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| Meeting Title | Board of Directors | | |
| Date | 09.01.20 | Agenda item | Bo.1.20.39 |

SAFEGUARDING CHILDREN UPDATE – NOVEMBER 2019

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| Presented by | Karen Dawber, Chief Nurse | | |
| Author | Vicky Cotter & Jemma Tesseyman, Named Nurses Safeguarding Children | | |
| Lead Director | Karen Dawber | | |
| Purpose of the paper | Safeguarding Children's Update 2019-2020 | | |
| Key control | Yes- in regard to strategic objective 1: To providing outstanding care for patients | | |
| Action required | For decision | | |
| 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 children update report provides information regarding activity within children's safeguarding in Bradford Teaching Hospitals NHS Foundation Trust.

1. There have been a number of staffing changes within the Safeguarding Children Team. Jemma Tesseyman and Vicky Cotter have been successfully appointed to the permanent Safeguarding Children Named Nurses (job share). There are two whole time equivalent band 7 vacancies for Safeguarding Specialist Nurses (AED), one has been appointed and will start in January 2020. As there was a limited field at appointment, the other post is being used as a training position on an interim basis, with the aim of 'growing our own'. This post holder will take up the interim position in early December 2019.
2. Children flagged on EPR for safeguarding concerns are frequently missed in AED. This has been on the Accident and Emergency departmental (AED) risk register for six months. The Safeguarding Children's Team screen all child AED attendances to identify missed safeguarding activity including missed flags. Support is also given to AED in addressing these misses through action, training and advice from the Safeguarding Children Specialist Practitioners who are based in the department.
3. All levels of safeguarding children training continue to be above the trust requirement (85%). This demonstrates an overall commitment from staff and managers to drive this improvement and ensure we have a workforce skilled in recognising and responding to signs of child abuse. Level 3 and 3 specialist training compliance is monitored on a weekly basis to ensure compliance remains above 90% as this group of staff work with children.
4. Following Bradford Children's Social Care (CSC) inadequate Ofsted rating in October 2018, the Safeguarding Children Team continue to be involved in the increased multiagency working to assist with the Local Authority's improvement journey. This has included the development of key guidance of the Continuum of Need, Multiagency Referral Form, the Child Exploitation Protocol and the Neglect Toolkit. Attendance at the Children Services Improvement Board and Children's Service Programme Board continues.

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5. Progress continues to be made from the CQC Children Looked After and Safeguarding (CLAS) review action plan from February 2019. Outstanding actions remain in three areas that include safeguarding children; Flagging children with a learning disability, embedding the Child Exploitation protocol (not officially launched until December 2019) and exploring the use of SystmOne for view in Children's Clinical Decisions Unit.

From 1 September 2019, the Bradford Safeguarding Board was replaced by The Working Together to Safeguard Children Bradford Partnership (SCBP). The Partnership is led by the tripartite arrangement of an executive collaboration of the key stakeholders of police, local authority and health. The Trust Safeguarding Team continues to work collaboratively with partners on the changes in practice being implemented by the Partnership and relevant sub groups.

Analysis

The statutory requirements for the Trust are governed by Section 11 of the Children Act, which places a duty on the Trust to ensure that the functions and any services contracted out to others are carried out with the purpose to safeguard and promote the welfare of children. The Trust complies with this requirement by way of submitting an ongoing Section 11 declaration.

The Trust submits a self-declaration to the Clinical Commissioning Groups (CCGs) on a bi-annual basis (see appendix 1). The self-declaration, report and Section 11 returns all provide good quality supporting evidence of the Trust's effective arrangements for safeguarding and promoting the welfare of children.

All levels of Safeguarding children training is above the Trust requirement of 85%. Level 1 and 2 being over 95% compliance and level 4 compliance being 100%. At Level 3 and 3S, the total number of staff for whom there is an annual requirement for mandatory update is 783. The overall compliance is increasing, with L3 and L3S at 91% at the end of October 2019. The Safeguarding Children's Team continuously scrutinise these figures to address the shortfall by signposting staff to training opportunities, and liaising with staff managers where necessary.

Governance and partnership arrangements remain strong, with consistent Trust representation on the SCBP Partnership Group, sub-groups, and other partnership work streams predominantly focused this year on the Children's Social Care improvement journey.

Key Team Achievements:

- The ongoing delivery of the annual work plan and audit strategy, which are based firmly within the Trust strategic objectives to ensure focused work.
- Contribution to the Bradford District Safeguarding Week in June 2019 by hosting two popular sessions on coercion and control, and female genital mutilation (FGM).
- Direct involvement in multiple work streams managed through the Bradford Safeguarding Children Board (now SCBP) sub groups to aid the improvement journey for Children's Social Care in better protecting children. This has included development of new guidance, protocols and procedures through to co-hosting the district wide launch events.
- The Lilac standard operating procedure (SOP) for Young people under 18 attending for termination of pregnancy, which was developed and agreed in partnership with West Yorkshire

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Police, has been shared within the Yorkshire and Humber Safeguarding network as exemplar practice. It was a finalist in the West Yorkshire Police Force awards for protecting vulnerable victims, in recognition of the impact of the SOP on protecting vulnerable females within BTHFT and the wider community.

- Staff changes in the team have allowed for the opportunity to develop band 6 AED nurses

Recommendation

1. The main safeguarding children risk remains with AED clinical staff missing flags and alerts of child attendances. The Safeguarding Children Specialist Nurse Practitioners screen all child attendances and take appropriate action where missed flags and alerts have not been appropriately actioned. This is audited, and actions taken to address any gaps with individual staff. Adopting an approach of continuous improvement, the safeguarding children team are actively providing feedback to staff via training and one-to-one support in the recognition of the flag and alert system in the clinical area. This has also been risk assessed and is on the AED departmental risk register.
2. The Safeguarding Children Specialist Nurse Practitioner role in AED has been a difficult job to retain staff in. With the departure of the two most recent specialist nurses, it has been decided to utilise AED staff in trainee band 6 roles. The aim is that not only will staff have the opportunity to up skill in safeguarding, but will also take that knowledge back in to their clinical practice, which in turn will have a positive impact on the departmental safeguarding knowledge.
3. The Safeguarding Children and Young People: Roles and Competences for Healthcare Staff Intercollegiate Document (2019) details increased expectation for training at all levels. This will impact on the required time for safeguarding children mandatory training for each member of staff. The safeguarding children team have amended the training strategy to reflect the above document and to ensure that all clinical staff working in adult areas of the Trust receive safeguarding children training annually due to the increasing number of children who are cared for throughout the organisation. The amended strategy is awaiting final sign off and then the increased training can begin. There is ample capacity in the current training sessions to accommodate this increase.

| 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. | Low | | Moderate | High | Significant | |

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| 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. | Risk (*) |
| Explanation of variance from Board of Directors Agreed General risk appetite (G) | |

| 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"/> |

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| 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: Safety |
| NHS Improvement Effective Use of Resources: Clinical Services |
| Other (please state): |

| 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"/> |

| 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| 1 | PURPOSE/ AIM |
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Further to the Annual Safeguarding Children's report 2018-19, which was reported to the Quality Committee in June 2019 (Q.6.19.11), this paper provides a mid-year update on the continuous improvement of the safeguarding approach for children attending the Trust and the activities of the Safeguarding Children's Team.

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| 2 | BACKGROUND/CONTEXT |
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The safeguarding children activity in the Trust is regulated in a number of ways.

- Children Act 1989, 2004.
- Working Together to Safeguarding Children.
- Accountable to Bradford Safeguarding Children Board (BSCB) and the Clinical Commissioning Groups for safeguarding contracts and activity.
- Joint Target Area Inspection (JTAI) - The joint inspection process for safeguarding children services carried out by:
 - Ofsted - for children's social care.
 - Care Quality Commission (CQC) for Health.
 - HMI constabulary for Police.
 - HMI probation for Probation Services.

The Trust has seen a continuing increase in safeguarding children's activity throughout the past year within all areas. The on-going challenges for the team are to ensure that children up to 18 years of age are recognised and treated as children when managed in adult areas. Also the consideration of the "hidden" child behind adult patients (who are parents and carers) who attend the organisation with safeguarding concerns such as drug and alcohol, mental health and domestic abuse concerns.

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| 3 | UPDATE |
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3.1 To provide outstanding care

3.1.1 Work plan and Audit strategy

The Safeguarding Children Team have a robust work plan and audit strategy that is regularly reviewed and updated in line with highlighted and emerging risks and themes, thus providing assurance to the Trust Board and enhancing children's care and safety. The work plan includes appropriate areas for development, and is informed by local and national learning

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from serious case reviews and inspections. The audit strategy provides further evidence of focus on learning and improvement, and the results of these are routinely shared with the Bradford Cross Health Safeguarding Group. These are both monitored through the Safeguarding Children Steering Group, which in turn reports to the Integrated Safeguarding sub-committee.

3.2 To deliver our financial plan and key performance targets

Key performance targets of the Safeguarding Team and Safeguarding Trust activity is managed by the Safeguarding Children Steering group. There are no highlighted areas of concern. The team KPIs are:-

- Trust safeguarding training levels.
- Team quarterly supervision.
- Attendance at BSCB meetings.
- Asking the domestic abuse question in maternity.
- Mental Health enquiry in maternity.

3.3 To be in the top 20% of NHS employers

In the last quarter, the safeguarding champions programme has been developed and delivered by one of the Safeguarding Children Specialist Nurse Practitioners. The Trust now has 34 champions working in both children's and adult clinical areas that are up-skilled in key safeguarding practice and supported in their role by the Safeguarding Children Team. This program will continue, to provide assurance that key clinical areas have staff who have developed additional knowledge and skills.

Safeguarding supervision is nationally recognised as essential for good practice and enabling staff to feel supported and valued. The Trust's specific supervision policy and procedures are within date and are reviewed and updated as required to reflect any key changes. The policy was last update in July 2018.

There are a number of formally trained safeguarding supervisors (medical, nursing and allied health professional) who are available to support staff throughout the organisation, both on a regular basis and during ad-hoc sessions. For Consultant Paediatricians, a regular "Peer Review" programme is offered for case review, as recommended by the Royal College of Paediatrics and Child Health. The Safeguarding Team provide monthly AED supervision, which is open for all staff to attend and also triannual supervision sessions for supervisors.

Members of the Trust Safeguarding Children Team co-coordinate and co-deliver annual district wide safeguarding supervision training for health staff. Any member of Trust staff that has an interest in supervision is encouraged to attend this training with an expectation that they will provide staff supervision with support.

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3.4 To be a continually learning organisation

Safeguarding children training compliance is a key performance indicator and monitored through the Safeguarding Children's Steering Group for assurance and reported to the Integrated Safeguarding sub-committee.

The training compliance figures at the end of October 2019 were:

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| Level 1 | 96% |
| Level 2 | 93% |
| Level 3 | 91% |
| Level 3 specialist | 91% |
| Level 4 | 100% |

Training at all levels (except level 4) is available in house via eLearning or face to face with bespoke training available for any staff group.

With children being offered a choice of admission (both acute and elective) to an adult or a children's ward at the age of 14 years, additional training has been delivered to adult clinical areas with the highest occupancy of children. This is to ensure that staff are educated in key safeguarding actions, such as recognising the adolescent as a child and ensuring safe discharge to a person with parental responsibility.

3.5 To collaborate effectively with local and regional partners

Working Together (WT) to Safeguarding Children (2018) set out the new arrangements for all district safeguarding children activity. The district is no longer required to have a safeguarding board as this is not a statutory requirement under this new document. From 1 September 2019, new arrangements have been put in place that reflect the recommendations and are centred around the partnership working of the three key stakeholders of police, local authority and health. This executive is known as The Working Together to Safeguarding Children Bradford Partnership (SCBP). The Trust is represented at the broader stakeholder Bradford Partnership Group by the Deputy Chief Nurse. The Trust remains committed to shared safeguarding work with the SCBP through representation on all subgroups.

Following the Ofsted inspection of Bradford Children's Social Care (CSC), in which they received a rating of inadequate, the safeguarding children team have undertaken a risk assessment to identify any potential adverse impact on the Trust. This assessment identified the only area of potential risk related to the issue of consent, and action had already been taken to mitigate this risk. There has been an increased demand on the Trust safeguarding resource; however it is important that the Trust is committed to supporting the partnership

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response to implementing the LA improvement plan to develop services that will safeguard Bradford children more effectively.

From 1 September 2019 serious case reviews (SCR) will be known as Child Safeguarding Practice Reviews. There are three SCR's that the Trust were already involved in prior to this change. The most recent is a thematic review of child sexual exploitation that commenced earlier this year, with an anticipated duration of eighteen months. The Trust is represented on the SCR panel, with a number of cases being reviewed for the SCR having Trust involvement. Two SCR's the Trust have had recent involvement in, have now both completed and the learning has been embedded. One local SCR was completed in December 2018, with a decision not to publish due to the identifiable nature of the case. One out of area SCR is awaiting publication with no date set as yet due to criminal proceedings.

5 RISK ASSESSMENT

Missed safeguarding flags and alerts AED

Through the auditing of missed flags and alerts, the Safeguarding Children Team has highlighted that a significant number of children who are flagged as per Trust policy were not identified by AED staff during their attendance. This has been placed on the department's risk register, and the Safeguarding Children Team have worked with AED staff, including the Directorate Manager, on how the team can support the AED staff to take appropriate action for vulnerable children in a more timely manner. This includes auditing the missed flags daily, identifying staff responsible, and the PLN's actively working with these individuals to provide training and support, reinforcing a culture of continual learning.

6 RECOMMENDATIONS

The Committee are asked to note this report.

7 Appendices

Appendix A

CCG Self Declaration: Safeguarding Children