

Meeting Title	Board of Directors		
Date	09.01.20	Agenda item	Bo.1.20.40

SAFEGUARDING ADULTS UPDATE DECEMBER 2019

Presented by	Karen Dawber, Chief Nurse		
Author	Sarah Turner, Named Nurse Safeguarding Adults		
Lead Director	Karen Dawber, Chief Nurse		
Purpose of the paper	To provide the quality committee with an update on the work of the safeguarding adults team.		
Key control	This is a key control for the Board Assurance Framework		
Action required	For approval		
Previously discussed at/ informed by	N/A		
Previously approved at:	Committee/Group	Date	
	Quality Committee	18.12.19	

Key Options, Issues and Risks

This safeguarding adult's update report provides information regarding activity within adult safeguarding at Bradford Teaching Hospitals NHS Foundation Trust.

We have continued to see an increase in activity relating to all aspects of safeguarding. The recent changes in the district wide safeguarding procedures have meant that concerns of abuse which would previously have been referred to the Local Authority (Bradford Metropolitan District Council-BMDC) are no longer referred but managed within the safeguarding adult's team. These cases are where the person may not meet the Section 42 requirement of the Care Act or have stated that they do not wish for external involvement. In line with Making Safeguarding Personal (MSP) principles this view would be respected if no other person / persons were at risk.

There have been developments with respect to the care of people with a learning disability and also in relation to the Mental Capacity Act, which will have an impact on capacity within the safeguarding team in 2020.

- It is anticipated that the Lead Practitioner post for Learning disabilities will be recruited to in 2020 and this will assist in ensuring that the work that has already been undertaken is developed further.
- The changes to the Mental Capacity Act and the change from the current Deprivation of Liberty Safeguards (DoLS) to Liberty Protection Safeguards (LPS) will be implemented in October 2020. Currently all DoLS authorisations are sent to the Local Authority for further assessment and approval, whereas LPS authorisations will be fully assessed and managed by the hospital. This will have resource implications for the Trust, as Trust staff will be required to undertake these assessments, which are currently undertaken by Council staff, however as the Code of Practice and final guidance has not yet been published it is unclear as to the exact requirements at the present time. The Safeguarding Adults Named Nurse attends all the district wide meetings in relation to this change and is working with partners to ensure that the Trust is sighted on the implications as they evolve.

Meeting Title	Board of Directors		
Date	09.01.20	Agenda item	Bo.1.20.40

Analysis

Governance and partnership arrangements remain strong, with consistent Trust representation at the Bradford Safeguarding Adults Board (BSAB) and its subgroups, Domestic and Sexual violence Strategy Board and subgroups, and Multi Agency Risk Assessment Conference (MARAC). Other district-wide meetings are attended as necessary such as those on the West Yorkshire Human Trafficking and Anti-Slavery Network (WYHTASN) and Prevent, with established links for receiving information. Attendance at these meetings ensures information in relation to changes affecting operational practice is able to be identified and appropriately managed to ensure that all staff understand the implications for their practice.

The Trust submits a self-declaration to the Clinical Commissioning Groups (CCGs) on a bi-annual basis (see Appendix 1).

Recommendation

To note and gain assurance.

Benchmarking implications (see section 4 for details)	Yes	No	N/A
Is there Model Hospital data relevant to the content of this paper?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is there any other national benchmarking data relevant to the content of this paper?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is the Trust an outlier (positive or negative) for any benchmarking data relevant to the content of this paper?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for patients			g			
To deliver our financial plan and key performance targets			g			
To be in the top 20% of NHS employers					g	
To be a continually learning organisation				g		
To collaborate effectively with local and regional partners					g	
The level of risk against each objective should be indicated. Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Low		Moderate	High	Significant	
Explanation of variance from Board of Directors Agreed General risk appetite (G)	Risk (*)					

Meeting Title	Board of Directors		
Date	09.01.20	Agenda item	Bo.1.20.40

Risk Implications (see section 5 for details)	Yes	No
Corporate Risk register and/or Board Assurance Framework Amendments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Quality implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Resource implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal/regulatory implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Diversity and Inclusion implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Performance implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Regulation, Legislation and Compliance relevance	
NHS Improvement: (please tick those that are relevant)	
<input type="checkbox"/> Risk Assessment Framework	<input checked="" type="checkbox"/> Quality Governance Framework
<input type="checkbox"/> Code of Governance	<input type="checkbox"/> Annual Reporting Manual
Care Quality Commission Domain: Safe	
Care Quality Commission Fundamental Standard: Safeguarding from abuse	
NHS Improvement Effective Use of Resources: Clinical Services	
Other (please state):	

Relevance to other Board of Director's Committee: (please select all that apply)					
Workforce	Quality	Finance & Performance	Partnerships	Major Projects	Other (please state)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Meeting Title	Board of Directors		
Date	09.01.20	Agenda item	Bo.1.20.40

SAFEGUARDING ADULTS UPDATE DECEMBER 2019

1 PURPOSE/ AIM

Further to the annual safeguarding adult's report 2018-19, which was reported to the Quality Committee in May 2019 (Q.5.19.14), this paper provides a mid-year update.

2 BACKGROUND/CONTEXT

All persons have the right to live their lives free from violence and abuse. This right is underpinned by the duty on public agencies under the Human Rights Act (1998), to intervene proportionately to protect their right as citizens (ADASS 2005, Safeguarding Adults). The Care Act 2014 came into effect in April 2015; this was widely seen as the most significant change in social care law for over 60 years. The Act not only addresses and recognises the importance of reducing risk, preventing harm and stopping abuse or neglect, but most significantly promotes involvement of the adult concerned in the process. Making safeguarding a collaborative process undertaken with someone rather than a process we do 'to' somebody.

Safeguarding is everyone's business; all staff have a responsibility to help prevent abuse and to act quickly and proportionately to protect people where abuse is suspected. Bradford Teaching Hospitals NHS Foundation Trust (BTHFT) has a responsibility to ensure that arrangements are in place to ensure that staff are able to meet their obligations with regard to Safeguarding Adults. The principles and values as laid out in the Care Act are Empowerment, Protection, Prevention, Partnerships, Proportionality and Accountability.

The Trust's policies and procedures are in line with the West and North Yorkshire and York Safeguarding Adults Policy and Procedures.

3 UPDATE

We have continued to see an increase in activity relating to all aspects of safeguarding. The recent changes in the district wide safeguarding procedures have meant that concerns of abuse which would previously have been referred to the Local Authority, BMDC, are no longer referred but managed within the safeguarding adult's team. These cases are where the person may not meet the Section 42 requirement of the Care Act or have stated that they do not wish for external involvement. In line with Making Safeguarding Personal (MSP) principles this view would be respected if no other person/persons were at risk.

Meeting Title	Board of Directors		
Date	09.01.20	Agenda item	Bo.1.20.40

3.1 Training

Safeguarding Adults training compliance is monitored through the safeguarding adults sub group for assurance and in turn is reported to the Integrated Safeguarding sub-committee. Current compliance is as follows;

Level 1 96%

Level 2 96%

Level 3 98%

Level 4 100%

Prevent 94.1%

Specific training events have been delivered around key agendas and in line with national awareness weeks. Events have included a mental health awareness event, mental health simulation training, Autism bus and forced marriage.

3.2 Audit

An internal audit was conducted in relation to the process relating to detaining a patient under the mental health act. This audit outcome was significant assurance.

Operational audits have been undertaken and reported to the safeguarding adults' subgroup.

3.3 Work with Partners

The Safeguarding Adults Team has continued to attend the district-wide Bradford Safeguarding Adults Board and its sub groups, the Domestic and Sexual Violence Board and the Multi Agency Risk Assessment Conference (MARAC). Other district-wide meetings are attended as necessary such as those on the West Yorkshire Human Trafficking and Anti-Slavery Network (WYHTASN) and Prevent, with established links for receiving information. Attendance at these meetings ensures information in relation to changes affecting operational practice is able to be identified and appropriately managed to ensure all staff understand the implications for their practice.

There has been increased external activity and requirement to attend multi agency meetings in preparation for the launch of the new Safeguarding procedures. Implementation of these procedures is expected in January 2020. The increased activity has been in relation to ensuring that all partners understand the requirements on them under the new procedures and ensure that the messages given to staff across the partnership are consistent. As part of this, the Trust is hosting a district wide briefing session.

The Named Nurse for Safeguarding Adults is the chair of the Safeguarding Adult Review (SAR) subgroup for the district. This was a new subgroup from the Safeguarding Adults Board established in January 2019 and has met with increased frequency to ensure all partners understand their statutory requirements and have a robust process for ensuring compliance.

Meeting Title	Board of Directors		
Date	09.01.20	Agenda item	Bo.1.20.40

Following the introduction of the Learning Disability Standard's in 2018, there has been an increased expectation and scrutiny on acute Trusts in ensuring their services are accessible and responsive to the needs of patients with a Learning Disability. The Named Nurse attends the regional Access to Acute (A2A) meetings. This is a meeting for all the acute service learning disability leads to ensure there is a consistent approach to care delivery.

The Safeguarding team has joined the local Mencap Treat me Well group and attend their meetings. This enables direct involvement with service users and specialist care providers in assisting with the development of training and identifying areas for improvement.

3.4 Mental Health

The monitoring of patients detained under the Mental Health Act is undertaken by the safeguarding team. This ensures that the Trust is compliant with the legislative requirements and that patients who are detained have access to appropriate advocacy support and liaison is undertaken with mental health services. The safeguarding team has two mental health nurses within the team who offer guidance and support to staff. Training in relation to mental health is also delivered to staff as requested or in response to concern. As part of the Trusts student nurse placement expansion plans, the Named Nurse discussed with the head of education the opportunity to offer placements to mental health and learning disability students. This has been agreed and will commence in 2020.

3.5 Enhanced Care

A pilot project was commenced in September 2019 in relation to enhanced care. The purpose of this project was to explore how the Trust provides 1-1 care to individuals who may have additional needs such as a learning disability, mental health diagnosis, dementia or cognitive impairment. The staff member employed to lead this project has reviewed current paperwork and delivered training to healthcare assistants, specifically focussing on engaging with patients and utilising distraction techniques to make interactions meaningful and improve their patient experience. The project is due to be reviewed in January 2020.

4 RISK ASSESSMENT

Changes to the Mental Capacity Act legislation in relation to the Deprivation of Liberty Safeguards (DoLS) were approved in July 2019 and work is underway in planning for the implementation of these changes. DoLS will be replaced by Liberty Protection Safeguards (LPS). Currently all DoLS authorisations are sent to the Local authority for further assessment and approval, in future, LPS authorisations will be fully assessed and managed by the hospital. This will have resource implications for the Trust, as Trust staff will be required to undertake these assessments, which are currently undertaken by Council staff. However, as the Code of Practice and final guidance has not yet been published it is unclear as to the exact requirements at the present time. The Safeguarding Adults Named Nurse attends all the district wide meetings in relation to this change and is working with partners to ensure that the Trust is sighted on the implications as they evolve.

Meeting Title	Board of Directors		
Date	09.01.20	Agenda item	Bo.1.20.40

The introduction of the national Learning Disability Standards placed increased scrutiny on provision of services for patients with a learning disability. Work commenced in the period 2018 /19 and continues through 2019/20. Due to the increased expectation and subsequent workload a business case was approved for a Learning Disability Lead Practitioner; a recruitment process was initially successful however the person appointed subsequently declined the offer. The post will be re-advertised in the New Year, in the meantime, the ongoing development work related to learning disabilities that would have been progressed by the Lead Practitioner, will be progressed as far as possible by the Safeguarding Adults team, this includes the National Learning Disability Standards benchmarking collection exercise.

In July 2019, the Trust experienced an unusually high number of patients detained under the Mental Health Act. This highlighted the concern regarding the national and local shortage of Mental Health beds and the resultant impact on delayed discharges from acute settings. As a result of this the Safeguarding Adults Named Nurse is working with the Urgent Care directorate in exploring ways of ensuring there is an appropriate skill mix of staff to identify and assist with the management of patients with a mental health diagnosis. Furthermore a business case for a specialist practitioner for mental health was approved in principle for implementation in 2020-21.

5	RECOMMENDATIONS
----------	------------------------

The Board of Directors are asked to note the content of the report and decide whether it provides positive assurance.

6	Appendices
----------	-------------------

Appendix 1: Self-assessment of commissioning standards.