CARING FOR YOU

NHS
United Lincolnshire
Hospitals
NHS Trust

Safeguarding Strategy

2017-2020

United Lincolnshire Hospitals **NHS**
NHS Trust

Contents

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1. Introduction

United Lincolnshire Hospitals NHS Trust (ULHT) is committed to safeguarding all patients who access services across the Trust. The term safeguarding covers everything that assists a child, young person or adult at risk to live a life that is free from abuse and neglect and which enables them to retain independence, well-being, dignity and choice. It is about preventing abuse and neglect, as well as promoting good practice for responding to concerns on a multi -agency basis.

ULHT is committed to ensuring that safeguarding is firmly embedded within the wider duties of the Trust; acknowledging the findings of large scale inquiries such as Francis and Lampard, and also recent legislation, such as the Care Act, 2014.

As such, this is the Trust's first strategy for safeguarding which outlines the intended improvement journey.

1.1   Legal framework for safeguarding

There are very different legal frameworks that supports the safeguarding of children and adults at risk. Below is a summary of that legislation

Adults legislation	Children legislation
Mental Health Act 1983	Children & Families Act 2014
Mental Capacity Act 2005 & Deprivation of Liberty 2009	The Local Safeguarding Children Boards (Review) Regulations 2013
Safeguarding Vulnerable Groups Act 2006	Children, Schools & Families Act 2010
Mental Health Act 2007	Children & Young Person Act 2008
National Health Service and Community Care Act 1990	Children Act 1989 and 2004
Care Act 2014	
Health & Social Care Act 2008, regulations 2014 states: Safeguarding service users from abuse and improper treatment	
Human Rights Act 1998	
Equality Act 2010	

1.2 What does safeguarding cover?

As society changes and this is reflected in our community, so does the need to respond to safeguarding concerns. This strategy is a response to the current changes within safeguarding.

Areas for children safeguarding	Areas for adult Safeguarding
Abuse	Abuse
Serious Case Reviews	Safeguarding Adult reviews
Domestic Violence and Abuse	Domestic Violence and Abuse
Neglect	Self-Neglect
Traditional harmful practice e.g. FGM, breast ironing	Traditional harmful practice e.g. FGM, breast ironing
Multi Agency Public Protection Arrangements (MAPPA)	Multi Agency Public Protection Arrangements (MAPPA)
Radicalisation	Radicalisation
Child trafficking	Trafficking
Modern Slavery	Modern Slavery
E safety	E safety
Children with disabilities	Adults with learning disabilities
Children with Mental Health Issues	Adults with mental health issues including deprivation of liberty/ restraint and restrictions issues with capacity and consent
Missing children	Missing adults
Sexual abuse and exploitation	Sexual abuse and exploitation
Children who abuse children	Adult at risk who abuses an adult at risk
Allegations against people who work/volunteer with children	Allegations against carers who are relatives and friends
Child protection	Child protection
Other Areas – Children	**Other Areas - Adults**
Child Death	Raising an alert or serious incidents
Young Person's substance misuse	Abuse by children to adults
Peri-natal Mental Health	Mental Capacity
Elective Home Education	Advocates
Children living away from home Private Fostering	Community Safety
Historic Abuse Allegations	Historic Abuse Allegations
Looked after Children	
Gang Activity	
Pre-natal Substance Misuse	
Pre-birth Protection Plans	

2   Our duties

2.1   Statutory compliance for safeguarding

From April 2015, Providers had to comply with the following two groups of regulations which replaced in its entirety CQC's Essential Standards of Quality and Safety which included 28 outcomes:

1. Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Part 3)
2. Care Quality Commission (Registration) Regulations 2009 (Part 4)

The above regulations introduce the new fundamental standards, which describe requirements that reflect the recommendations made by Sir Robert Francis following his inquiry into care at Mid Staffordshire NHS Foundation Trust. The following regulations relate to Safeguarding and need to be considered in how the Trust assures itself that there are effective and safe safeguarding processes and practices in place:

- Regulation 9: Person-centred care
- Regulation 10: Dignity and respect
- Regulation 11: Need for consent
- Regulation 12: Safe care and treatment
- Regulation 13: Safeguarding service users from abuse and improper treatment

Additionally for children, the Trust has a staturory obligation to comply with section 11 of the Children's Act 2014, which outlines the requirement for clear lines of accountability for provision of services that safeguard and promote the well-being of children. For adults, Part 1 of the Care Act 2014 came into force on the 1st April 2015 and Working Together to Safeguard Children 2015, established a clear legal framework for statutory agencies to maintain rights of those with care and support needs who are at risk of abuse or neglect.

The strategy is aligned to the above regulatory requirements and takes into consideration the revised government published guidance to all NHS organisations on their responsibilities to safeguard children and adults at risk "Accountability and Assurance Framework for Safeguarding Vulnerable People in the Reformed NHS".

3   Our safeguarding vision

ULHT firmly believes that a whole organisational approach is required to safeguard and promote the welfare of children, young people and adults at risk using Trust services.

ULHT very much emphasises that safeguarding is everyone's business; whether they provide direct patient care or not and irrespective of seniority. This will require safeguarding governance and practices to be embedded across all divisions and services provided by the Trust, and in every aspect of the Trust's work.

There will be robust governance arrangements around the safeguarding agenda and all staff working within United Lincolnshire Hospitals Trust will be able to discharge their statutory responsibilities within their professional boundaries through developing a workforce who are competent, confident and empowered to speak up and take action when they see or suspect safeguarding issues.

Shared learning will enhance and shape service provision.

ULHT fully supports the Making Safeguarding Personal agenda within safeguarding and plans to do this through building supportive internal processes and pathways that enable the needs of patients to be met in a dignified manner, which also includes responses to incidents and concerns.

The patient and carer's experience will also be enhanced by the provision of effective partnership working with other agencies which will aid seamless service provision.

ULHT is committed to maintianing patients right to be safe and is aware that professional interagency working is critical to ensure that patients receive seamless care.

4   Our aims

1. To ensure that safeguarding is everyday business across the organisation, evidenced in all areas of the Trust's activities and business.
2. To ensure that staff are empowered to speak up and act when they see or suspect safeguarding issues by ensuring that they receive appropriate level training based on national and local standards.
3. To ensure that patients are protected by ensuring that organisational policies and prcesses are streamlined to facilite staff to do the "right thing".
4. To develop a dataset of information to monitor not only safeguarding activity to ensure that the organisation has sufficient capacity, but also quality metrics to ensure that the organisation is meeting their statutory requirements by monitoring themes, patterns and trends across the organisation and external areas.
5. To make safeguarding personal through learning from children, families and adults at risk who have used the service to ensure that the response to safeguarding incidents and concerns is proportionate and least intrusive, thus appropriate to the risk presented and ensuring the person remains at the centre of any processes.
6. To work in partnerhship with other health colleagues to facilitate co-operation in a transparent and productive way to progress safeguarding.
7. To ensure that there is clear accountability and transparency in delivering safeguarding by building an effective governance assurance framework which

includes measuring the quality of work and compliance against the regulatory standards.

ULHT will use this strategy over the next 3 years to drive forward and embed the Safeguarding agenda across the organisation. The Trust's promises and standards will underpin the strategy in the way daily business is conducted to improve services, enhance quality and positively impact on the patients', service users and staff experience.

5   Safeguarding standards for children and young people

The child is at the centre of everything we do

| Ensure we meet the organisational, legal, and strategic responsibility under the Children Act and CQC fundamental standards | To support all our team members, recognising the emotional impact of our work | Provide evidence based training in the prevention of child maltreatment to Trust staff | Provide guidelines and policies for staff to fulfill their safeguarding children responsibilities | Providing an evidence based **expert** service in all functions of safeguarding children to keep children safe | Commitment to multi-agency working, liaising where appropriate and offering professional challenge in order to keep children safe |

6   Safeguarding standards for adults

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Keep adults safe from harm through a culture of prevention

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Acknowledge that neglect and abuse of an adult can happen and that it is every person's right to live free from abuse and neglect	Ensure that staff are aware of their responsibilities and know who they can access for support, guidance and advice, and use reflective practice in supervision	Have good systems in place for effective identification of neglect and abuse of an adult, taking prompt action	Have supportive policies and procedures in place to assist staff through safeguarding processes	Provide a training programme that equips staff with the knowledge and skills to safeguard adults	Develop and strengthen relationships with partner organisations to enhance service provision, working together to keep adults safe from harm	Sharing and learning from incidents and developing change to improve future outcomes

7   Goverance assurance framework for safeguarding

ULHT has a governance structure in place to ensure policies, procedures, information and concerns are recorded, discussed and risks are identified and assessed.

The Trust Board holds ultimate responsibility for safeguarding. In order to ensure the Trust responsibilities are met, there is an established Integrated Safeguarding strategic Committee which reports to the Trust Board via the Quality Governance Committee. ULHT plan to further strengthen this process with the introduction of separate children/young people and adult operational groups that will report to the Integrated Safeguarding Committee.
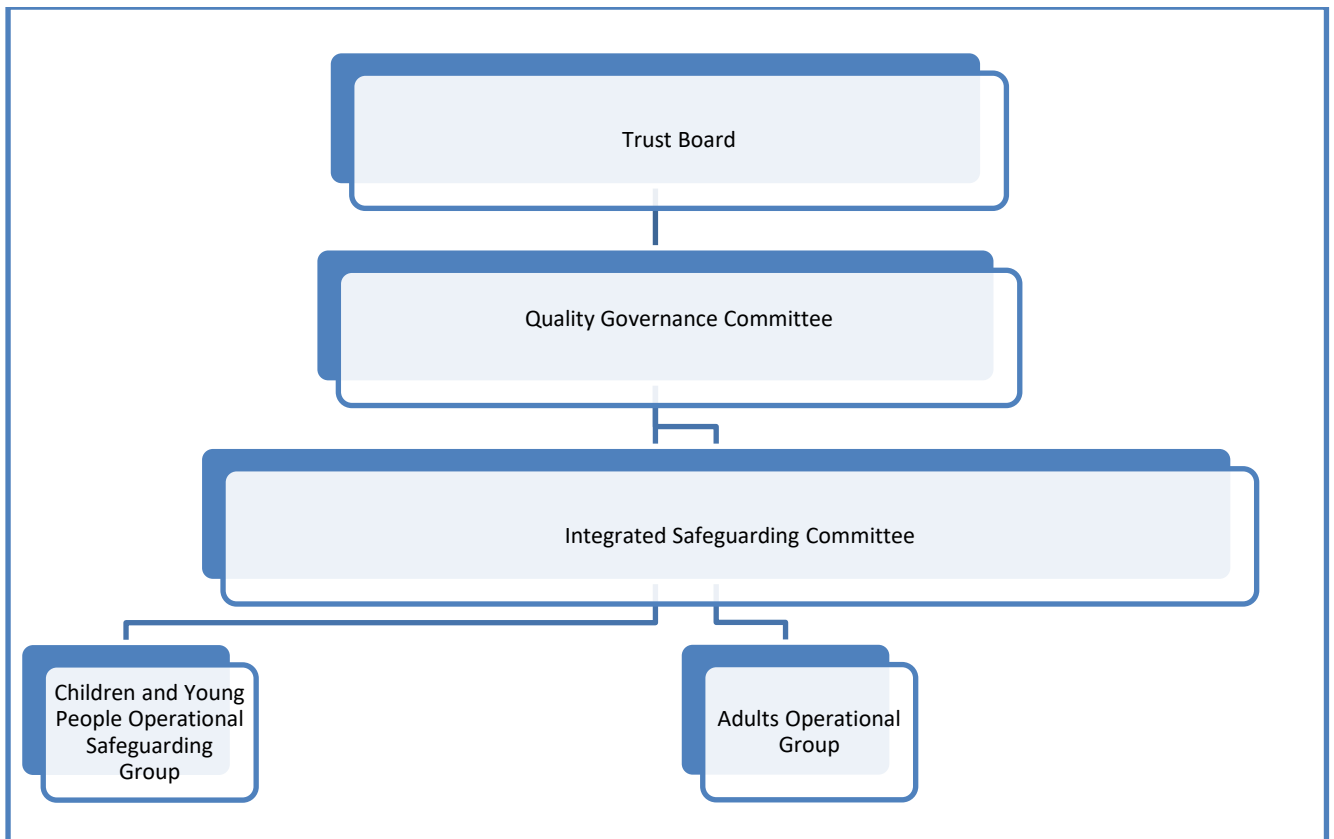
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Table One: Organisational Meeting Structure

8   Lead responsibilities

The Director of Nursing has the NHS Board responsibility for the Trust with regard to Safeguarding Children and Adults at risk. However all staff have safeguarding responsibilities and are accountable for their actions and where appropriate, also accountable to their professional bodies for their actions. The Trust works in partnership with the Local Authority, who has a statutory responsibility to safeguard children and adults.

The Trust has in place the relevant statutory roles and plans to expand this to support best practice with the appointment of a Lead Doctor for Adult Safeguarding.

9   Policies and procedures

Policies, procedures, protocols and frameworks relating to safeguarding are in place to support staff in their decision making and require regular review either at a determined time interval or in response to national guidance, legislative changes or findings from Serious Case Reviews, Adult Reviews or internal reviews. The policies are endorsed by the Integrated Safeguarding Committee and ratified by the Clinical Effectiveness Committee.

10   Safe recruitment

The Organisation has several policies in place relating to safe recruitment, including the Disclosure and Barring Policy. In light of the Bradbury and Saville Reports, further amendments are required and are captured in associated action plans.

The Trust reports to a Local Authority Designated Officer (LADO) to respond to allegations made by and about staff involving children, and has a nominated Designated Adult Safeguarding Manager (DASM) who is notified regarding staffing allegations involving adults. Currently both roles/links are situated within the Trust's safeguarding team, however there is recognition that the LADO and some aspects of the DASM role should sit within Human Resources to assist in building stronger links with the Doctors in Distress and Nurses in Distress Meetings.

11   Training

All staff members have mandatory and statutory training on safeguarding children and adults at risk. Depending on the job responsibilities, there are different levels and frequency of training. In children this is benchmarked against the Intercollegiate Document (2014) which outlines the appropriate level and content of training.

In adults this is currently benchmarked against the Bournemouth framework, however The Safeguarding Adults: Roles and competences for health care staff – Intercollegiate document is currently being reviewed and approved by NHS England.

Both children and adults training include *Prevent* as a result of a Department of Health response to make staff aware of radicalisation as a safeguarding concern.

12   Regulation and inspection

Monitoring performance against external Audit and Inspection Frameworks, including the Children Act (2014) Section 11 and Care Quality Commission (CQC) Regulation 13, will be used to benchmark performance and identify areas for improvement.

The Trust has a statutory responsibility to ensure that services provided to children and young people are compliant with Children's Act 2004 Section 11. The Lincolnshire Safeguarding Children's Board (LSCB) Section 11 audit is conducted on a 3 yearly basis and requires evidence of effective safeguarding from all levels of the organisation and across all business/commissioning functions. The next audit will be undertaken in the autumn of 2017.

The new CQC strategy (2013) describes how the CQC will strengthen its focus around the Mental Capacity Act and Deprivation of Liberty Safeguards and is reflected in the CQC Fundamental Standards, specifically, '*Safe*' (February 2015). In October 2016 the CQC visited the Trust to undertake a compliance review. Concerns were raised with regard to a lack of understanding by some staff relating to

the Mental Capacity Act (2005) and Deprivation of Liberty Safeguards (2007). The Trust was placed on a Compliance Notice to improve training rates in this area.

In addition the CQC were not assured that the Trust Board was adequately sighted on the progress being made to ensure the Trust meets statutory obligations. The CQC identified a number of areas for improvement including ensuring staff are up to date with mandatory training and staff in the emergency department have received appropriate safeguarding training, ensuring a policy is developed for restraining patients, ligature risk assessments are undertaken in all required areas, and action is taken to ensure the CQC is informed about any Deprivation of Liberty (DoLS) applications in line with Regulation 18 of the Health and Social Care Act 2008 (Registrations) Regulations 2014. Much work was undertaken immediately to address these concerns and ongoing work has been incorporated into the Trust Quality and Improvement Plan, section 7 of which is related to Safeguarding (QSO7). The Trust will use this work stream to lead on the issues raised by the CQC.

The Trust is also expecting a joint OFSTED/CQC inspection of Safegaurding practices, as per the new model of inspection across the agencies involved in safeguarding. The likely area of focus for this inspection is Domestic Abuse for which Lincolnshire have recently reported a slightly higher rate of Domestic Homicide Review.

The Local Authority Assessment Framework (LAAF) is under review and it is anticipated that he Trust will be required to complete an assessment in late 2017 or early 2018.

Due to recent changes in strategic leadership of the organisation's safeguarding services, an external peer review was commissed by the executive lead, Director of Nursing, and those recommendations have been incorporated into the Quality and Improvement Plan.

13   References

ULHT procedures for safeguarding children

ULHT procedures for safeguarding adults at risk

Lincolnshire LSCB multi-agency procedures
http://lincolnshirescb.proceduresonline.com/index.htm

Lincolnshire LSAB multi-agency procedures
https://www.lincolnshire.gov.uk/lsab/multi-agency-policy-and-procedures/120504.article

Statutory Guidance:

Department for Constitutional Affairs (2007) *Mental Capacity Act 2005: Code of Practice.* London: TSO

HM Government (2007) *Statutory guidance on making arrangements to safeguard and promote the welfare of children under Section 11 of the Children Act 2004.* DCSF Publications

HM Government (2008) *Safeguarding children in whom illness is fabricated or induced.* DCSF Publications

HM Government (2009) *The Right to Choose: multi-agency statutory guidance for dealing with forced marriage.* Forced Marriage Unit: London

HM Government (2013) *Working Together to Safeguard Children 2013. Department for Education and 2015 updated https://www.gov.uk/government/publications/working-together-to-safeguard-children--2*

Ministry of Justice (2008) *Deprivation of Liberty Safeguards Code of Practice to supplement Mental Capacity Act 2005.* London: TSO

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Care Act 2014
http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted/data.htm

Planning transition to adulthood for care leavers (2015)
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/397649/CA1989_Transitions_guidance.pdf

Non-statutory Guidance**:**

Children's Workforce Development Council (March 2010): *Early identification, assessment of needs and intervention. The Common Assessment Framework for Children and Young People: A practitioner's guide.* CWDC

Department of Health (March 2011) *Adult Safeguarding: The Role of Health Services*

Department of Health (May 2011) *Statement of Government Policy on Adult Safeguarding*

HM Government (2006) *What to do if you're worried a child is being abused.* DCSF Publications
Law Commission (May 2011) *Adult Social Care Report*
www.justice.gov.uk/lawcommission/publications/1460.htm

Royal College of Paediatrics and Child Health et al (2010) *Safeguarding Children and Young People: Roles and Competencies for Health Care Staff. Intercollegiate Document supported by the Department of Health*

Working Together to Safeguard Children and Young People, HM Government, 2015

Best practice guidance**:**

Department of Health (2004) *National Service Framework for Children, Young People and Maternity Services Standard 5* (including relevant elements that are not contained in Core Standard 5)

Department of Health (2009) *Responding to domestic abuse: a handbook for health professionals*

Department of Health (2010) *Clinical governance and adult safeguarding: an integrated approach.* Department of Health

HM Government (2009) *Multi-agency practice guidelines: Handling cases of Forced Marriage.* Forced Marriage Unit: London

National Institute for Health and Clinical Excellence (2009) *When to suspect child maltreatment.* NICE Clinical Guideline

Department of Health (2006) *Mental Capacity Act Best Practice Tool.* Gateway reference: 6703

Appendix 1: Action to deliver Safeguarding Strategy 2017-2020

This action plan is the combination of:

1. Annual report Safeguarding and Mental Capacity Act 2015-2016
2. Independent review of Safeguarding "Report following the rapid assessment of the form and function of ULHT safeguarding services for both Children and Adults" October 2016
3. 360 Assurance, Internal Audit of Safeguarding – Follow up report, 2016
4. Section 11 Action Plan 2014 – 2017
5. LAF – Lincolnshire assurance framework Bradbury Action Plan, 2016
6. Saville Action Plan, 2016

Safeguarding Quality and Improvement Plan

No	Quality and Safety Improvement Project	Outcome / Key Milestone	KPI Measure	Baseline	Dependencies Resource and Support	Executive Lead	Project Lead	3 Month Milestones (May/Jun/Jul)	Date	6 Month Milestones (Aug/Sep/Oct)	Date	9 Month Milestones (Nov/Dec/Jan)	Date	12 Month Milestones (Feb/Mar)	Date
QS07	Safeguarding	There is a vision, strategy and robust governance across adult and children's safeguarding (Dec17)	Staff understand the Trust SG duties and the vision for 2017-2020. Annual report available. Audit plan in place.	Strategy drafted. Adult operational meetings held quarterly	SG team capacity	Michelle Rhodes	Jenny Hinchliffe	Safeguarding strategy developed	Feb-17	The self-assessment of regulation 13 has been completed and will be repeated every quarter	Aug-17	There is an updated organisation Statement of Intent for safeguarding	Dec-17		
								There is a monthly Operational committee for adult safeguarding established	Mar-17	Named professionals for safeguarding received 3 monthly supervision	Aug-17	A safeguarding audit plan is developed and agreed	Dec-17		
								The safeguarding risk register has been reviewed and updated as required	Mar-17	Trust Safeguarding annual report for 16/17 produced and presented to Trust Board	Sep-17				
								Safeguarding MCA & DOLS audit tools piloted	Jul-17	Children's Act Section 11 self assessment completed	Sep-17				

									Safeguarding service improvements reviewed with support from CCG	Jul-17	Risk register reviewed and updated by Adult safeguarding operational meeting, children and young people operational meeting and integrated safeguarding committee	Sep-17				
											Safeguarding Team and capacity and job descriptions reviewed	Sep-17				
											Safeguarding strategy embedded within the organisation	Sep-17				
											Staff engagement plan to implement safeguarding strategy in place	Sep-17				

		Safeguarding policies have been reviewed, updated and relaunched across the organisation (Jan18)	All polices are updated, relaunched and available on the intranet.	Existing policies in place.			Michelle Rhodes	Jenny Hinchliffe	The dignity in care policy has been reviewed and updated as required	Jan-17						
									The revised dignity in care policy has been relaunched and is embedded across the organisation	Apr-17						
									The MCA and DoLs policy has been reviewed and updated as required	Jun-17	The revised MCA and DoLs policy has been relaunched and is embedded across the organisation	Sep-17				
									The safeguarding children and young people policy has been reviewed and updated as required		The revised safeguarding children and young people policy has been relaunched and is embedded across the organisation	Sep-17	The revised safeguarding children and young people policy has been relaunched and is embedded across the organisation	Dec-17		

								The management of allegations against people who work with children policy has been reviewed and updated as required	Sep-17	The revised management of allegations against people who work with children policy has been relaunched and is embedded across the organisation	Dec-17		
								The self harm in children pathway has been reviewed and updated as required	Sep-17	The revised self harm in children pathway has been relaunched and is embedded across the organisation	Dec-17		
										The unexpected child death policy has been reviewed and updated as required	Nov-17		

														The revised unexpected child death policy has been relaunched and is embedded across the organisation	Jan-18		
										The DNA process for children with outpatient appointments has been reviewed and amended as required (included in safeguarding children and young people policy)	Aug-17	The revised DNA process for children with outpatient appointments has been relaunched and is embedded across the organisation	Nov-17	Audit of adherence to pathway completed	Feb-18		
		There is a robust process for monitoring and reporting safeguarding performance	Safeguarding dashboard used and reports circulated.	Data collected and included in quarterly reports.		Michelle Rhodes	Jenny Hinchliffe	A safeguarding dashboard has been developed and launched	Mar-17	Children aged 14-16 years being cared for in an adult setting is monitored and reported monthly (risks assessed and safeguarding notified)	Oct-17						

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							The use of sedation and rapid tranquilisation is monitored and reported monthly	Jun-17	Children who DNA outpatient appointments is monitored and reported monthly	Oct-17	Audit of use of sedation and rapid tranquilisation completed	Nov-17	
		Early Implementer of safeguarding assurance Tool						Request for ULHT to be early implementer for provider of safeguarding assurance tool submitted to NHSE	Jun-17	Training in the use of the safeguarding assurance tool completed	Sep-17	Provider Safeguarding assurance tool implemented	Nov-17	
		There is a comprehensive education, training and development offer	% of training sessions that have been refreshed/ updated. % of Board members who have received training. Training compliance against target.	Level 2 & 3 SG training, MCA & DoLS and prevent training.		Michelle Rhodes	Jenny Hinchliffe	Training targets are agreed and published for 2017/18	Mar-17	Tailored training for staff on the silver and gold on-call rota has been completed	Sep-17	Review of safeguarding training completed with support from CCG safeguarding team	Nov-17	
								Clinical supervision sessions are provided on all sites	Mar-17	Tailored training for Trust Board members delivered	Sep-17	Senior managers have undertaken a back to the floor session to monitor safeguarding in practice	Dec-17	

							The training offer is reviewed and revised as required	May-17	Additional training and support delivered to appropriately skilled staff available to support ward staff to undertake MCA and DoLS	Oct-17				
							Tailored training is developed for staff on the silver and gold on-call rota	May-17						
							Plan in place to support ward staff to gain competencies in completion of MCA and DOLS	Jul-17						

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