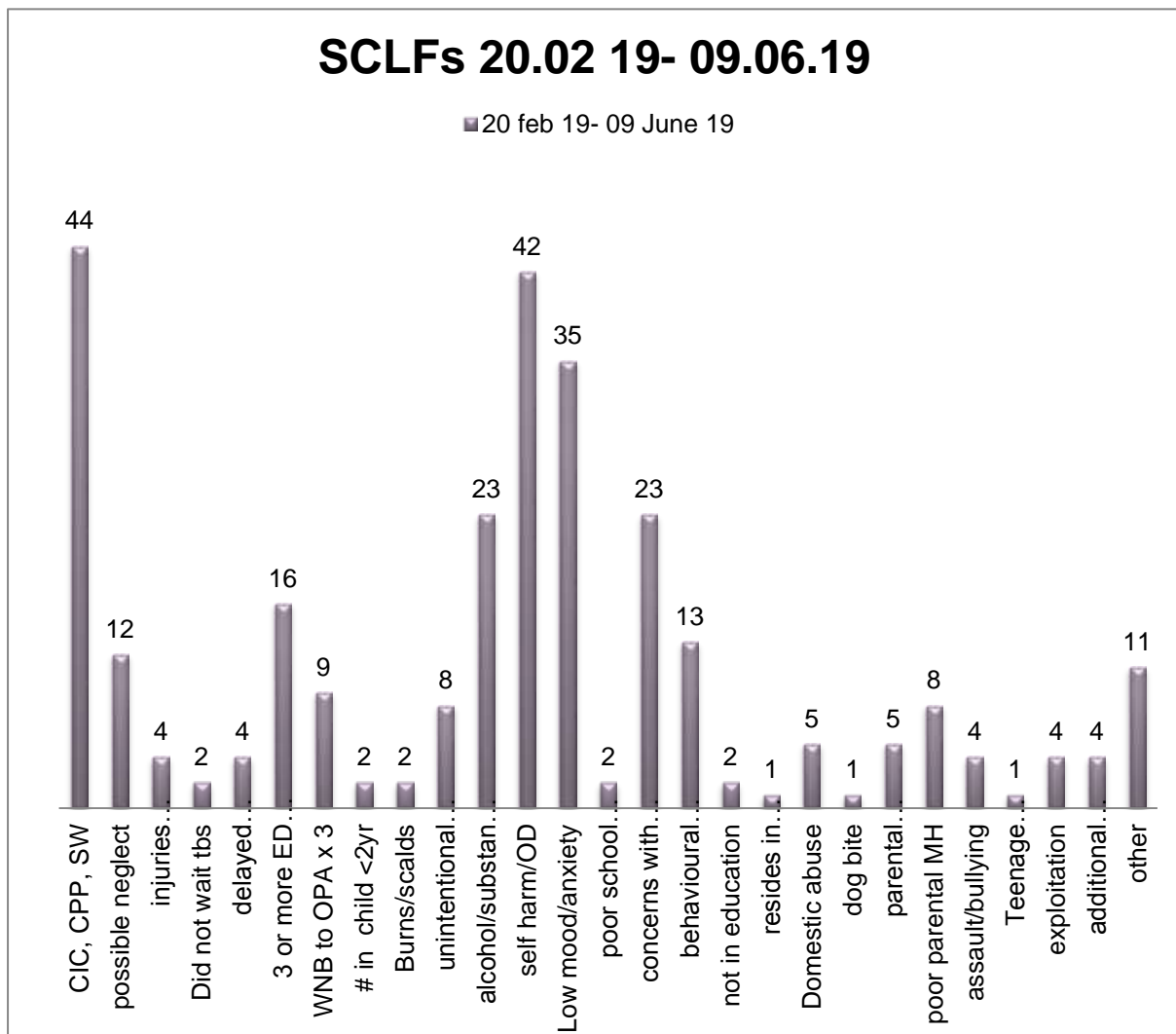
Until recently safeguarding supervision for practitioners working with adults who have care and support needs has not been universally adopted or required. This process and the associated benefits to the organisation and individuals has been widely acknowledged and recognised. The newly published Intercollege Document for safeguarding adults identifies the need. The Nurse Consultant is working with a task

and finish group of the DSAB Quality Assurance subgroup to map existing safeguarding supervision processes across Devon and to develop and produce a training package and processes/policies to support this process across the multi-agency partners in Devon, Torbay and Plymouth. The Safeguarding Adults Work-Plan 2020/21 will monitor the progress of introducing Lead Practitioner Groups whose members will be provided with safeguarding supervision training in order to develop additional specialist skills in safeguarding and supervision to their clinical areas.

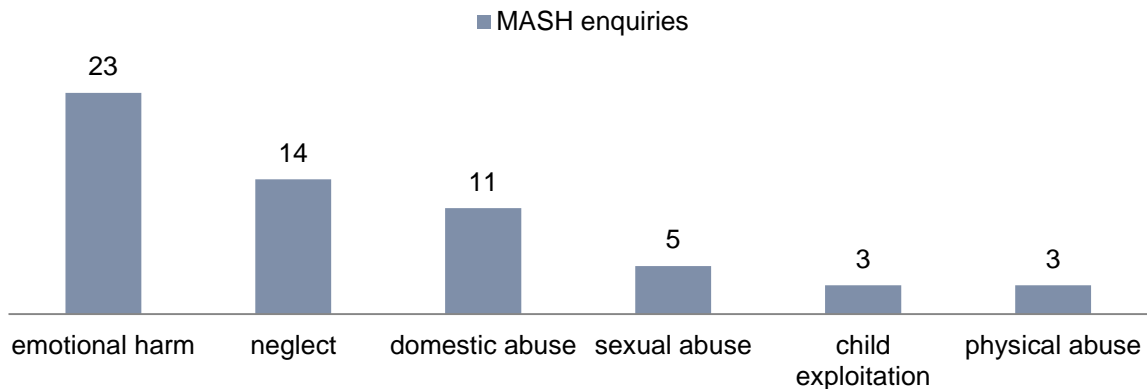
### 3.7. Audits

#### 3.7.1. Internal Audit

In June 2019 a review of Safeguarding Children Liaison Form (SCLF) data so far from the new application was looked at to see the most common reasons why NDHT staff completed a SCLF. Reasons for MASH submissions were also looked at along with the MASH responses/outcomes. This will be reviewed again with a full 12 months of data.



## MASH enquiries 20.02.19 - 09.06.19



### **Emotional Harm =23**

19 x responses from MASH – 4 no responses

3 x should have been MARU so were sent over to them – no response from MARU

9 x MASH NFA (it was noted within some of these that EH already in place)

1 x advised EH

3 x already open to social care

6 x accepted as an enquiry (this means after further information gathering and discussion with parents decision will be made whether further assessment is needed by social care or sign posting to early help required)

### **Neglect = 13 (1x test sample)**

7 x responses from MASH – 6 x no response

1 x should have been MARU – no response from MARU

2 x MASH NFA

1 x already open to social care

2 x Strategy meeting/assessment under section 47

2 x accepted as MASH enquiry

### **Domestic abuse = 11**

10 x responses from MASH – 1 x no response

2 x were out of area children

1 x MASH NFA

7 x accepted as MASH enquiry (MASH did accept 1 of the OOA children as urgent risk)

1 x assessment under section 47



**Sexual abuse = 5**

- 5 x responses from MASH
- 2 x MASH NFA
- 1 x sign post to Early Help
- 2 x Strategy/assessment under section 47 (one after escalation of MASH's original response of NFA)

**Child Exploitation = 3**

- 3 x responses from MASH
- 1 x MASH NFA
- 1 x already open to social care
- 1 x accepted as MASH enquiry

**Physical Abuse = 3**

- 2 x responses from MASH – 1 x no response
- 1 x accepted as MASH enquiry
- 1 x strategy/assessment under section 47

As part of the DCFP Quality Assurance Delivery Group a county wide neglect audit was undertaken and as part of that audit NDHT have provided data around children not brought to appointments including those children who have not been brought to dental appointments. A review around dental neglect specifically and partnership responses has been undertaken and will be presented to the Devon Quality Assurance Delivery Group and to Trust staff.

A Safeguarding Audit was carried out in the Sexual Health Service in September 2019. This showed that the safeguarding of young people attending our sexual health services was outstanding.

The results have been presented to the Safeguarding Children Board and shared with the Lead Practitioner Network Groups.

**3.7.2. Mental Capacity Audit (MCA)**

NDHT Integrated Safeguarding Team recognise the value of clinical audit, aimed at quality improvement to take place where it will be most helpful, improving outcomes for patients (NHS Eng).

Over the past year the team have undertaken two audits reviewing safeguarding practice, a survey to establish a baseline of how the Deprivation of Liberty Safeguards (DoLS) legislation (Amendment to Mental Capacity Act (MCA) 2009) is applied within inpatient settings and an audit reviewing how the Principles of the MCA are applied in practice.

The team has also participated in Devon Safeguarding Adult Peer Review Challenge in April 2019 and again in February 2020. Participation in peer review multi-agency case audit is reported within Devon Safeguarding Adult Partnership (DSAP).

Safeguarding audits undertaken within NDHT have been reported to NDHT Safeguarding Operational Group following deep dive audit of case notes (n20) and audit of all Datix reports within one month (n958). The safeguarding team have valued the support of the Clinical Commissioning Group (CCG) safeguarding team in supporting data collection.

Action Plan addressing main learning identified within safeguarding audits mainly achieved. Outstanding action is to re-audit safeguarding practice.

Audit reviewing practice aligned to Mental Capacity Act (2005) and NICE Guidance ng108 completed November 2019. Action Plan to be agreed at Operational Group March 2020.

There is a confidence that safeguarding concerns are raised to the Local Authority however there appears to be a need for more focus on applying the Principles of Safeguarding, as defined within the Care Act (2014), and Making Safeguarding Personal.

The findings of the safeguarding and MCA audits indicate that there is a significant gap in practice / learning needs identified in how the MCA is applied in everyday practice.

In both the safeguarding and MCA audits risks related to how Treatment Escalation Plans were identified. Response to this is to be considered at the Safeguarding Operational Group March 2020.

Some good practice was recognised within safeguarding and MCA audits.

Survey of practice aligned to Deprivation of Liberty Safeguards (DoLS) in preparation for implementation of Mental Capacity Act Amendment Bill (2019) has informed how the Trust Board can plan for these legislative changes. Whilst some progress is being made, with small increases in DoLS authorisations, significant risks remain and this should continue to be on the Trust risk register.

The team are committed to supporting high standards of care throughout the Trust and believe this is achieved through robust audit, sharing of findings and re-audit.

### **3.7.3. Section 11 Audit**

Section 11 (Children Act, 2004) places a statutory duty on organisations to make arrangements to ensure that in discharging their functions, they have regard to the need to safeguard and promote the welfare of children. Compliance is mandatory.

The Section 11 Audit has not been requested by the DCFP in 2019 but a copy for the Annual report was provided.

## **3.8. Serious Case Reviews and Safeguarding Adult Reviews**

### **3.8.1. Children**

Northern Devon Healthcare NHS Trust has not been directly involved in any Serious Case Reviews this year. However, we continue to participate in learning events and actions as a result of Devon wide thematic learning through the DCFP.

The team are involved with all the health partners across Devon in developing resources for families when their babies are crying inconsolably. This is as a result of the findings of CN18.

### **3.8.2. Adults**

Northern Devon Healthcare NHS Trust has been part of four safeguarding adult reviews undertaken this year. These have not been completed as yet but learning will be cascaded throughout the Trust and has been included in the 2020/21 work plan.

## **3.9. Safeguarding on BOB**

The site is regularly reviewed by the Safeguarding Team and updated legislation, information and guidance is added.

## **3.10. Policies and Procedures**

A new policy for Domestic Abuse Against Staff has been introduced in consultation with the HR Team.

## **3.11. Maternity**

The Named Midwife post has been held again this year by the Head of Midwifery. The role has been supported by the Lead Midwife for Community and Outpatient Services. The existing safeguarding supervisors have continued to provide support and advice for Midwives. The midwifery supervisors attend the Vulnerable Pregnancy meetings, held with multi agency partners each month, which continues to identify those families who have additional vulnerabilities, share information and provide robust plans to provide early help support and interventions prior to the birth of their babies. The administration and management of maternity safeguarding activity has been reviewed and updated. Safeguarding and child protection information is collated and managed so that it is easily accessible to Midwives in the Community and Hospital electronically. Relevant information, about unborn babies subject to a child protection plan or when there are safeguarding concerns, can inform care plans. The need for an increase in capacity was required and early this year a Midwife for complex care was appointed. She will work closely with the safeguarding team and maternity services. An additional 10 Midwifery safeguarding supervisors have received safeguarding supervision training and will significantly increase the capacity of the existing three supervisors to provide regular, robust safeguarding supervision and support to the community and hospital based midwives. The Named Midwife role has been reviewed and there are plans to develop this post in 2020-21.

### 3.12. Safeguarding Newsletter

A Safeguarding newsletter has been published this year in the Autumn and Spring. This newsletter provides national and local information about all aspects of adult and childrens safeguarding. It is distributed electronically via the Trust intranet site BOB and is also used by Link Practitioners and Safeguarding Supervisors to support learning and practice. The newsletter supports the safeguarding training requirements of both the Adult and Children Intercollegiate Documents.

## 4. PERFORMANCE MEASURES

The Safeguarding Children Performance Report is reviewed at the Operational Group with oversight from the Integrated Safeguarding Committee each quarter.

### 4.1. Multi Agency Safeguarding HUB (MASH) Enquiries

The MASH is a partnership between Devon County Council, Children’s Social Care, Police, Education, Youth Services and Devon NHS Health Services. The MASH is the single point of contact for all safeguarding enquiries but has increasingly raised its threshold criteria to accept only those enquires which identify children at risk of significant harm.

The internal ‘App’ based form which includes all the fields required by the MASH continues to provide a more intuitive referral form for Staff and has been developed so that the referral process has been significantly simplified and is a ‘one button’ process. The system allows for management and oversight of cases by the Safeguarding team and for data collection. As a result of this development the other Health Care providers across Devon and Plymouth are considering adopting the same system.

Copies of MASH enquiries are filed in the child’s healthcare record and a copy of the MASH enquiry is sent to the child’s GP and Health Visitor/School Nurse and CAMHS professionals where appropriate.

Table 1 gives a breakdown of the numbers by department reporting to the MASH between 1<sup>st</sup> April 2018 and 31<sup>st</sup> March 2019.

Area	2016/17 Total	2017/18 Total	2018/19 Total	2019/20 Total
Caroline Thorpe Ward	27	16	20	14
Consultant Paediatricians	8	5	6	3
Dental Access Centre	6	1	8	0
Emergency Department	126	100	82	82
Genito Urinary Medicine/Family Planning	5	6	14	5
Maternity/Community Midwives	71	74	56	52
Minor Injury Units	10	4	4	2
Named Professional	5	4	14	1
Orthodontist	0	0	0	0

Special Care Baby Unit	2	4	1	2
Other	17	28	15	11
<b>Total</b>	<b>277</b>	<b>242</b>	<b>220</b>	<b>189</b>
<b>Deliberate Self-Harm</b>	<b>76</b>	<b>42</b>	<b>47</b>	<b>23</b>

#### 4.2. Safeguarding Children Liaison Form (SCLF) Process

This form was part of the App development and now allows for an automatic electronic referral process. The Safeguarding Children Liaison Form ensures that there is a system in place that supports staff, shares information with GP's, Health Visitors and School Health Nurses, Child and Adolescent Mental Health Services (CAMHS) and partner agencies when they are concerned about a child or parents/carers. The forms are also used when a child has a Social Worker or is a Child in Care. The concern may not warrant a MASH enquiry being submitted, but the child or parents/carers may benefit from Early Help and support from other health providers or partner agencies. This process is now monitored entirely through the new application.

These forms also form an essential part of referring and accessing Early Help support for vulnerable children and families.

These forms are reviewed daily (except for weekends and bank holidays) by the Safeguarding Children Team and within five working days of their receipt by the Safeguarding Children Nurse Specialist. The specialist nurses quality assure the content and provide feedback directly to staff members. They will also assist in exploring what level of support the family may already be receiving and or refer to early help services where possible.

Table 2 shows the speciality and number of Safeguarding Children Liaison Forms that were submitted between 1<sup>st</sup> April 2017 and 31<sup>st</sup> March 2018.

<b>Area</b>	<b>2017/18 Total</b>	<b>2018/19 Total</b>	<b>2019/20 Total</b>
Caroline Thorpe Ward	103	130	115
Emergency Department	233	277	352
Minor Injury Unit's	115	86	87
Orthoptics	47	11	15
Other	113	81	15
<b>Total</b>	<b>611</b>	<b>585</b>	<b>679</b>
<b>Deliberate Self-Harm</b>	<b>125</b>	<b>136</b>	<b>189</b>

#### 4.3. Child Exploitation (including Child Sexual Exploitation (CSE), Criminal Exploitation (CE) and "County Lines")

The Specialist Nurse SARC, Sexual Health and Exploitation works with all the SARC staff from across the Peninsula in Devon and Cornwall and provides supervision support and advice. She has developed innovative practice in this field.

The Specialist Nurse SARC, Sexual Health and Exploitation in conjunction with the Manager for the SARC has developed a process for 16-17 year old self-referral which involved multi agency coordination and agreements from across the Peninsula.

The Specialist Safeguarding Nurse for Sexual Assault Referral Centres (SARC), Sexual Health (SH) and Exploitation (CE) continues to evolve and develop her role. Her specialist areas of responsibility within our team are the Devon & Cornwall Sexual Assault Referral Centres (SARC) – (Exeter SARC is the Paediatric Centre of Excellence for Child Sexual Abuse in Devon and Cornwall) - Sexual Health Services, and children and adults who are at risk of or are actively being exploited.

Her role involves giving safeguarding advice to all staff across the Trust and providing individual and group supervision for all Professionals working within these specialist services. She helps to plan and deliver Level 3 Safeguarding Children Training, develop Policies/Standard Operating Procedures, and contributes to the wide range of multi-agency forums (including, Police, Social Care, Education, and Youth Services) that exist to share information with the aim of protecting children, preventing harm and disrupting exploitation networks. This post has been recognised by the National Working Group (NWG) who have noted the value of this innovative approach to incorporating frontline health practitioners into the safeguarding processes for children at risk of exploitation and those who are actively being exploited. She is a member of a national CSE Nurses' forum that meets twice yearly to share current and ground breaking research and development.

As a result of this post being introduced in February 2017, the Safeguarding Team have streamlined the process for researching health attendances in North Devon and our services in Exeter for those children at risk of, or currently being exploited in these areas. This has provided a consistent approach with an integrated, safer and more robust system for identifying children at risk who are accessing NDHT services across the county - for example NDDH Emergency Department, Minor Injury Units, Sexual Health Services, SARC and Bladder and Bowel Services.

Links have been established between this Specialist Safeguarding role and Caroline Thorpe Ward and MAU as several cases have been identified where children are accessing multiple services within the Trust, have been admitted to the ward and also discussed and highlighted as vulnerable at MACE (Missing and Child Exploitation) meetings. These children have also been identified as having both complex social histories, self-harming behaviour and multiple additional risk factors.

The Specialist Nurse continues to attend the Devon MACE meetings on behalf of NDHT and Specialist Services and is the Deputy Chair of the North Panel.

She has been actively involved in the development of the DCFP Adolescent Safety Framework which seeks to address Contextual Safeguarding, which are the risks to children and young people outside of the home. She is a member of the Monitoring and Implementation Group which is overseeing the implementation and evaluation of this new multi-agency safeguarding framework across Devon.

The Specialist Nurse is also part of the Devon and Torbay County Lines Working Group which provides strategic direction and focus to enable effective and consistent operational delivery of a response to all threats, risks and harm identified in relation to county lines. This has relevance to NDHT as many of these children attend our services as a result of the coping mechanisms they employ, a variety of mental health problems exacerbated by their situation, including alcohol misuse, overdose, self-harm, and suicidal ideation.

The Specialist Safeguarding Nurse (SARC, SH and CE) and the Specialist Safeguarding Nurse (Children) work closely to ensure all MASH enquiries or SCLFs where there may be actual or a suspicion of Sexual Assault, Child sexual Abuse and/ or CE/ CSE are reviewed and any other relevant information is gathered to safeguard the child or identify potentially harmful networks.

#### 4.3.1. Exeter MACE

	EXETER	Information Received From			
Apr 2019 – Mar 2020	Total No Searched	TRAK	IDVA	SARC	Sexual Health
	189	21	0	11	39

	EXETER	Information Received From				
Month	Total No Searched	TRAK	IDVA	SARC	Sexual Health	TOTAL
Apr-19	10	4		0	0	4
May-19	12	2		2	6	10
Jun-19	33	0		4	12	16
Jul-19	15	1		0	4	5
Aug-19	17	0		2	4	6
Sep-19	13	1		2	4	7
Oct-19	15	1		0	1	2
Nov-19	20	2		0	0	2
Dec-19	9	3		0	0	3
Jan-20	13	2		0	1	3
Feb-20	22	3		0	5	8
Mar-20	10	2		1	2	5
	189	21	0	11	39	

#### 4.3.2. North Devon MACE

	NORTH	Information Received From			
Apr 2019 – March 2020	Total No Searched	TRAK	IDVA	SARC	Sexual Health

<b>159</b>	<b>70</b>	<b>0</b>	<b>10</b>	<b>34</b>
------------	-----------	----------	-----------	-----------

Month	NORTH	Information Received From				TOTAL
	Total No Searched	TRAK	IDVA	SARC	Sexual Health	
Apr-19	8	7	0	0	0	7
May-19	13	9	0	3	7	19
Jun-19	14	7	0	2	6	15
Jul-19	16	9	0	2	5	16
Aug-19	13	6	0	2	3	11
Sep-19	13	7	0	1	6	14
Oct-19	15	9	0	0	6	15
Nov-19	24	7	0			7
Dec-19	9	2	0		1	3
Jan-20	10	1			0	1
Feb-20	24	6	0	0	0	6
Mar-20						0
	<b>159</b>	<b>70</b>	<b>0</b>	<b>10</b>	<b>34</b>	

#### 4.4. Sexual Assault Referral Centre (SARC)

Northern Devon Healthcare Trust provides the Devon & Cornwall SARC (Paediatric Centre of Excellence)

As a Trust we were asked by NHS England to open the SARC self-referral process to 16 and 17 year olds, in line with national practice. This will enable 16 and 17 year olds to come to the SARC, have forensic samples taken/ stored and be offered essential/ timely health interventions without always having to report to the police. We have been determined to put young people at the centre of this process so that they can participate in their own recovery in a meaningful way, whilst balancing our duty of care with safeguarding, legal and organisational requirements. Self-referral removes barriers that can prevent people from seeking support after being sexually assaulted.

Removing barriers for timely self-referrals in this age group would enable important forensic evidence to be gathered that may then support the young person's allegation at a later date. It often takes time and sensitive work, building trust with key professionals before a young person feels able and safe enough to share their whole story.

It also removes barriers for young people needing health interventions that are urgent, essential and/or time-limited e.g. emergency contraception, HIV Post Exposure Prophylaxis (PEP) and hepatitis B vaccination.

Attending the SARC is often the start of the therapeutic recovery process for people of any age that have experienced sexual assault, so it is really important that our services are accessible.



The Specialist Nurse and SARC General Manager have consulted with all relevant multi-agency safeguarding partners and Multi Agency Hubs across the peninsula, Devon and Cornwall Police and other SARCs nationally. A robust safeguarding framework has been developed to support this. As we cover Devon, Cornwall and Isles of Scilly it was important that there is consistent agreement across the peninsula and the four safeguarding hubs both for the young people accessing help and the professionals involved.

We plan to start this service in April 2020 and will be issuing media communications to advertise this important service across the region.

#### 4.5. Court Requests for Evidence and Statements

A process has been introduced by the Safeguarding Team in conjunction with the IT team to allow staff giving evidence in court to do this via video link from within the hospital site. This means that clinicians are now able to stay on site, do not have to travel to court and can manage their clinical commitments effectively. It also allows the safeguarding team to provide support and guidance for staff to relieve some of the stress associated with court appearances. This innovative new way of working will save clinical and financial resources.

#### 4.6. Safer Recruitment

Ensuring that safer recruitment practice was embedded within the relevant areas has been identified as a key performance indicator.

The Lampard Report, from the Savile Review published in February 2015, raised 14 recommendations, a number of which are relevant to Trust providers. In respect of DBS checks, the report recommended that:

*'All NHS hospital trusts should undertake DBS checks (including, where applicable, enhanced DBS and barring list checks) on their staff and volunteers every three years. The implementation of this recommendation should be supported by NHS Employers.'*

The Trust has suitable and current policies in place to manage the requirements for checking the Disclosure and Barring Service (DBS) status of staff. However the Lampard Report (2015) recommended that three-yearly DBS checks should be completed. Three-yearly DBS checks are not currently completed for relevant staff, this potentially places the Trust at risk on safeguarding children matters if the circumstances or backgrounds of relevant staff change.

In addition, whilst the DBS Policy states that, over time, existing employees may need to subscribe to the DBS Update Service, this is not mandatory and is 'encouraged' rather than enforced. Human Resources continue to work on this action.

Recommendations have been made to the recruitment team to update safeguarding requirements within generic job specification.

#### 4.7. Datix Incidents Children

There were 30 reported safeguarding incidents in 2019/20.

Quarter 1	7
Quarter 2	11
Quarter 3	6
Quarter 4	6

Datix incident reports are not routinely completed when safeguarding concerns are raised with MASH for children. These are completed if there are safety risks identified on the Ward or due to challenges with patients admitted due to mental ill health who are awaiting a Tier 4 placement.

Recommendations from incident investigations are incorporated into the Safeguarding Children Work Plan.

#### 4.8. Safeguarding Adult Enquiries/Referrals and Incidents

The Local Authority Safeguarding Team (Care Direct) receive safeguarding enquires/referrals when a person with care and support needs may be unable to protect themselves.

The Integrated Safeguarding Team in has worked closely with the NDHT programme developer to produce an internal APP/referral form. The internal 'App' based form includes all the fields required by the Devon County Council safeguarding team. The form provides a more intuitive referral form for Staff. It has been developed to include prompts and advise areas which support staff to consider mental capacity, making safeguarding personal, and deprivation of liberty, and has been significantly simplified and is a 'one button' process. The system allows for management and oversight of cases by the Safeguarding team and for data collection.

The successful implementation of this new electronic form has improved the internal oversight by the IST of all referrals made from NDHT to the DCC safeguarding team.

As a result of the work involved in developing this process all the information on BOB has been updated and new guidance documentation has been produced.

Figure 1: Datix incidents on a monthly basis that were coded as safeguarding showing those that were reported to Care Direct as a safeguarding concern (red).

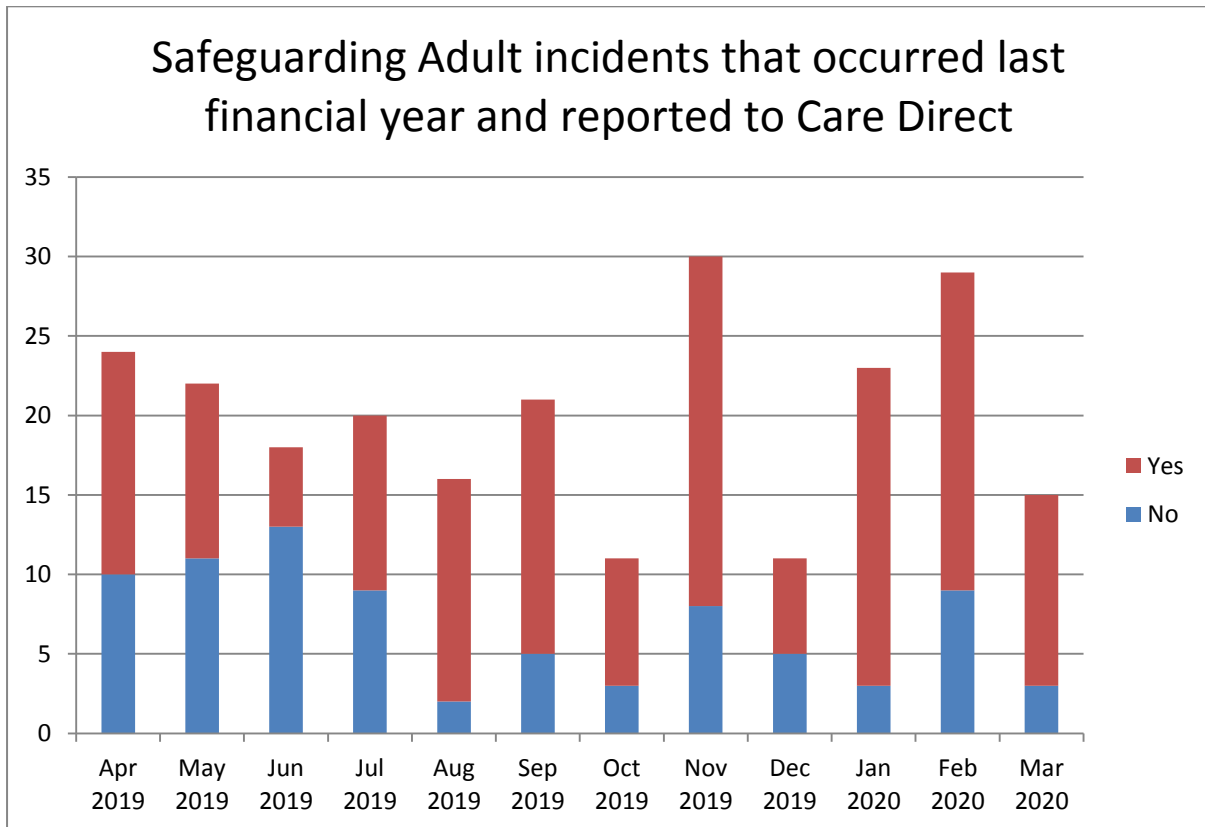


Figure 2: Yearly number of safeguarding concerns raised by NDHT staff to Care Direct concerns formally through the multi-agency process.

	2017/18	2018/19	2019/20
<b>Safeguarding concerns raised by NDHT staff to Care Direct</b>	<b>178</b> <b>50%</b>	<b>107</b> <b>52%</b>	<b>163</b> <b>65%</b>

Figure 3: Safeguarding incidents in 2019/20 by category of abuse.

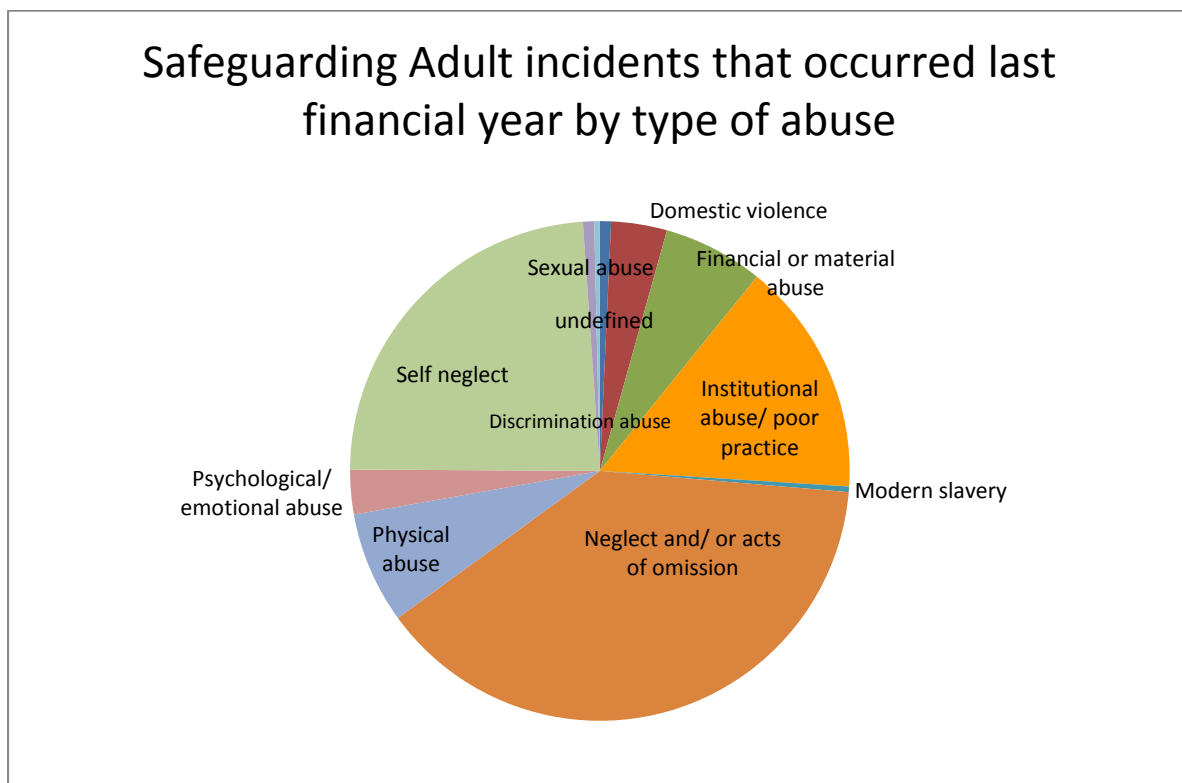


Figure 3 shows the breakdown of incidents that were identified as safeguarding on the Datix system by category of abuse.

#### 4.8.1. Section 42 Enquiries “caused out” to NDHT Themes identified since November 2018

The Care Act 2014 sets out a clear legal framework for how local authorities and other parts of the system should protect adults at risk of abuse or neglect who:

- have needs for care and support (whether or not the authority is meeting any of those needs),
- are experiencing, or are at risk of, abuse or neglect, and
- as a result of those needs they are unable to protect themselves against the abuse or neglect or the risk of it.

A safeguarding concern can be raised to the Local Authority from any source, internal or external agency, patient or member of the public.

Once a safeguarding concern is received by the Local Authority this is ‘triaged’ and a decision made on the safeguarding response, and whether this meets the criteria for a Safeguarding Enquiry under Section 42 of the Care Act (2014)

Where the Local Authority consider that NDHT would be best placed to undertake an Enquiry, this initially falls to the responsibility of the Integrated Safeguarding Team.

The team have introduced new processes over 2019/20 in order to work more closely with NDHT Clinical Governance processes. This provides a clear framework for how S42 Enquiries are managed.

The safeguarding team has undertaken a number of Enquiries over the past year. These are completed and returned to the Local Authority for final closure.

The primary aim of an Enquiry is to establish whether any action needs to be taken to stop abuse or neglect and if so by whom.

The learning from the individual enquiries are reported to the Safeguarding Operational Group to agree actions.

Main themes and learning to take forward has been in relation to:

- 'Getting communication right' with partner agencies when discharging patients. There have been some specific pieces of work undertaken, for example an audit of how ED communicates with care homes. There is a wider piece of work in NDHT reviewing discharge processes.
- The use of 'restraint', has presented within more than one Enquiry.
- How we work with commissioned agencies has come under scrutiny and immediate assurances have been provided. There is more work to be done, reviewing practice around restraint across the Trust, with a working group led by the Deputy Chief Nurse. (This work will have to be revisited when health service pressures allow.)
- There have been more than one concern raised in relation to 'missed fractures'. On review assurances were provided that processes were robust and followed.
- Transport arrangements to other areas (mainly Cornwall) have been identified as a concern and this has been raised to Board Level.
- The development of pressure ulcers are also a common theme.
- The tissue viability team supports any Enquiry and assurances provided by the Trust.

There may be other Enquiries undertaken for patients within NDHT, e.g. where the Enquiry Lead may be a professional from the Pathfinder Team, who work under the Local Authority.

## 5. ORGANISATIONAL RISKS

### 5.1. Existing Risks

#### Children

- 2991 – risk of inappropriate use of Caroline Thorpe Ward for patients with mental health or social issues (**Risk Score = 15**)

No further safeguarding children risks have been added to the risk register.

## Adults

There are currently two risks on the corporate register:

- 4550 – MCA and DoLS knowledge in the acute and community setting is poor.

This has been further supported when reviewing the MCA audit undertaken in Nov/Dec 2019.

Face to face training is being delivered on acute wards and departments and within the community to improve MCA legal literacy. Requests for bespoke training have increased and there has been a noticeable increase in staff interest and engagement.

- 4568 – DoLS compliance. There are currently low numbers of DoL authorisations. The considered adult inpatient DoLs should be approx. 20% adult inpatient beds.

With the Trusts 268 inpatient beds = approx. 52 may require DoLS.

## 5.2. Mental Capacity Act

The MCA (2005) has been in force since 2007 and applies to England and Wales. The primary purpose of the MCA is to promote and safeguard decision-making within a legal framework. It does this in two ways:

- By empowering people to make decisions for themselves wherever possible, and by protecting people who lack capacity by providing a flexible framework that places individuals at the heart of the decision-making process.
- By allowing people to plan ahead for a time in the future when they might lack the capacity.

Application of the MCA remains on the Trust risk register (4550) where it has been noted that through supervision and discussions with staff it was felt there was a general lack of knowledge in relation to the Care Act, Strengths Based Approach and application of the MCA. There has been an approach to reduce risks in line with the Integrated Safeguarding Team Work Plan 2019/2020, and actions reported to the Integrated Safeguarding Team Operational Group.

The team have completed an internal audit, reviewing practice aligned to the Mental Capacity Act (2005) and NICE Guidance ng108, completed November 2019. An Action Plan to be agreed at Operational Group March 2020. (This has been deferred due to Operational Pressures.)

In addition the team participate in the Devon Safeguarding Adult Partnership (DSAP) Multi Agency Peer Review audits which include review of MCA practice.

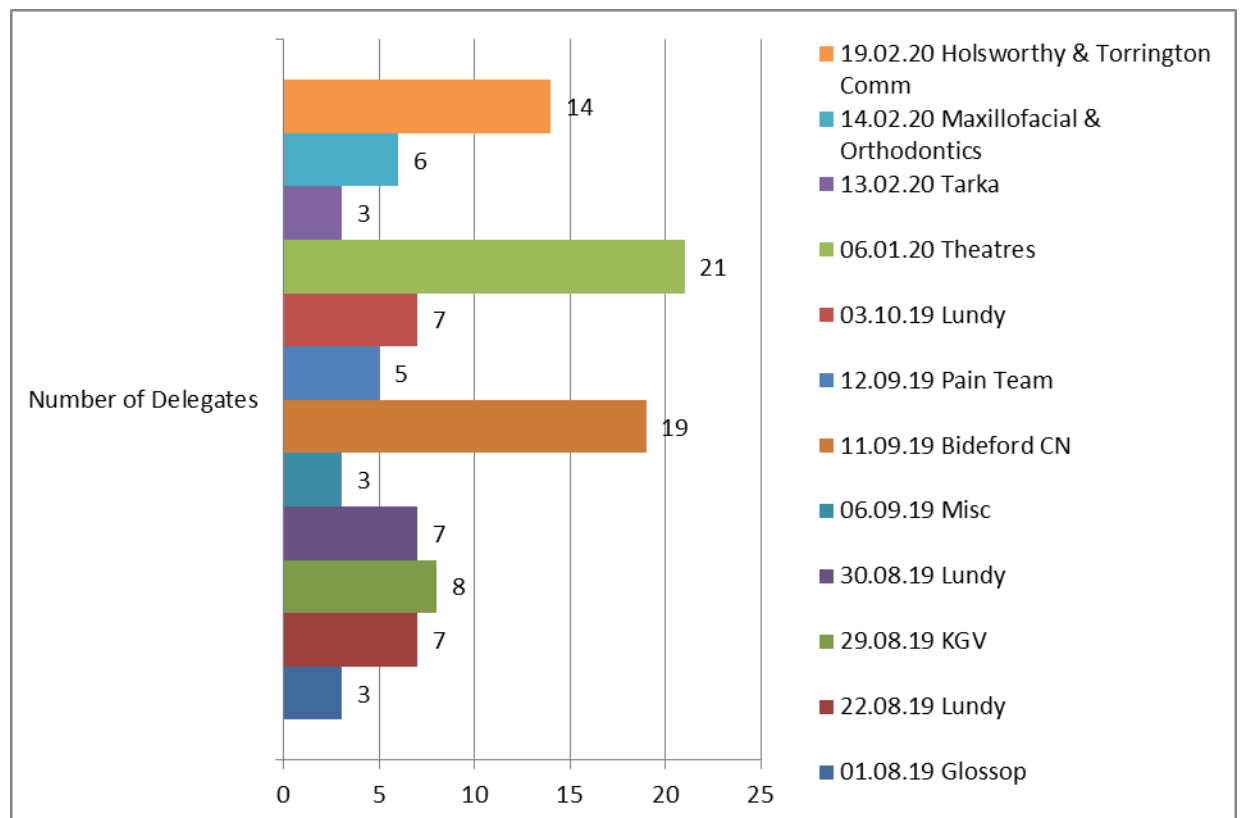
The team is represented at the DSAP MCA Devon Health Network, and DSAP MCA subgroup. Actions are reported through the Safeguarding Operational Group.

The team works in partnership with colleagues in the Clinical Commissioning Group and is appreciative of the support of the MCA lead within the CCG.

Mandatory Training targets for Level 2 MCA and DoLS Training achieved just above the target level of 85% to 85.3% (29/02/20). Evidence of training needs to be translated to clinical practice.

In addition to this the team has worked hard to work with clinical teams at local level providing ward and team based teaching.

Figure 1: Microteaching SGA and MCA provided by SGA Specialist Nurses during 2019/20.



We also respond to Datix reports labeled as 'safeguarding' and this often includes giving advice on the MCA.

There are examples of good practice however other examples demonstrate that the legislation may not be fully understood.

One of the key priorities of the DSAP is to, 'Increase legal literacy regarding the Mental Capacity Act and Liberty Protection Safeguards', this will be considered alongside action planning following local audit review at the Safeguarding Operational Group.

To work towards further improvements in applying the legislation aligned to the MCA the team will continue to focus on training on a formal and informal basis.

Future work towards supporting how the MCA (2005) legislative requirements are really understood and embedded into practice will be enhanced and supported by the appointment of the team being employed to support the implementation of the Liberty Protection Safeguards (LPS).

### 5.3. Deprivation of Liberty Safeguards

The Mental Capacity Act (2005) allows restraint and restrictions to be used – but only if they are in a person's best interests. Extra safeguards are needed if the restrictions and restraint used will deprive a person of their liberty. These are currently called the Deprivation of Liberty Safeguards.

The Risk **(4550)** remains on the Trust Risk Register following a report received from external provider of MCA 'Strengths Based Approach Training' which highlighted significant knowledge gaps in relation to the Mental Capacity Act and Deprivation of Liberty Safeguards. *'Deprivation of liberty is NOT on people's radar and they DO NOT understand it'*.

Additional risk **(4568)** was been added by Consultant Nurse Safeguarding Adults recognising current level of risk to patients and the Trust.

Following Parliamentary scrutiny and progress through the UK parliament the Mental Capacity Act (amendment) Bill received Royal Assent in May 2019.

Deprivation of Liberty Safeguards (DoLS) is replaced with a scheme known as the Liberty Protection Safeguards (although the term is not used in the Bill itself).

The target date for implementation is 1<sup>st</sup> October 2020.

Key changes:

In line with the Law Commission's suggestion they start at 16 years old.

There is no statutory definition of a deprivation of liberty beyond that in the Cheshire West and Surrey Supreme Court Judgment of March 2014 – the 'acid test'.

Deprivations of liberty have to be authorised in advance by the 'responsible body'. For NHS hospitals, the responsible body will be the 'hospital manager'.

For arrangements under Continuing Health Care outside of a hospital, the 'responsible body' will be their local CCG (or Health Board in Wales).

In all other cases – such as in care homes, supported living schemes etc. (including for self-funders), and private hospitals, the responsible body will be the local authority.



In preparation for implementation of this new legislation a focussed ‘LPS’ working group is being established. This group reports to the Integrated Safeguarding Team Operational Group.

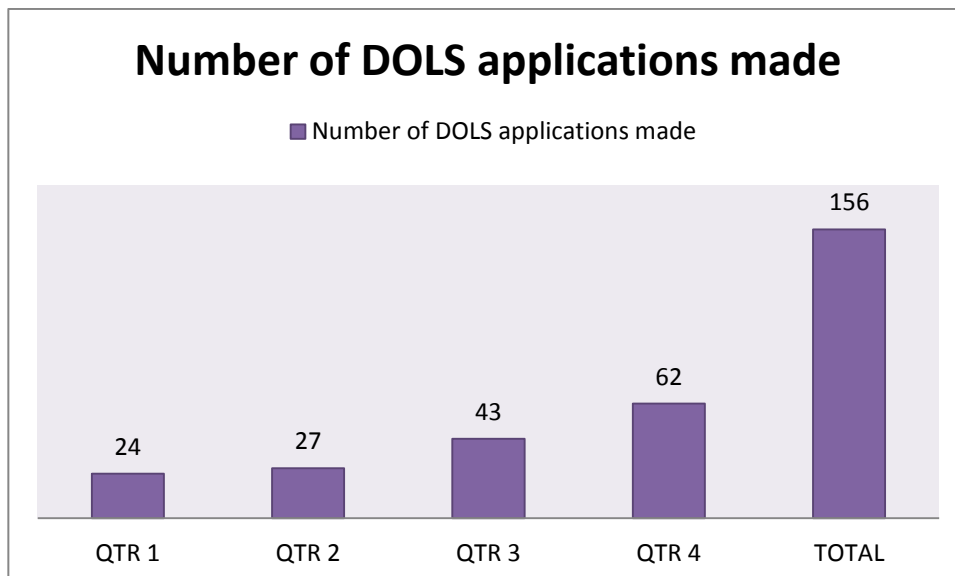
To implement these significant legislative changes in the Trust has approved to recruitment to:

- 1 x WTE Band 7 lead professional
- 2 x 0.6 WTE (1.2 WTE total) band 5 professionals
- 1 x WTE administrative support.

Recruitment process is in place for all posts.

## 5.4. DoLS Applications

Figure 1: Number of DoLS applications referred from NDHT during 2019/20.



The team have worked hard to improve how staff in the Trust understand the legal requirements in relation to DoLS / LPS. This is important in terms of ‘getting this right’ for the patient and their families and also for the Trust.

The team have consolidated work from the previous year developing a process to have more readily exact data on a weekly basis on current DoLS authorisations within the Trust, and when extensions are due / DoLS discontinued. The Administrative team in the Trust have worked hard to support this work.

The team recognised that there was a continued significant risk in relation to DoLS/ LPS and completed a survey of each inpatient setting in July 2019 reported August 2019.

The survey found that for the period of the audit there were 35 patients who should have had a DoLS and there were only 2 in place + 1 patient detained under the MHA.

The findings of this have been shared at the Safeguarding Operational Group and LPS working group. It is the responsibility of the LPS working group to oversee further work around this legislative requirement and to report back to the Operational Group.

Whilst recognising there are continued risks there is evidence of increasing numbers of applications (which would indicate increasing understanding of the legislation and increasing legal literacy).

It is anticipated considerable additional resources will support this work further and risks significantly reduce in line with increase in resources.

## **5.5. PREVENT**

NDHT PREVENT lead is the Nurse Consultant. She attends the Safer England/Torbay and Devon PREVENT Partnership. PREVENT/WRAP training has been delivered. PREVENT WRAP training has been delivered across the Trust via Level 3 Children's / Adults training and also at bespoke training sessions. The Trust PREVENT lead has been part of the working group which has developed a Devon-wide training strategy.

PREVENT is part of the Government's counter-terrorism strategy CONTEST, which is led by the Home Office. The health sector has a non-enforcement approach to PREVENT and focuses on support for vulnerable individuals and healthcare organisations in helping to stop them becoming terrorists or supporting terrorism.

The Trust's PREVENT responsibilities and actions are reviewed at the Safeguarding Adults Operational Group on a quarterly basis. In 2020-21 the Nurse Consultant will join the RD&E PREVENT Operational Group to ensure consistency and shared working between the two Trusts.

Basic PREVENT training has been provided to 90% of the work force as part of their Level 1 and 2 safeguarding training. Some 509 staff require WRAP/Level 3 training and of those 404 have received this provided through bespoke PREVENT sessions or as part of their Level 3 safeguarding adults or children training.

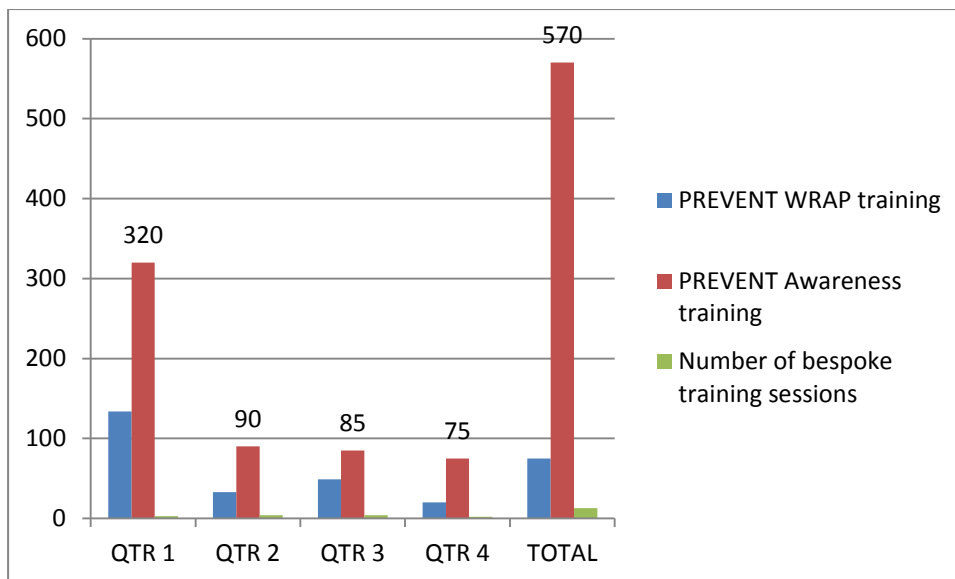


Figure 4: PREVENT training figures for NDHT 2019/20.

## 5.6. Modern Slavery

The Nurse Consultant is the Modern Slavery lead at NDHT and attends the Modern Slavery Partnership on behalf of the Acute Trusts in Devon.

The Safeguarding team liaise regularly with the Police and multi-agency partners. Modern Slavery forms part of the teaching at Levels 2 and 3 for both adult and children's Safeguarding training.

Information is shared with the Link Practitioners for Adults and Children. Referrals to the Police and or Social care and information requests are made through the safeguarding team.

## 6. EARLY HELP

The role of Safeguarding Children Liaison Nurse (SGCLN) was introduced in January 2017 and has evolved into the role of Safeguarding Children Nurse Specialist (SCNS). The SCNS continues to attend regular Early Help Practitioner Forums and Locality Partnership meetings maintaining those strong links between early help practitioners and multi-agency professionals. The SCNS is an advocate for early help and provides advice and training to staff as needed to help support children and families with vulnerabilities that are in need of early help. The SCNS reviews all the Safeguarding Children Liaison Forms (SCLF) and MASH enquiries completed by Trust staff and will provide advice and support to staff where needed, escalate concerns if required or start the early help process when identified. Links with Public Health Team Leaders have been maintained which allows for stronger professional relationships, improved liaison of safeguarding concerns and regular updates of their current changes in service. The SCNS has been working within paediatric areas

attending regular ward meetings to develop awareness of practice, safeguarding processes and supporting safeguarding children supervision. The SCNS is now providing safeguarding children training for preceptorship staff, apprentices and is a supporting trainer for Level 3 safeguarding children.

The SCNS has also been working closely with midwifery to support with early help processes, the use of Safeguarding Children Liaison Forms, and has been involved in improving the structure of the Vulnerable Pregnancy Pathway Group. She has attended Devon County Council Task and Finish Groups allowing for consideration of acute services in the development of new assessment tools, referral forms and again facilitating relationship building with social care practitioners. Attendance to Devon Quality Assurance Delivery Groups has been introduced to her role, working with partnership agencies in reviewing key themes throughout the year to seek out any multi-agency learning or development needs.

The SCNS acts as a bridge for information sharing and support for staff within the Trust, relaying information and liaising with the most relevant staff groups or agencies. A recent example of this is actions taken in response to a Safeguarding Children Liaison Form completed by a staff nurse on ICU regarding the granddaughter of one of her patients. The patient had concerns for their granddaughter so the staff nurse wanted to share these concerns to see if any help could be implemented. This information was reviewed and shared with the GP, school nurse and safeguarding lead at child's school. Discussions and information sharing took place between these professionals and a TAF meeting arranged. It was agreed the Public Health Nursing Team and school would start an early help assessment and that they would continue to monitor and escalate to MASH if things did not improve for the child. Information regarding missed appointments continues to be shared and updates provided, and this is a really good example of multi-agency team working and it all started with a nurse taking a 'think family' approach, identifying a need and starting the early help process.

The SCNS can register and provide support for all staff that require access to the 'Right for Children' electronic recording platform which can be and is encouraged to be used by any professional involved in the early help assessment of a child/young person and their family. She is in the process of identifying early help champions for the paediatric units to build staff confidence and awareness around early help processes and services available.

The post will continue to be developed in line with the Work Plan for 2020/21.

## 7. DOMESTIC ABUSE

Domestic abuse is an incident or pattern of incidents of controlling, coercive, threatening, degrading and violent behaviour, including sexual violence, in the majority of cases by a partner or ex-partner, but also by a family member or carer. It is very common. In the vast majority of cases it is experienced by women and is perpetrated by men.

Domestic abuse can include, but is not limited to, the following:

- Coercive control (a pattern of intimidation, degradation, isolation and control with the use or threat of physical or sexual violence)
- Psychological and/or emotional abuse
- Physical or sexual abuse
- Financial or economic abuse
- Harassment and stalking
- Online or digital abuse

Domestic abuse is a health issue:

- 75% of domestic violence results in physical injury or mental health consequences to women
- Domestic abuse is the leading cause of morbidity for women aged 19-44, greater than cancer, war and road traffic accidents
- There is extensive contact between women and primary care clinicians with 90% of all female patients consulting their GP over a five-year period
- 80% of women in a violent relationship seek help from health services, usually GPs, at least once and this may be their first or only contact with professionals
- 1 in 8 of all suicides and suicide attempts by women in the UK are due to domestic abuse
- 30% of domestic abuse starts/escalates during pregnancy
- 1 in 4 women in contact with mental health services are likely to be experiencing domestic abuse when you see them
- 51,355 NHS staff are likely to have experienced abuse in the past 12 months

It is also known that living in a home where domestic abuse happens can have a serious impact on a child or young person's mental and physical wellbeing, as well as their behaviour. And this can last into adulthood.

## 7.1. Pathfinder Project

NDHT, as one of eight pilot sites, has been working with Pathfinder; a project run by a consortium of 5 expert partners with the aim of establishing comprehensive health practice in relation to domestic abuse and wider issues related to Violence Against Women & Girls in acute hospital trusts, mental health trusts and community-based IRIS programmes in GP practices.

As a result of this partnership working:

- We have received expert guidance to help us review our current domestic abuse policy and enable us to develop a policy specifically in relation to our staff.
- The level 3 Safeguarding Adults training has been updated on the advice of the project lead to include specific information in relation to domestic abuse.
- Pathfinder has delivered level 3 domestic abuse 'Standing Together' training to 34 members of staff (mainly safeguarding link practitioners).

- Pathfinder experts have also delivered maternity specific level 3 training to 13 delegates and emergency department specific level 3 training to 7 delegates.
- A further emergency department/maternity specific session planned for 23rd March was cancelled due to the pandemic and will be rearranged when possible.
- All those who received the Pathfinder training were offered 'train the trainer training' which was due to take place on 26th March. Unfortunately this was also cancelled due to the pandemic and will be rescheduled.
- Train the trainer teaches people the skills they need to be effective trainers and facilitators so they can pass on their training to others. Once these trainers are in place, it will mean that all staff across the Trust should receive face to face domestic abuse training in a format that is deliverable for individual departments, which will increase our ability to recognise and respond to domestic abuse.
- NDHT have been awarded £3,500 from the Pathfinder sustainability fund to embed a sustainable 'train the trainer' strategy. The Trust will also deliver Domestic Abuse, Stalking & Harassment Risk Identification Checklist (DASH RIC) training to domestic abuse trained NHS staff to enhance their skills to assess the risk when receiving disclosure from survivors.

The Pathfinder project finished in March 2020.

## **7.2. Independent Domestic Violence Advisor (IDVA)**

Last year NDHT agreed funding to support the Health IDVA post for one year. The next 12 months will be funded from charitable funds but it is envisaged that grant funding will be pursued, if available, to bring long term certainty that the role can continue.

The role of the IDVA is to address the safety of patients and staff of Northern Devon Healthcare NHS Trust who have disclosed being a victim at risk of harm from an intimate partner, ex-partner or family members. The IDVA works collaboratively with other agencies to secure the safety of these clients and their children, serving as their primary point of contact and acting as the patient's voice in an advocacy role.

Jane Frost took up her post as IDVA at NDHT in October 2018. Whilst employed by NDHT she retains her impartiality and professional support by working through North Devon Against Domestic Abuse (NDADA). She receives referrals from all areas within Northern Devon Healthcare NHS Trust (patients & staff) and provides services for them. In conjunction with the Integrated Safeguarding Team she also helps to ensure that staff are trained to recognise indicators of domestic abuse and are aware of how to respond to disclosure. In the past year this has included visiting clinical areas to raise awareness, providing bite-size training sessions and distributing resources including information about organisations that can offer support, posters encouraging survivors to seek assistance and 'hidden' contact numbers. This work will continue over the coming year.

Additionally, it is intended to encourage all clinical areas to include the question “Do you feel safe at home?” in their initial assessment. Jane and the safeguarding team will work with staff to ensure that they feel confident in dealing with disclosure, even if this is just to refer on or to provide details of organisations that can offer support.

Referrals received for the year 2019/2020

Quarter 1	34
Quarter 2	42
Quarter 3	28
Quarter 4	Not yet available

A large proportion of the referrals originate from A & E, however, there was a significant increase in the number of NDHT staff referrals following an awareness campaign launched during the ‘16 days of action against gender based violence’ event which took place from 25<sup>th</sup> November until 10<sup>th</sup> December 2019 which included a display in the hospital restaurant.

The IDVA referral form has been updated to ensure correct procedure is followed in respect of children. Widely used by the emergency department and maternity services, it is envisaged that with greater awareness, disclosures in all areas will be referred using the form which is now available on the trust intranet.

### **7.3. Domestic Violence and Abuse Bill**

In December 2019 the government was elected with a manifesto commitment to “support all victims of domestic abuse and pass the Domestic Abuse Bill” originally introduced in the last Parliament. The Bill introduces the first statutory government definition of domestic abuse to specifically include economic abuse and controlling and manipulative non-physical abuse. It will also establish a Domestic Abuse Commissioner to drive the response to domestic abuse. The bill is intended to:

- raise awareness and understanding about the devastating impact of domestic abuse on victims and their families
- further improve the effectiveness of the justice system in providing protection for victims of domestic abuse and bringing perpetrators to justice
- strengthen the support for victims of abuse by statutory agencies

## **8. CHILD AND ADOLESCENT MENTAL HEALTH SERVICES (CAMHS)**

The CAMHS service is provided by Children and Families Health Devon. This alliance, which includes NDHT, provides children's services across Devon. CAMHS practitioners see patients on Caroline Thorpe Ward on a Monday to Friday with on call cover from 5pm to 10pm weekdays and 9am to 5pm at weekends. They see patients who present through ED and require a mental health assessment, some of whom may already have a care plan with CAMHS. The majority of the children are generally admitted to Caroline Thorpe Ward for this assessment to take place and due to lack of tier four beds, can often remain on the ward for a period of time whilst waiting for a bed. The number of bed days when children remain in hospital with no medical need is monitored through the Operational Group.

## 9. FEMALE GENITAL MUTILIATION (FGM)

The Trust continues to report identified cases of FGM in women over 18 years to NHS England. This information will be collated within the Safeguarding Team and then provided for the Informatics Team and sent on an annual basis.

There is a mandatory duty to report children who are victims of FGM or who are suspected of being victims or potential victims to the Police and to Children's Social Care via a MASH enquiry. This is explicit in the Policy.

FGM training has been included in the Level 3 training and a NHS England e-learning module has been sourced which is a mandatory requirement for Midwives and Obstetricians and Gynaecologists within the Trust.

FGM-IS was not introduced in 2019/20 as per the work plan because of significant challenges within maternity services. The plan is to introduce FGM-IS in 2020-21 and progress will be monitored through the work plan.

## 10. OBJECTIVES FOR 2020/2021

The Integrated Safeguarding team will continue to work across the whole of the Trust to support staff in all areas of safeguarding adults and children.

There is a comprehensive rolling Safeguarding Children Work Plan and Safeguarding Adults Work Plan in place which sets out the organisation's priorities in achieving its objectives.

### **Key areas for focus in 2020/21**

The Work Plan for the Safeguarding Adults Operational Group (Appendix 1) includes:

- Safeguarding adults
- MCA and DoLS
- Dementia



- Learning Disability
- Domestic Abuse
- PREVENT
- Training

The Work Plan for the Safeguarding Children Operational group (Appendix 2) includes:

- Early Help
- SARC
- Exploitation
- Training

Additionally:

The team will work collaboratively with our sister team at the RD&E to develop practice across the two sites which shares and develops the best practice from both, is coherent, consistent and robust and which reflects the needs of each organisation to safeguard and protect adults, children and their families within our care.

- The team will continue to work in partnership with the DSAB and DCFP to provide commitment and leadership in the safeguarding arena.
- Ensure safeguarding training at Levels 1, 2 and 3 is provided at NDHT and is of high quality, easily accessible and relevant to individual staff groups.
- To review and enhance safeguarding responses within dental services for children and adults with a particular focus on dental neglect and domestic abuse.
- To develop and support the increase in safeguarding support and supervision within Midwifery in partnership with the Named Midwife, Complex Care Midwife and supervisors.
- Support staff to identify, support and refer adults and children at risk of harm, and ensure concerns are reported appropriately.
- Ensure that Trust staff are able to identify any potential Child Exploitation cases and report concerns appropriately; continue to contribute and attend the North Devon and Exeter MACE (Missing and Child Exploitation) Forums.
- Fully participate, review and learn from local and national serious case reviews and Safeguarding Adult Reviews (SARS).
- Work in partnership with the Devon Children and Family Partnership and Devon Safeguarding Adults Partnership to support staff involved with serious case reviews and safeguarding adults' reviews.
- Continue to work with health and social care partners to ensure the most appropriate environment and care is available for children and adolescents with emotional and mental health problems.
- Continue to ensure that relevant staff can access safeguarding children supervision when required as per the Safeguarding Children Supervision Policy.
- To develop a system for safeguarding supervision for staff caring for adults at risk of abuse and neglect.

- Ensure that Trust staff are able to identify adults and children at risk from domestic abuse ensuring that people are supported and appropriately referred to specialist services.
- Ensure all information/guidance relating to safeguarding adults and children is up to date, reflects best practice and is easily accessible to staff across the Trust. To do this by updating the pages on BOB.
- Fully participate, review and learn from local and national Children and Adults Serious Case Reviews, SARS and Thematic reviews.
- To engage in the Devon Children and Family Partnership, including the Quality Assurance Committee, Quality Assurance Learning Committee, Health Sub Group, CSE Chairs Group and Task and Finish Groups as relevant for the Trust.
- To engage in the Devon Safeguarding Adults Board, including the Quality Assurance Committee, Learning and Development Group, PREVENT, MCA and South West Health Professionals.
- Ensure NDHT meets the requirements of Section 11 in the new Devon Children and Family Partnership.
- Continue to ensure that all statutory Safeguarding arrangements are in place in the new Devon Health Alliance.
- Ensure key areas of safeguarding adults and children work are audited to gain assurance against key safeguarding documents and standards of practice.
- MCA is audited across the Trust to understand practice and address issues of practice which do not meet national standards.
- To continue to improve the knowledge and understanding for NDHT staff regarding Early Help so that children and families are being offered/provided appropriate support for any additional needs identified.
- To improve practice by reviewing incidents and investigations and putting learning into practice through teaching, support and advice.

## 11. CONCLUSION

### **‘Safeguarding at NDHT our Core Business’**

Safeguarding means protecting the *‘human’s health and wellbeing and reducing risk, to protect their human rights to enable them to live free from harm, abuse and neglect’*.

In the NHS Constitution the first principle that guides the NHS in all it does states: *‘It has a duty to each and every individual that it serves and must respect their human rights’*.

The statutory requirements for NHS organisations to discharge their safeguarding children and adults obligations are enshrined in law and supported by legislation.

Safeguarding forms an integral part of the wider responsibilities of the Trust which meets the requirements of Section 11 of the Children Act 2004 and the Care Act 2014 for adults with care and support needs.

The Government places patients and the quality of their care at the heart of the NHS with a commitment to patient choice, control and accountability, and includes support and protection for those in the most vulnerable situations.

The Integrated Safeguarding Team commit to providing leadership support, advice and guidance to staff across NDHT, ensuring that the Trust provides the highest level of care to all its patients and their families.

Northern Devon Healthcare NHS Trust continues to strive to ensure that the most vulnerable patients who are less able to protect themselves from harm, neglect or abuse are protected. To support this we aim to have a workforce that recognises safeguarding is not only 'Everyone's Business' but is our 'Core Business'.

## 12. APPENDIX 1: SAFEGUARDING ADULTS GROUP WORK PLAN 2019-20

<b>Safeguarding Adults Group Work plan 2019–2020</b> <b>(Incorporating Safeguarding Adults, Mental Capacity and Deprivation of Liberty)</b> <b>Learning Disability and Dementia</b>	<b>Date Created</b>	August 2019
---	---------------------	-------------

<b>Plan Owner :</b>	Darryn Allcorn – Chief Nurse Anna Brimacombe – Nurse Consultant Alison Bradshaw – Specialist Nurse Safeguarding Adults Mary Fisher - Specialist Nurse Safeguarding Adults Joanne Hayward - Named Midwife- Joanne Hayward TBC – Named Doctor Safeguarding Adults Sharon Hinsley – Associate Director of Operations Unscheduled Care,	<b>Date last updated : (and version no)</b>	Version 6 Updated October 2019 Version 6 Updated December 2019 Version 10 March 2020
<b>Core implementation Group :</b>	Safeguarding Adults Operational Group /Integrated Safeguarding Committee NDHT	<b>Next review due by - Group / Committee : Date :</b>	Integrated Safeguarding Committee

Links to key documents:

Mental Capacity Act (MCA) 2005  
 MCA 2005 Code of Practice 2007  
 Care Act 2014  
 Human Rights Act 1998  
 Mental Health Act

Safeguarding Adults – Intercollegiate Document 2018  
 Care Quality Commission Essential Standards 2010  
 Information sharing – Advice for practitioners providing safeguarding services to children, young people, parents and carers 2018  
 Safeguarding Adults : Standards for all Providers  
 DSAP Safeguarding Adult Reviews  
 Devon Homicide Reviews  
 DSAP Thematic Reviews  
 Children and Families Act 2014  
 Safeguarding Adults Protocol: Pressure Ulcers and the interface with a Safeguarding Enquiry 2018  
 Care Act Statutory Guidance (2017)

Key to names:

Integrated Safeguarding Team (IST)

Darryn Allcorn DA

Anna Brimacombe ABri

Alison Bradshaw ABra

Mary Fisher MF

Andy Cox AC

<b>Safeguarding Adults</b>					
<b>The system for identifying, referring and supporting adults with a safeguarding</b>	Integrated Safeguarding Team to monitor all Datix entries with a	All Datix incident reports indicating a SA concern are monitored and escalated to the LA when further investigation is required.	IST Lead ABri ABra MF	Business as usual March 2020	<b>Blue</b>

<b>risk is robust and understood by all staff across the Trust.</b>	Safeguarding Adult coding.	Specialist Nurses Safeguarding to review all Datix incidents with SA concern within 5 working days.	ABra MF	Business as usual March 2020	Blue
		Specialist Nurses Safeguarding to review all Datix incidents with SA concern and provide feedback to Staff members with advice and support regarding actions.	ABra MF	Business as usual March 2020	Blue
		Ensure a robust system is in place across the Trust, performance measures developed and reported through the quarterly safeguarding report.	ABri	Business as usual March 2020	Blue
	Integrated Safeguarding Team members to attend Devon Safeguarding Adult Board and Sub groups.	Participate in relevant meetings DSA Board : DSA Quality Assurance Group: DSA Learning and Development Group: DSA Operations Group:	DA / ABri ABri / ABra / MF ABri/Andy Cox ABri	Business as usual March 2020	Blue
		Safeguarding Adults Leads Health Network group.	ABri	Business as usual March 2020	Blue
		NDHT continues to respond to requests for information from DSAB with regard to DHR and SAR.	ABri/ IST	Business as usual March 2020	Blue
		Data is shared with the DSAB and wider health community to inform processes and practice locally and nationally	ABri/IST	Business as usual March 2020	Blue

	<p>ISGT to monitor LA referrals.</p> <p>Performance reporting to Operational group Monthly.</p>	<p>Development of a new electronic referral form in association with Systems developer.</p>	<p>ABri/ IST</p>	<p>March 2020</p> <p>Completed October 2020. Ops Group presentation Oct 19</p> <p>Go live date 11/11/19</p>	<p>Green</p>
		<p>NDHT continues to respond to requests for information about complex adult abuse cases.</p>	<p>IST</p>	<p>Business as usual</p> <p>March 2020</p>	<p>Blue</p>
		<p>Continue to develop the safeguarding adult intranet site to be an easy resource.</p>	<p>IST</p>	<p>Completed June 2019</p>	<p>Green</p>
		<p>To develop a Lead Practitioner network.</p>	<p>ABri</p>	<p>Completed January 2019</p>	<p>Green</p>
	<p>Bi annual joint Safeguarding Newsletter with adults and children.</p>	<p>Bi annual joint Safeguarding Newsletter with adults and children.</p>	<p>IST</p>	<p>April 2019</p>	<p>Green</p>
				<p>Completed and distributed</p>	<p>Green</p>

<b>Raise awareness of DoH Pressure Ulcer Protocol for SA.</b>	IGST will monitor pressure ulcer concerns reported on Datix.	Reduction in the amount of unnecessary SA Concerns raised for pressure damage.	IST	Business as usual March 2020	<b>Blue</b>
		Rationalise the reporting of Pressure area damage.	IST / Issue Viability Team	Complete June 2019	<b>Green</b>
		Rationalise DoH pressure area damage document into Safeguarding Adult decision Guide.	Mary Fisher	Complete April 2019	<b>Green</b>
<b>Improve the identification and reporting of adults at risk of abuse.</b>	IGST audit referrals via Datix.	Arrange specific SA awareness workshops.	Community Services Manager	May 2019	<b>Green</b>
		Achieve a more detailed breakdown of Community reporting via Datix and SA referrals to the LA.	Community Services Manager	Report to Ops group Feb 2020. Complete	<b>Green</b>
		Local analysis of SA is referring – ratio of health reporting to LA worker reporting.	Community services Manager	Report to Ops group Feb 2020. Complete	<b>Green</b>
		Establish as a standing item on Community Team meeting agendas and clinical supervision sessions.	Community services Manager	Report to Ops group Feb 2020. Complete	<b>Green</b>



<p><b>Investigate, Manage and Report on Section 42 Enquiries caused out to NDHT.</b></p>	<p>Integrated Safeguarding Team to monitor all Section 42 Enquiries caused out to NDHT.</p>	<p>Monitor and record all Section 42 Enquiries which are caused out to NDHT. Manage Section 42 process internally to NDHT Including: Identify investigation leads. Improve quality of section 42 investigation reports. Specialist nurses to support investigation process and report writing. Provide bespoke training to support staff investigation report writing skills.</p>	<p>IST ABri</p>	<p>Business as usual March 2020</p>	<p>Green</p>
<p><b>Develop a Lead Practitioner/Safeguarding Supervisor Network group.</b></p>	<p>Staff from areas across the Trust have been identified and Group has been developed.</p>	<p>Develop Terms of reference for the new Network Group</p>	<p>Integrated Safeguarding Team  Lead Anna Brimacombe Alison Bradshaw Mary Fisher</p>	<p>August 2019 Complete</p>	<p>Green</p>
		<p>Identify Staff members from each area/ward within the Trust with an interest in Safeguarding Adults</p>		<p>Complete</p>	<p>Green</p>

		Organise and run a 3 monthly lead practitioner network group		Complete	Green
		Plan and arrange for Safeguarding Supervision training to train the newly identified SG adults supervisors		Complete training arranged for March 2020 40 practitioners identified.	Green
<b>Homeless Reduction Act 2018</b>	Audit the referrals to North Devon Housing	Implement the requirements of the Homeless Reduction Act with a duty to refer people at risk or homeless.	Lead Anna Brimacombe/Integrated Safeguarding team	September 2019	Green
		Identify ED champion to introduce into the Dept and support practitioners.			Green
	Monitor practice through the SG Operational Group.	Identify a champion in Maternity.			Green
		Develop links with North Devon Housing Dept so referrals can be appropriately made and monitored.			Green
		Develop a SOP for introduction of the duty to refer process.	Lead Anna Brimacombe	Awaiting DSAB publication of Multi agency agreement	Blue
		Update BOB to include information and support for staff.		Complete	Green

<b>Mental Capacity Act</b>					
<b>New Devon CCG MCA Compliance Audit 17/18 Outstanding Actions</b>	Monitor outstanding actions ( identified as Amber) from the CCG MCA audit through the Safeguarding Adults Operational Group	Undertake Audit of MCA practice in Hospital and Community.	Integrated Safeguarding Team	September 2019 Complete	<b>Green</b>
		Provide face to face MCA and DoLS training to support the existing elearning packages available.	Integrated Safeguarding Team	Ongoing	<b>Blue</b>
		Develop and provide information regarding Power of Attorney for Staff/Patients and their families.	Integrated Safeguarding Team LD and Admiral Nurse	October 2019	<b>Blue</b>
		Improve the availability and quality of information for LD and dementia patients and their families about MCA.	Integrated Safeguarding Team	March 2020	<b>Blue</b>
		Information about the Mental Health Act and its use in the Acute Trust in liaison with Psychiatric Liaison.	Integrated Safeguarding Team	March 2020	<b>Blue</b>
<b>Improvement needed in Trusts compliance with the MCA</b>	Feedback from senior clinical staff and training responses.	Discussions around the need to mandate role specific MCA training as part of training compliance.	Anna Brimacombe	June 2019	<b>Green</b>

<p><b>Improve the quality of mental capacity assessments</b></p>	<p>Review of Datix reported incidents</p>	<p>Rolling bespoke training delivered to members of the Safeguarding Supervisors at the Network groups so information can be cascaded to all clinical areas.</p>	<p>Integrated Safeguarding Team Lead Anna Brimacombe Alison Bradshaw Mary Fisher</p>	<p>On going March 2020</p>	<p><b>Green</b></p>
	<p>Integrated Safeguarding Team members to attend Devon Safeguarding Adult Board and Sub groups</p>	<p>Integrated Safeguarding Team members to attend Devon Safeguarding Adult Board and MCA Sub groups</p>	<p>Integrated Safeguarding Team Lead Anna Brimacombe</p>	<p>On-going March 2020</p>	<p><b>Green</b></p>
		<p>IGSG Members to attend CCG MCA Group and cascade information through the network group /electronically and through training.</p>	<p>Alison Bradshaw Mary Fisher</p>		<p><b>Green</b></p>
		<p>Awareness raising via direct feedback to Staff.</p>	<p>Integrated Safeguarding Team</p>	<p>On going</p>	<p><b>Green</b></p>
		<p>Production of a 'Quick Guide to MCA'</p>	<p>Safeguarding Team Lead Anna Brimacombe</p>	<p>July 2019</p>	<p><b>Green</b></p>
		<p>Training for key clinical leadership staff groups as part of level 3 SA training</p>	<p>Alison Bradshaw Mary Fisher</p>	<p>April 2019</p>	<p><b>Green</b></p>
		<p>Development of face to face training</p>	<p>Alison Bradshaw</p>	<p>On-going</p>	<p><b>Green</b></p>

		package for MCA /DoLS.	Mary Fisher		
		Bespoke training provision in Ward / Area's.	Alison Bradshaw Mary Fisher	On-going	Green
		Engagement with DPT safeguarding team to develop practice.	Safeguarding Team Lead Anna Brimacombe	On-going	Green
		Community Teams support with MCA training externally provided to ensure consistency.	Integrated Safeguarding Team	On-going	Green
		Lanyard quick guides to be considered.			
	AUDIT	Datix Audit reviewing 1 month. Case Audit reviewing 20 Patient records. Performance monitoring.	Integrated Safeguarding Team Lead Anna Brimacombe Alison Bradshaw Mary Fisher	March 2020	Blue
<b>Deprivation of Liberty Safeguards / Liberty Protection Safeguards'</b>					
<b>New legal requirements for Liberty Protection.</b>		Task and Finish Group which includes key staff to prepare for these changes.	Integrated	March 2020	Green

<b>Safeguards Acute Hospitals to be responsible for LPS authorisations internally.</b>		Continue to monitor the progress of the Government 'Bill' and the requirements of the Trust.	Safeguarding Team Lead Anna Brimacombe	March 2020	Blue
		Awareness raising via direct feedback to Staff.	Alison Bradshaw Mary Fisher	March 2020	Blue
		Development of face to face training package for MCA /DoLS / LPS.		August 2019	Green
		Bespoke training provision in Ward / Area's.		August 2019	Green
<b>To ensure that every patient that attends the Hospital where their liberty is deprived has been identified.</b>	The Safeguarding Team at NDHT will be aware of all patients where a DoLS authorisation is in place.	Weekly telephone calls to the wards and clinical areas to establish patients subject to DoLS.	Safeguarding Team Lead Anna Brimacombe Alison Bradshaw Mary Fisher	March 2020 Transfer to 19/20 Work Plan	Green
		Recording of patients and their current status in SG team.		May 2019	Green
		Notification and cross checks with LA. Audit.		May 2019	Green
		Additional Staff Training.		May2019	Green
<b>Staff Training</b>					
<b>Maintain delivery of Safeguarding training in line with service and</b>	Maintain attendance figures for performance	Map Staffs training requirements against Adult Safeguarding Intercollegiate Document 2018.	Andy Cox/Anna Brimacombe	March 2020 Complete	Green

<p><b>national requirements Safeguarding Adults Intercollegiate Document 2018.</b></p>	<p>reporting.</p> <p>Maintain evaluation of sessions and content for both currency and sufficiency of content.</p>	<p>Provision of Level 1 &amp; 2 training content through STAR.</p>	<p>Andy Cox/Anna Brimacombe</p>	<p>March 2020</p>	<p><b>Green</b></p>
	<p>Maintain Peninsula network links to be aware of local and good practice.</p>	<p>Provision of additional Level 3 face to face sessions to reflect local demand for places. Workforce Development will maintain training records and evaluation of training.</p>	<p>Andy Cox/Anna Brimacombe</p>	<p>March 2020</p>	<p><b>Blue</b></p>
		<p>Training Lead will attend relevant Peninsula or national networking events as appropriate.</p>	<p>Andy Cox/Anna Brimacombe</p>	<p>March 2020</p>	<p><b>Blue</b></p>
<p><b>Restraint training</b></p> <p><b>Maintain delivery of restraint training in line with service and national requirements.</b></p>	<p>Maintain attendance figures for performance reporting</p> <p>Maintain local/national network links to be aware of local and good practice</p>	<p>Provision of Restraint training to reflect local demand.</p>	<p>Andy Cox</p>	<p>March 2020</p> <p>No report as of December 2019</p>	<p><b>Blue</b></p>

	Maintain accreditation for delivery of training.				
<b>Prevent training</b> <b>Maintain delivery of Prevent training in line with service and national requirements.</b>	Maintain attendance figures for performance reporting  Maintain Peninsula network links to be aware of local and good practice	Training content to include appropriate links to safeguarding issues, MCA and DoLS issues. Workforce Development will maintain training records and evaluation of training.	Andy Cox	March 2020	<b>Green</b>
		Training Lead will attend relevant local or national networking events as appropriate.	Andy Cox		<b>Blue</b>
		Training lead will maintain accreditation to appropriate national bodies.	Andy Cox	March 2020	<b>Blue</b>
		Provision of Level 1 & Level 2	Andy Cox	March 2020	<b>Blue</b>



		Safeguarding training available on STAR to satisfy requirement for Basic Prevent Awareness Training.			
		Provision of access to Home Office eLearning via STAR.	Andy Cox	March 2020	Blue
		Provision of additional Health WRAP face to face sessions to reflect local demand for places.	Andy Cox	March 2020	Blue
		Workforce Development will maintain training records and evaluation of training.	Andy Cox	March 2020	Blue
		ABri to continue working with the PREVENT leaning and development group to develop Peninsula training. Training Lead will attend relevant Peninsula or national networking events as appropriate.	Integrated Safeguarding Team Lead Anna Brimacombe	March 2020	Blue
		ABri Attend PREVENT Leads Groups.	Integrated Safeguarding Team Lead Anna Brimacombe	March 2020	Blue

<p><b>Domestic Abuse training</b></p> <p>Maintain delivery of and further develop DV training in line with service and national requirements as identified by Pathfinder.</p>		<p>ABrad to work with Pathfinder and IDVA to further develop training packages which can be used for short training interventions in clinical areas, bespoke sessions for individual clinical areas and general training provision at level 2 and 3 children and adults.</p>	<p>Lead Alison Bradshaw/Mary Fisher/Jane Frost/Pathfinder link Naomi Hawthorne</p>	<p>March 2020</p>	<p><b>Blue</b></p>
<p><b>Learning Disability training</b></p>	<p>Mandate LD e-learning training to be undertaken 3 yearly as per the Intercollegiate Doc 2018.</p>	<p>Introduce mandatory LD awareness training to all Staff within NDHT.</p>	<p>Andy Cox</p>	<p>Complete</p>	<p><b>Green</b></p>
		<p>Workforce Development will maintain training records and evaluation of training.</p>	<p>Andy Cox</p>	<p>Complete</p>	<p><b>Green</b></p>
<p><b>DOMESTIC VIOLENCE and ABUSE</b></p>					
<p><b>Ensure victims of Domestic abuse are identified /supported and offered referral opportunities.</b></p> <p><b>Ensure both patients and staff are able to access relevant information regarding domestic abuse services within</b></p>	<p>Performance figures from 'Pathfinder Project'.</p> <p>Audit within clinical areas including Emergency dept. and Maternity.</p>	<p>ABra to line manage the IDVA engaged on an honorary contract with NDHT.</p> <p>ABri and DA to continue with Business case for IDVA support to be funded form NDHT but the post holder to be managed within the NDADA structures.</p>	<p>Darryn Allcorn Anna Brimacombe Alison Bradshaw Jane Frost (IDVA)</p>	<p>March 2020 On-going</p>	<p><b>Blue</b></p>
	<p>Liaison with NDADA.</p>	<p>Actively participate in the 'Pathfinder' IDVA research/development project.</p>		<p>March 2020</p>	<p><b>Blue</b></p>

and external to NDHT.		Review and update DVA Policies and Procedures in line with Pathfinder advice and guidance.		March 2020	Blue
		Audit current practice within key areas ED and Maternity.		March 2020	Blue
		Review and develop DV services for NDHT staff using best practice identified through the Pathfinder project.		March 2020	Blue
<b>POLICY Review</b>  In order to support best practice to ensure professionals working in NDHT have Policy and Guidance that is relevant and up to date with all legislation.	Policy Review	Review the following Policies:-	Integrated Safeguarding Team Lead Anna Brimacombe Alison Bradshaw Mary Fisher	March 2020	Blue
		Safeguarding Adults			
		Deprivation of Liberty Safeguards			
		Domestic Violence and Abuse			
		Mental Capacity Act			
		Female Genital Mutilation			
<b>PREVENT</b>					
Meet the Trusts national and local requirements under the PREVENT agenda	Provide monthly PREVENT data to NHS England.  Monitor training	Nurse Consultant and PREVENT lead to continue working with the Safer Devon/PREVENT partnership to support best practice across the south west.	PREVENT Lead Anna Brimacombe	March 2020	Blue

---

	compliance				
		Develop practice in NDHT through bespoke training packages, face to face support and advice.			
		Work with PREVENT training task and finish group to develop PREVENT training document.			

## 13. APPENDIX 2: SAFEGUARDING CHILDREN GROUP WORK PLAN 2019-20

Safeguarding Children Group Work Plan 2019/20		Date Created	April 2019
<b>Plan Owner :</b>	Anna Brimacombe – Nurse Consultant Safeguarding Joanne Hayward - Named Midwife Dr Rebecca Rub – Named Doctor Child Protection Dr JP Smith- – Named Doctor Child Protection Sharon Hinsley – Associate Director of Operations Unscheduled Care,	<b>Date last updated : (and version no)</b>	Version 1: April 2019 Version 2: June 2019 Version 3: August 2019 Version 4: December 2019 Version 5: March 2020
<b>Core implementation Group :</b>	NDHT Integrated Safeguarding Committee NDHT Safeguarding Children Operational Group	<b>Next review due by - Group / Committee : Date :</b>	Integrated Safeguarding Committee
<p>Links to key documents:</p> <p>Children and Families Act 2014</p> <p>Working Together 2018</p> <p>Safeguarding Children and Young People – Intercollegiate Document 2014</p> <p>What to do if you're worried a child is being abused – Advice for Practitioners 2015</p> <p>Care Quality Commission Essential Standards 2010</p> <p>Information sharing – Advice for practitioners providing safeguarding services to children, young people, parents and carers 2018</p> <p>South West Peninsula Safeguarding Children Peer Review Audit 2011</p> <p>Section 11 Children Act 2004</p>			

Safeguarding Children: Standards for all Providers

DSCB Serious Case Reviews

Devon Homicide Reviews

DSCB Thematic Reviews

Section 11 of the Children Act 2004 places a duty on all health organisations to make arrangements to ensure that, in discharging their functions, they have regard to the need to safeguard and promote the welfare of children.

	<b>Driver Specific</b> Issue / gap / objective requiring action/CQC	<b>Monitoring/ Measurable</b> How we know we have succeeded	<b>Actions Specific, Achievable</b> Stated clearly, communicated widely	<b>Realistic</b>	<b>Person Responsible</b>	<b>Time-Frame To Achieve</b> Timebound	<b>Status</b>
1	System for identifying children with a safeguarding risk is robust	MASH/SCLF forms	<ul style="list-style-type: none"> <li>Development of a new an electronic MASH referral form in association with Systems developer.</li> <li>Monitor the timeliness and content of MASH forms and SCLFs ensuring a robust feedback loop to individuals/departments completing the forms.</li> </ul>	Nurse Consultant and Specialist Nurse SG children to work with System developer to develop new MASH referral form.  Nurse Consultant to share new form with wider health community who want to adopt the same.	Nurse Consultant/System Developer IT	<b>Complete</b>	
				Safeguarding Administrators to include all SCLF and MASH enquiries in the SCLF folder and spread sheet within 3 working days.	Safeguarding Administrators	On going March 2020	

	<b>Driver</b> <b>Specific</b> Issue / gap / objective requiring action/CQC	<b>Monitoring/</b> <b>Measurable</b> How we know we have succeeded	<b>Actions</b> <b>Specific, Achievable</b> Stated clearly, communicated widely	<b>Realistic</b>	<b>Person</b> <b>Responsible</b>	<b>Time-Frame To</b> <b>Achieve</b> <b>Timebound</b>	<b>Status</b>
	and understood by all staff across the Trust			Specialist Nurses Safeguarding to review all SCLF and MASH enquiries within 5 working days.	Specialist Nurses Safeguarding	On going March 2020	
		MASH/SCLF/MACE	<ul style="list-style-type: none"> <li>• Ensure that Trust staff are able to identify children at risk from Child Criminal Exploitation.</li> <li>• NDHT continues to respond to requests for information about complex child abuse cases.</li> </ul>	Participate in relevant meetings for any future CCE cases.  NDHT continues to respond to requests for information about complex child abuse cases.  The Specialist Nurse Safeguarding SARC/Sexual health and Exploitation Named attends the MACE forums and is the Deputy Chair.  Specialist Nurse Safeguarding SARC/Sexual health and Exploitation attends the forums and issues/learning discussed at Operational Group meeting.  Actions form MACE or strategy meetings are actions.  Data is collected and collated to identify the numbers of children being cared for by the Trust as a	Specialist Nurse Safeguarding SARC/Sexual health and Exploitation	On-going March 2020	

	<b>Driver</b> <b>Specific</b> Issue / gap / objective requiring action/CQC	<b>Monitoring/</b> <b>Measurable</b> How we know we have succeeded	<b>Actions</b> <b>Specific, Achievable</b> Stated clearly, communicated widely	<b>Realistic</b>	<b>Person</b> <b>Responsible</b>	<b>Time-Frame To</b> <b>Achieve</b> <b>Timebound</b>	<b>Status</b>
				result of CCE.  Data is shared with the DCFP and wider health community to inform processes and practice locality and nationally.			
		Training compliance	<ul style="list-style-type: none"> <li>Ensure a robust system for safeguarding children supervision is in place across the Trust, performance measures developed and reported through the quarterly safeguarding report.</li> </ul>	Ensure Safeguarding Children Supervisors have annual update training to support their roles. Provide supervision training to new practitioners undertaking the role succession planning.	Nurse Consultant Safeguarding	Complete	
			<ul style="list-style-type: none"> <li>Provide regular safeguarding supervision and peer review for Paediatricians.</li> <li>Provide Emergency Department and Obstetric Consultants access to safeguarding supervision on request.</li> <li>Provide bi annual safeguarding updates including case reviews for Emergency Department and Obstetric Medical staff.</li> </ul>	SMART meetings are in progress	Named Doctor/ Nurse Consultant Safeguarding	Complete	
			<ul style="list-style-type: none"> <li>Develop a new training package at level 3 to meet the requirements of the new Intercollege Document and is reflective of the changes in safeguarding nationally and locally.</li> <li>Provide Level 3 training to staff which meets the standards set out in the 2014 Intercollegiate training document and supports staff to complete high quality assessments and reports.</li> </ul>	Provide Level 3 training monthly for Trust personnel		Complete	



	<b>Driver</b> <b>Specific</b> Issue / gap / objective requiring action/CQC	<b>Monitoring/</b> <b>M</b> asurable How we know we have succeeded	<b>Actions</b> <b>Specific, Achievable</b> Stated clearly, communicated widely	<b>Realistic</b>	<b>Person</b> <b>Responsible</b>	<b>Time-Frame To</b> <b>Achieve</b> <b>T</b> imebound	<b>Status</b>
			<ul style="list-style-type: none"> <li>Work with workforce/ training manager Develop a hand held/hard copy of a training passport and distribute this at Level 3 safeguarding training.</li> </ul>	Produce a safeguarding training passport.	Nurse Consultant Safeguarding / Workforce training Manager	Complete	
			<ul style="list-style-type: none"> <li>Learning from serious case reviews will continue to be included in training materials.</li> </ul>	Include learning from SCR into Level 2 and 3 Safeguarding Children training.	Named Professionals	On going March 2020	
			<ul style="list-style-type: none"> <li>Bi annual joint Safeguarding Newsletter with adults and children.</li> </ul>	Produce safeguarding newsletter bi annually	Integrated SG team	Complete	
<b>2</b>	Ensure that Trust staff are aware of the impact of adults behaviours on children including the toxic Trio	MASH/SCLF/MARAC forms	<ul style="list-style-type: none"> <li>Continue to work with the IDVA to support staff within NDHT when DV is identified.</li> </ul>	Provide on-going training in identification of domestic violence.  Provide information about the IDVA role in NDDH.  Support IDVA on an honorary contract to provide health service provision at NDDH.	Named Nurse Independent Domestic Violence Advisor	On going March 2019	
<b>3</b>	All information/guidance relating to safeguarding children is up to date, reflects best practice and is easily accessible to staff across the Trust	Safeguarding Team	<ul style="list-style-type: none"> <li>Continue to develop the safeguarding children intranet site to be an easy resource.</li> <li>Specialist Nurse SARC to update specialist areas of</li> </ul>	Safeguarding website regularly reviewed and updated with relevant information	Safeguarding Team	Complete	

	<b>Driver</b> <b>Specific</b> Issue / gap / objective requiring action/CQC	<b>Monitoring/</b> <b>Measurable</b> How we know we have succeeded	<b>Actions</b> <b>Specific, Achievable</b> Stated clearly, communicated widely	<b>Realistic</b>	<b>Person</b> <b>Responsible</b>	<b>Time-Frame To</b> <b>Achieve</b> <b>Timebound</b>	<b>Status</b>
			responsibility on intranet site <ul style="list-style-type: none"> <li>Specialist Nurse SG Children to update Intranet with specialist areas of responsibility.</li> </ul>				
	To develop joint processes for safeguarding children and supporting staff in North Devon as part of the Childrens Alliance	Continue to participate in the plans and processes once the Alliance starts	Continue to participate in the plans and processes once the Alliance starts.  Establish the training requirements of the Staff in North Devon who will require Level 3 training.  Establish the supervision requirements of the Staff fin North Devon		Nurse Consultant Safeguarding	April 2020	

	<b>Driver</b> <b>Specific</b> Issue / gap / objective requiring action/CQC	<b>Monitoring/</b> <b>M</b> asurable How we know we have succeeded	<b>Actions</b> <b>S</b> pecific, <b>A</b> chievable Stated clearly, communicated widely	<b>Realistic</b>	<b>Person</b> <b>R</b> esponsible	<b>Time-Frame To</b> <b>A</b> chieve <b>T</b> imebound	<b>Status</b>
4	Integrated SG team. /NDHT to engage in the Devon Children and Family Partnership and sub groups.  Ensure NDHT meets the requirements of Section 11.	Updates to the Integrated Safeguarding Committee.	Nurse Consultant Safeguarding to attend Quality assurance delivery group Health Sub Group Workforce Sub group Specialist Nurses to attend CCE Chairs Meeting Early Help Practitioner forum Locality Partnership Meeting Safeguarding Lead or Deputy to attend the DCFP Quality Assurance Group	Engage with the DCFP Executive Board Meetings including the Quality Assurance Group.  Liaise with CCG Lead to ensure engagement with the DCFP	Executive Lead for Safeguarding	March 2020	
5	Key areas of safeguarding children work are audited to gain assurance against key safeguarding documents and standards of practice	Audits are monitored through the Integrated Safeguarding Committee	Audit of newly introduced safeguarding questions on the CTW admission documents.	Audit of paperwork to be undertaken by Specialist Nurses	Integrated Safeguarding Team	June 2020	
			Audit of Safeguarding Supervision compliance and quality	Audit results to be presented to the Safeguarding	Integrated Safeguarding Team	September 2020	
			Engage in the DCFP MACA Audit process through the QAD group.	Present findings and learning for the MACA audits undertaken by the DCFP QAD group to the SG Ops Group/ SG Children Board and the Network groups.	Named Nurse	Complete	

	<b>Driver</b> <b>Specific</b> Issue / gap / objective requiring action/CQC	<b>Monitoring/</b> <b>M</b> asurable How we know we have succeeded	<b>Actions</b> <b>Specific, Achievable</b> Stated clearly, communicated widely	<b>Realistic</b>	<b>Person</b> <b>Responsible</b>	<b>Time-Frame To</b> <b>Achieve</b> <b>T</b> imebound	<b>Status</b>
6	<b>Update Safeguarding Children and Young People Policy to reflect the changes made because of SARC accepting self referrals for children between 16-18 years.</b>	Present to Operational Group and gain approval at ISC.	Specialist Nurse Safeguarding SARC to Update Safeguarding Children and Young People Policy	Policy reflects the changes	Integrated Safeguarding team. Specialist Nurse Safeguarding SARC	Complete	