UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST BOARD OF DIRECTORS

25 October 2018

Title	SAFEGUARDING CHILDREN AND VULNERABLE ADULTS ANNUAL REPORT 2017/18 FOR QUEEN ELIZABETH HOSPITAL				
Responsible Director:	Executive Chief Nurse				
Contact:	Ruth O'Leary, Lead Nurse Safeguarding Adults and Children				

Purpose:	To present the annual report on safeguarding children and vulnerable adults to the Board of Directors
Confidentiality Level & Reason:	Confidential – clinical
Medium Term Plan Ref:	Strategic Aim 1: Always put the needs and care of patients first
Key Issues Summary:	The annual report for 2017/18 on safeguarding children and vulnerable adults
Recommendations:	The Board of Directors is requested to receive the annual report

Signed:	Lisa Stalley Green	Date:	16 October 2018

UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST BOARD OF DIRECTORS

SAFEGUARDING CHILDREN AND VULNERALBLE ADULTS ANNUAL REPORT 2017/18

PRESENTED BY THE EXECUTIVE CHIEF NURSE

1. Introduction

- 1.1 University Hospitals Birmingham NHS Foundation Trust (UHB) has continued to ensure that the safeguarding of adults and children at risk remains a high priority within the Trust. The aim of safeguarding within the Trust is to ensure that there is a robust policy, with supporting procedural documents, which allows a consistent approach to the delivery of the Safeguarding Principles across the Trust. The policy provides a framework that can be followed, encourages the challenge of practise where appropriate, and is reinforced by training and support. It enables all clinical staff to recognise and report incidents where adults and children are at risk. It ensures that patients receive a positive experience, with support when necessary, in relation to safeguarding issues highlighted.
- 1.2 The safeguarding team for the Trust and Umbrella Sexual Health Services is structured to work as a united team across all services. This allows robust provision throughout the year, by sharing expertise and support for a varied and diverse workload. It comprises a Lead Nurse for Safeguarding Adults and Children / Named Nurse for Child Protection and 4.5 Whole Time Equivalent (WTE) Clinical Nurse Specialists for safeguarding adults and children.

2. Adult - Safeguarding Activity from April 2017 - March 2018

- 2.1 The adult referrals received by the safeguarding team are shown in two tables, those within the Trust in Table 1, and those through Umbrella Sexual Health Clinics in Table 4 (paragraph 2.6).
- 2.2 In relation to the referrals received within the Trust between April 2017 and March 2018 (Table 1), these are divided into Safeguarding Concerns and Advice Calls; figure 1 depicts the information graphically. The figures show an increase in activity in both Concerns and Calls compared with last year, with an overall increase of 18%. The continuing education and training of staff is likely to have contributed to the increased activity.

Activity Type	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total 2017/18	Total 2016/17
Total Referrals	273	255	291	268	1,087	919
Safeguarding Concerns	154	162	195	161	672	602
Advice Calls	119	93	95	107	414	326

Table 1: Adult safeguarding activity - services within the Trust



Figure 1: Adult safeguarding activity - services within the Trust

2.3 The types of referral received within the Trust during the year are shown in Table 2 below and, in most categories, have remained consistent with last year's reporting pattern. Last year, the Trust saw its first referrals for Human Trafficking and these referrals have continued throughout this year.

Type of Abuse	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Potential Domestic Violence/Abuse	48	39	36	39	162
Potential Financial Abuse	10	19	18	14	61
Potential Omission of Care	53	63	61	54	231
Potential Physical Abuse	18	11	22	16	67
Potential Sexual Abuse	5	2	12	10	29
Emotional Abuse	6	2	3	6	17
Self-Neglect	23	31	30	18	102
Female Genital Mutilation	1	1	0	2	4
Modern Slavery	0	0	0	1	1
Honour Based Violence	1	1	1	0	3
No Abuse	106	85	106	107	404
Forced Marriage	0	0	1	0	1
Human Trafficking	2	1	1	1	5
Total	273	255	291	268	1,087

Table 2: Types of referrals within the Trust

- 2.3 Table 3, together with the bar chart in figure 2, shows the number of patients who, during the year, were subject of a Deprivation of Liberty Safeguards (DoLS) application. The number of DoLS applications 'Not Authorised / withdrawn' continues to remain consistently high. This is due to the patients either gaining mental capacity or being discharged to another setting before they have been completely assessed for the DoLS by Birmingham City Council. The number of applications made continues to increase due to staff awareness and training.
 - 2.5 In 2017/18, there were 316 applications made for DoLS. This is an increase of over 29% on last year's applications, which totalled 244.

Deprivation of Liberty Safeguards	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Applications Made	84	70	67	95
Authorised	17	8	13	22
Not Authorised	1	5	1	4
Withdrawn	66	55	55	71

Table 3: Deprivation of Liberty Safeguards (DoLS)

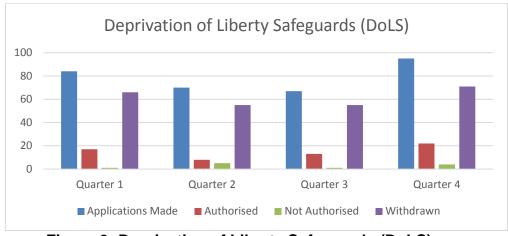


Figure 2: Deprivation of Liberty Safeguards (DoLS)

2.6 In relation to referrals received by the safeguarding team through Umbrella Sexual Health Clinics, these are shown in Table 4 and by type in Table 5.

Activity Type	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total 2017/ 18
Total Referrals	7	9	8	12	36

Table 4: Referrals to the Adults Community Access Point (ACAP) through Umbrella Sexual Health Clinics

Type of Abuse	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Potential Domestic Violence/Abuse	3	3	2	3	11
Potential Financial Abuse	0	0	0	0	0
Sexual Exploitation	1	5	2	2	10
Potential Physical Abuse	0	0	0	0	0
Potential Sexual Abuse	1	0	2	3	6
Female Genital Mutilation	0	0	0	0	0
Modern Slavery	0	1	0	0	1
Honour Based Violence	0	0	0	0	0
Psychological	1	0	2	4	7
Forced Marriage	1	0	0	0	1
Human Trafficking	0	0	0	0	0
Total	7	9	8	12	36

Table 5: Types of adult referral to ACAP received through Sexual Health Clinics

- 2.7 All safeguarding activity is reported to the Trust's Safeguarding Group which meets bi-monthly and at which, patient cases are discussed to identify areas of learning and good practice / development.
- 3 Children Safeguarding Activity from April 2017 March 2018
- 3.1 The Lead Nurse for Safeguarding has overall responsibility for Adults and Children and is the Named Nurse for Child Protection. There is a Children's Clinical Nurse Specialist who supports the Lead Nurse.
- 3.2 Although the Trust predominately cares for adult patients, there are a number of children who self-present, or who are brought to the Emergency Department, or who are seen in outpatient clinics or Umbrella Sexual Health Clinics. These patients are triaged, treated and then discharged from the Emergency Department, or transferred to Birmingham Children's Hospital. Tables 6-8 show the numbers of children that presented at the Trust's Emergency Department, Out-patient Services and at Umbrella Sexual Health Clinics over the past two years.

Age Group	April 2016 - March 2017	April 2017 – March 2018
Under 16 years of age	3,658	3,548
16 - 17 years of age	2,668	2,580

Table 6: Numbers of children attending the Emergency Department

Age Group	April 2016 - March 2017	April 2017 – March 2018
Under 16 years of age	1,034	1,164
16 - 17 years of age	7,382	7,499

Table 7: Number of children attending Out-Patient Services

Age Group	April 2016 - March 2017	April 2017 - March 2018
Under 16 years of age	525	602
16 - 17 years of age	2,939	2,864

Table 8: Number of children attending Sexual Health Clinics

- 3.3 Table 9 / Figure 3 shows the safeguarding referrals and paediatric letters sent as part of the children's safeguarding activity within the Trust. Despite the changes in the commissioning of Paediatric Liaison in Birmingham, the safeguarding team have remained committed to reviewing all of the attendances of children at the Trust. Relevant information is shared regarding these children with our primary care colleagues in the best interest of the child and fulfilling the requirements of the Birmingham 'Early Help' agenda.
- 3.4 Children attending Queen Elizabeth's Emergency Department are subject to a risk assessment in relation to safeguarding. The number of children subsequently referred to the Trust's safeguarding team and the Children's Advice and Support Service (CASS) are shown below, broken down by 'type of abuse' (Table 10). This data is recorded in a database held by the safeguarding team which allows information and trends to be analysed. Some referrals to the safeguarding team do not result in a referral to CASS e.g. those that require an Early Help response. These are recorded as advice calls for the potential type of abuse. This accounts for the discrepancy between 659 (Table 9) safeguarding referrals and 681 recorded contacts (Table 10).
- 3.4 The safeguarding team has developed strong links with Birmingham Community Healthcare (BCHC) Children in Care team and has regular contact to discuss cases and share information regarding children's attendance at the Queen Elizabeth Hospital. It is widely acknowledged that these are extremely vulnerable children and by working together with this team, a gap is being closed, ensuring that these children are supported with any new or ongoing concern. The feedback from the Designated Nurse for Children in Care has been very positive in relation to this initiative; The Queen Elizabeth Hospital safeguarding team is the only team currently working in this way and due to its success, links are being made with the Designated Nurse for Solihull Looked After Children.

Activity Type	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Safeguarding Referrals	149	192	172	142	655
Paediatric liaison letters	231	291	417	376	1315
Advice Calls	8	2	7	9	18
Total	388	484	596	524	1992

Table 9: Children Safeguarding activity

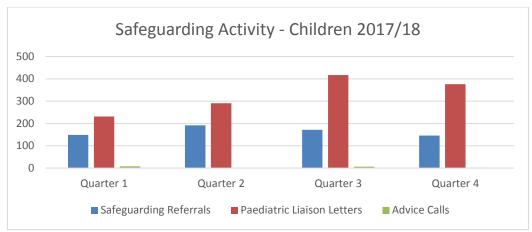


Figure 3: Children Safeguarding activity

3.5 The types of children's referrals and advice calls are shown in Table 10. The majority of referrals are in relation to parental capacity.

Types of Abuse	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Domestic Abuse	31	24	28	10
Parental Capacity	74	103	77	71
Neglect	10	12	9	17
Physical	17	25	30	28
Emotional/Substance Misuse	15	21	21	17
Sexual	4	1	5	2
Child Sexual Exploitation	4	7	7	3
Female Genital Mutilation	0	0	0	1
No abuse	0	0	0	0
Human Trafficking	0	0	0	0
Honour Based Violence	2	0	1	1
SUDIC	0	1	1	1
Total	157	194	179	151

Table 10: Types of children's referrals

3.6 In relation to referrals to Children's Services received by the safeguarding team through Umbrella Sexual Health Clinics, these are shown in Table 11 and by type in Table 12.

Activity Type	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Safeguarding Referrals	28	46	49	55	178

Table 11: Umbrella Sexual Health - Safeguarding Children's Referrals

Types of Abuse	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Domestic Abuse	1	2	1	4
Parental Capacity	2	4	3	0
Physical	0	3	0	2
Emotional/Substance Misuse	0	1	3	7
Sexual	6	7	13	13
Child Sexual Exploitation	19	28	24	25
Female Genital Mutilation	0	0	2	1
No abuse	0	0	0	1
Human Trafficking	0	0	0	2
Honour Based Violence	0	0	2	0
Modern Slavery	0	0	1	0
Total	28	46	49	55

Table 12: Umbrella Sexual Health - Types of abuse

3.7 As with adult safeguarding activity, children's activity is reported bi-monthly to the Trust's Safeguarding Group and again, patient cases are discussed to identify areas of learning and good practice / development.

4 Safeguarding Adult Reviews, Serious Case Reviews and Domestic Homicide Reviews

4.1 The Trust has undertaken a number of scoping exercises for each of the above Review requirements as shown in Table 13 below.

Scoping Exercises	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Serious Case Review	1	1	4	1 Chronology 2
Safeguarding Adult Review	1	2	0	2
Domestic Homicide Review	2	3	1	0

Table 13: Number of scoping exercises for each review type

5 Child Sexual Exploitation (CSE)

- 5.1 The Lead Nurse for Safeguarding is a member of the CSE Health Link Group. This ensures partnership working and new national and local guidelines are implemented within the Trust.
- 5.2 All Trust staff receive CSE education within Level 2 Mandatory Safeguarding Adults and Children Training.

- 5.3 A bespoke Level 3 CSE training package, for those staff identified on the Training Needs Analysis, is delivered within the Trust.
- Table 14 shows the number of child sexual exploitation cases reported in the Trust. All of these cases have been referred through Children's Advice Support Services (CASS) and the Regional CSE Nurses.
- 5.5 All the CSE referrals, whether within the Trust or in Umbrella Sexual Health Clinics had the Birmingham CSE screening tool completed.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Child Sexual	4	7	7	3	21
Exploitation	4	<i>'</i>	<i>'</i>	3	21

Table 14: Number of CSE cases reported within the Trust

5.6 Table 15 shows the number of child sexual exploitation cases reported through Sexual Health Clinics. All of these cases have been referred through Children's Advice Support Services (CASS) and the Regional CSE Nurses.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Sexual Health Clinics	18	27	36	25

Table 15: Number of CSE cases reported through Sexual Health Clinics

- 5.7 UHB is in a unique position in providing the majority of sexual health services in the city and therefore, the safeguarding team is able to link and map cases, patients and perpetrators, in a way that no other organisation is able to do. The team has close partnership working with the Birmingham Community Healthcare (BCHC) CSE Named Nurses and has had mapping meetings with the CSE co-ordinator from the Local Authority so that in partnership, we are assured that we have done all we can to protect vulnerable CSE victims in the city.
- 5.8 The safeguarding team ensures attendance at the CSE Operational Group monthly. This has been very positive in terms of intelligence exchange, our partners in West Midlands Police and Birmingham City Council have found this attendance very beneficial to their disruption work with CSE.

6 Domestic Abuse - Adults and Children

- 6.1 Table 16 shows the number of domestic abuse cases reported in the Trust in relation to adults and children.
- 6.2 The Trust has a robust pathway for adults and children who are subjected to domestic abuse, which is on the intranet for all staff to refer to.
- 6.3 All Trust staff receive domestic abuse education within Level 2 Mandatory Safeguarding Adults and Children Training.
- 6.4 A bespoke Level 3 domestic abuse training package for those staff identified on the training needs analysis is delivered within the Trust.

Types of Abuse	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Domestic Abuse (Children)	31	24	28	10
Potential Domestic Violence/Abuse (Adults)	48	39	36	39

Table 16 shows the number of domestic abuse cases

7 Violence Reduction Nurse Programme (VRN)

7.1 The Trust's safeguarding team has led in the West Midlands on the Violence Reduction Programme, ensuring that data on crime is collected from the Emergency Departments around the region. This is shared with Public Health

England and the West Midlands Violence Prevention Alliance. The safeguarding team has trained the Trust's Emergency Department on what the

VRN programme is and a leaflet has been produced which contains support agency numbers for victims and their families.

8 Training for Adult and Children Safeguarding - including PREVENT Awareness and Health WRAP 3

- 8.1 During 2017/18, a robust training needs analysis was undertaken in relation to safeguarding, which enabled the identification of the staff groups where improvement was necessary. This allowed training to be targeted, increasing the percentage number of staff trained. The tables below show the numbers of staff trained at each level.
- 8.2 All staff on induction to the Trust receive Level 1 Awareness Training in Safeguarding (Table 17) and PREVENT (Table 18) via the provision of a leaflet, also available on the Trust's intranet. Percentage attendance is shown below.

Training	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Level 1	100%	100%	100%	100%

Table 17: Percentage number of staff receiving Level 1 Awareness Training

- 8.3 All existing staff within the Trust were also given a Level 1 Adult Safeguarding / PREVENT leaflet during April 2017 as good practice to update staff.
- 8.4 In terms of targeted Health WRAP 3 training, from the training needs analysis, the Lead Nurse was able to identify those staff, by clinical area, who required the one hour PREVENT Health WRAP 3 session. Table 18 shows the trained percentages and the number of PREVENT referrals made in the Trust.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Health WRAP 3	81%	85%	89%	90%
PREVENT Referrals	0	0	0	1

Table 18: Percentage staff trained (Health WRAP 3) and the number of PREVENT referrals made in the Trust.

9 Adult and Children Safeguarding Training Level 2

9.1 Table 19 shows the percentage number of staff trained to Level 2 at each clinical band during 2017/18; this is shown graphically in figure 4. This training includes Deprivation of Liberty Safeguards (DoLS) training and training in relation to the Mental Capacity Act. The training also includes Making Safeguarding Personal (MSP).

Band of Staff	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Band 7+	81%	81%	81%	87%
Band 6	83%	87%	86%	88%
Band 5	84%	87%	87%	91%
Bands 1-4	75%	78%	78%	72%
Medical staff	54%	55%	56%	60%
3 yearly compliance	94%	94%	94%	94%

Table 19: Percentage number Level 2 trained by band

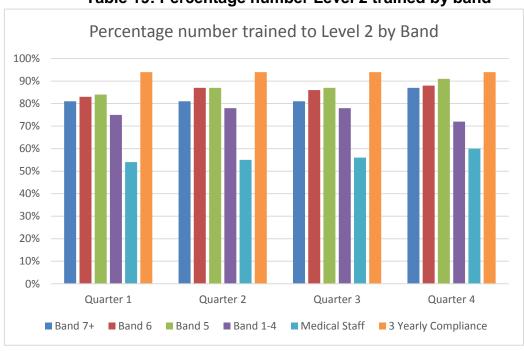


Figure 4: Level 2 Trained staff in each Clinical Band

10 Training for Adult Safeguarding - Level 3

10.1 Level 3 safeguarding training is delivered to the safeguarding clinical champions. This training is multi-agency, includes Making Safeguarding Personal (MSP). Mental Capacity Act and DoLS workbooks are completed as part of the training.

11 Training for Children Safeguarding - Level 3

11.1 Following the training needs analysis, groups of staff were targeted having been identified by the Lead Nurse as requiring training. This was based on those clinical areas in which children or parents are most likely to be seen. These areas are shown in Table 20 and Figure 5.

Target Groups	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Emergency Department	78%	91%	95%	90%
Young Person's Unit	100%	0%	60%	60%
Clinical champions	100%	100%	100%	100%

Table 20: Level 3 Training for Children by area

11.2 The percentage staff trained to Level 3 for the Emergency Department, shown last year at 78%, can be seen above to have markedly improved during this year to 90%. The number of staff in the Young Person's Unit is small, therefore changes in staff has a disproportionate effect when percentage numbers of staff trained are reported. This is evident in the drop shown in quarter 2, however, this will improve as the new staff are trained.

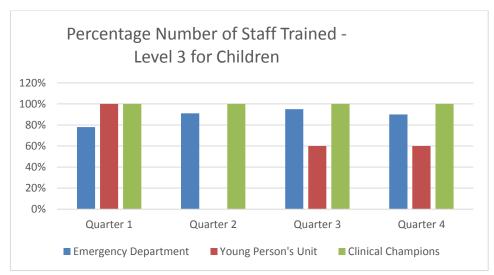


Figure 5: Level 3 Training for Children

Level 3 training for Sexual Health staff has been delivered in sessions on a weekly basis which will continue throughout 2018/19. The cumulative results for 2017/18 are shown in Table 21 below.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Child Sexual Exploitation	39%	65%	80%	84%
Female Genital Mutilation	44%	64%	67%	70%
Domestic Abuse	38%	60%	68%	72%

Table 21: Percentage number of staff trained – cumulatively.

- 11.3 It was recognised during 2016/17 that, in addition to the above clinical areas, the out-patients services were also seeing children. As a result, during 2017/18, 83% of outpatient staff have received 'Early Help' and 'Right Service, Right Time' training as set out by the Birmingham Safeguarding Children Board.
- 11.4 The safeguarding team has delivered training in other areas in 2017/18 including requests to deliver bespoke training to Umbrella partner agencies and

primary health care and to specific clinics such as sports medicine, HIV and the familial hyperlipidaemia service. Training is provided regularly on the Band 6 development programme on mental capacity and DoLS and to the dignity champions. The team also provides annual training to medical students from the University of Birmingham before they start their clinical placements.

12 Safer Recruitment

- 12.1 The Trust's Recruitment and Selection Policy and Associated Procedures ensure that all staff are vetted prior to entry into the workforce. The Trust follows the NHS Employment Checking Standards set out by NHS Employers and has audit processes in place to ensure adherence to the standards. External audit has demonstrated that the Trust's procedures are fit for purpose and that the risk posed in relation to staff entering the workforce is within tolerance.
- 12.2 Clear messages about the Trust's commitment to safeguarding are highlighted at all key stages of the recruitment journey.
- 12.3 Recruitment and selection training is provided, and it is required that at least one panel member has undergone this training which introduces safer recruitment practices. Strengths based interviewing is used to probe motives, attitudes and behaviours, not just skills and experience.
- 12.4 All staff entering the Trust are subject to 6 employment checks and these include a verification of identity and where applicable for the role a Disclosure and Barring Service (DBS) check
- 12.5 A risk assessment process is in place for those individuals who have a criminal record and the risk is assessed by 2 senior managers prior to appointments being confirmed.

13 Governance – Adults and Children

- 13.1 The Trust's Safeguarding Group is chaired by the Lead Nurse for Safeguarding Adults and Children and meets bi-monthly. The Group includes representatives from the Clinical Commissioning Group (CCG), the safeguarding team and the Divisions within the Trust. Safeguarding cases are discussed to show good practice and areas within safeguarding, that need to be improved.
- 13.2 A safeguarding report is presented six-monthly to the Care Quality Group which is chaired by the Executive Chief Nurse.
- 13.3 An annual safeguarding report is submitted to the Board of Directors.
- 13.4 A safeguarding report is submitted quarterly to the Clinical Commissioning Group (CCG).
- 13.5 Monthly supervision meetings take place between the Lead Nurse for Safeguarding at UHB and the CCG Lead Nurse.

- 13.6 The Lead Nurse for Safeguarding receives details of Datix incidents on a daily basis.
- 13.7 The Lead Nurse for Safeguarding receives any complaint or Patient Advice and Liaison Service (PALS) concern relating to safeguarding.
- 13.8 Adults Safeguarding Policy is in date. The procedure was updated in July 2017.
- 13.9 Children's Safeguarding Policy is in process of being updated. The procedure is in date, due for update in May2018.
- 13.10 Monthly dashboard training figures are submitted via the Risk and Compliance Unit to the CCG.
- 13.11 Section 11 has been updated to reflect this year's progress.

14 Achievements for Adults and Children Safeguarding 2017/18

- 14.1 Collate patient feedback on the safeguarding process for adults and young people.
- 14.2 Ensure all clinical staff are familiar with 'Making Safeguarding Personal' (MSP) and its practical application by inclusion in Level 2 training.
- 14.3 Develop a robust reporting system for Female Genital Mutilation (FGM) in compliance with national guidance.
- 14.4 Continue the work to raise awareness of Mental Capacity Act and Deprivation of Liberty Safeguards (DoLS) by inclusion on Level 2 training and providing families with information booklet.
- 14.5 Continue to work with other agencies to ensure the sharing and use of best practice and the provision of an individualised approach.
- 14.6 Introduce Child Protection Information System (CPIS) into the Emergency Department (ED).
- 14.7 Develop and implement a flowchart for Section 42 enquiries in line with Birmingham Safeguarding Adults Board.
- 14.8 Review current safeguarding training packages at Levels 1, 2 and 3 in line with national guidance and include:
 - Update Level 1 safeguarding leaflet
 - Develop new mandatory Level 2 training presentation
 - Develop Level 3 presentations regarding 'Self Neglect', making referrals and early help, 'Modern Slavery' and 'Substance Abuse'.
 - Develop practitioner knowledge as appropriate, on Child Sexual Exploitation (CSE) and violence reduction programme.

- 14.9 Review, evaluate and report on safeguarding supervision processes and procedures.
- 14.10 Continue to appraise service delivery through a robust programme of audit and evaluation.

15 Plans for April 2018 – March 2019

15.1 The primary focus for the safeguarding team during 2018 – 2019 will be to ensure the delivery of a robust safeguarding service across the new Trust. This will be evidenced in the harmonisation of safeguarding policies, practices and procedures operating effectively and efficiently in all of the Trust's hospitals and in those settings where services are delivered.

16 Recommendation

The Board of Directors is asked to receive the 2017/18 annual report on safeguarding children and vulnerable adults.

Lisa Stalley Green Executive Chief Nurse October 2018