

AGENDA ITEM NO: 8

UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST

BOARD OF DIRECTORS

THURSDAY 22 OCTOBER 2015

Title	SAFEGUARDING CHILDREN AND VULNERABLE ADULTS ANNUAL REPORT FOR 2014/15
Responsible Director:	Philip Norman Executive Chief Nurse
Contact:	Ruth O'Leary, Lead Nurse for Safeguarding

Purpose:	To present the annual report on Safeguarding children and vulnerable adults to the Board of Directors
Medium Term Plan Ref:	Strategic Aim 1: Always put the needs and care of patients first
Key Issues Summary:	The annual report for 2014/15 on Safeguarding children and vulnerable adults
Recommendations:	The Board of Directors is requested to receive the annual report
Signed: Philip Norman	Date: 12 October 2015

UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST

BOARD OF DIRECTORS

THURSDAY 22 OCTOBER 2015

SAFEGUARDING CHILDREN AND VULNERABLE ADULTS ANNUAL REPORT FOR 2014/15

PRESENTED BY THE EXECUTIVE CHIEF NURSE

1. Introduction

1.1 University Hospitals Birmingham NHS Foundation Trust (UHB) has continued to ensure the Safeguarding of adults 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 allow a consistent approach to the delivery of 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 are at risk and ensures that patients receive a positive experience where support is necessary in relation to Safeguarding issues highlighted.

The applicable Safeguarding Principles for each section are shown in **BLUE** text.

2. Safeguarding Activity for Adults From April 2014 - March 2015 (**EMPOWERMENT & PROTECTION**)

2.1 From January 2015 the permanent structure of the Safeguarding Team has been established with a Lead Nurse for Safeguarding Adults /Named Nurse for Child Protection, a Senior Sister for Safeguarding Adults and a Sister for Safeguarding Adults. A Children's Safeguarding Practitioner has also been appointed in partnership with the Birmingham Children's NHS Foundation Trust. The new team is working as a cohesive team across the Trust and has further increased the pro-activity of Safeguarding particularly at ward level through visibility and are providing training and support to staff.

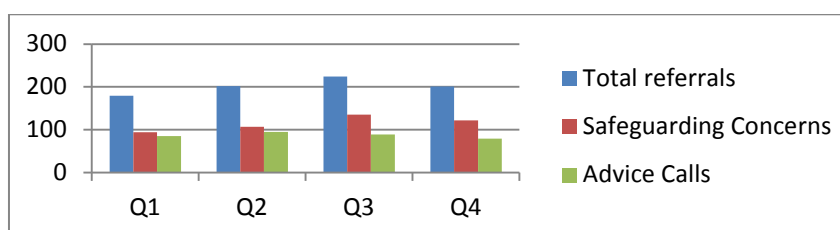
2.2 Table 1 below shows the total number of Adult referrals received between April 2014 and March 2015 and is divided into Safeguarding Concerns and Advice Calls; Figure 1 depicts the same information graphically. The figures indicate a general increase in referrals from

those reported last year which may be attributable to the education and training of staff.

Table 1 shows the Adult Safeguarding activity

2014/15	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Total Referrals	179	202	224	201	806
Safeguarding Concerns	94	107	135	122	458
Advice Calls	85	95	89	79	348

Figure 1 shows the Safeguarding activity as a bar chart



2.3 Table 2 shows the sources of Safeguarding referrals. From the table it is clear that referrals from ward / clinical staff have increased significantly during the year and again, the increase in the Safeguarding team and the increase in training and support are likely to have been a contributory factor.

Table 2 shows the sources of referral

Source	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Ward/Clinical Staff	132	140	185	169
Social Services	9	11	8	6
Therapists	4	9	6	8
Clinical Nurse Specialist	3	7	4	5
Matron	0	3	2	3
Medical Staff	13	25	16	9
Incident Report	2	1	0	0
Health Facilitation Team	4	0	0	0
West Midlands Ambulance	4	1	1	0
Clinical Commissioning Group	0	0	0	0
Complaint	8	2	0	0
Other	0	3	2	1
Total	179	202	224	201

2.4 The types of referral received during last year are shown in table 3 below. The only significant trend indicated is the increase in the number of 'Domestic Abuse' referrals. This may be as a result of the issue being highlighted nationally and within our Safeguarding training within the Trust.

Table 3 shows the types of referrals

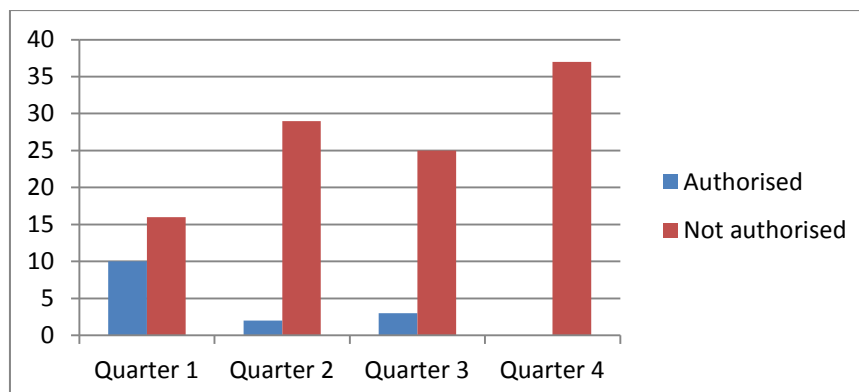
Type	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Domestic Violence	12	20	30	31	93
Financial Abuse	16	20	16	15	67
Omission of Care	43	54	58	57	212
Physical Abuse	12	15	16	17	60
Sexual Abuse	5	4	7	4	20
Emotional Abuse	4	1	7	1	13
Self-Neglect	15	11	21	18	65
No Abuse	72	77	68	58	275
Female Genital Mutilation	0	0	1	0	1
Total	179	202	224	201	806

2.5 Table 4 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 and Independent Mental Capacity Assessment. The number of DoLS applications 'Not authorised / withdrawn' has significantly increased during the year due to the national changes to the process of making DoLS applications. The changes have resulted in Birmingham City Council and other councils nationally, being unable to complete the DoLS process within the required timescales and therefore, as the patients have been discharged or transferred to other care settings during the process, the applications have been withdrawn.

Table 4 Deprivation of Liberty Safeguards (DoLS)

Deprivation Of Liberty Safeguard	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Authorised	10	2	3	0	15
Not Authorised/ withdrawn	16	29	25	37	107
Independent Mental Capacity Assessment (IMCA)	5	2	1	0	8
PREVENT Referrals	0	0	1	0	1

Figure 2 Deprivation of Liberty Safeguards (DoLS)



2.6 All Safeguarding activity is reported to the Trust's Safeguarding Group which meets on a 6 weekly cycle at which patient cases are discussed to identify areas of learning and good practice / development.

3 Safeguarding Activity for Children From April 2014- March 2015

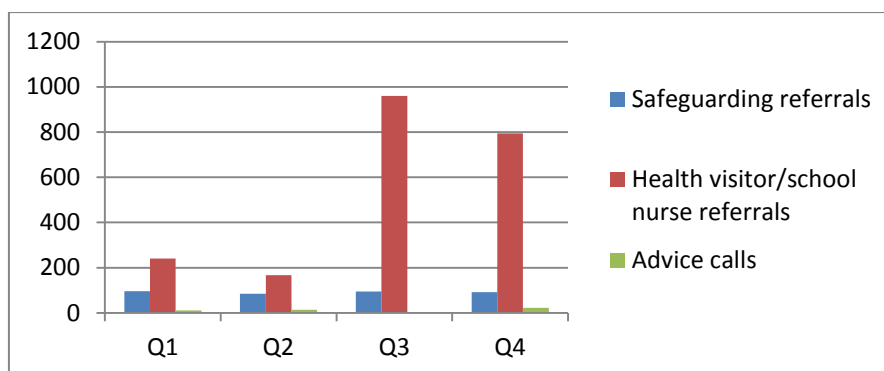
3.1 The Named Nurse for Children's Safeguarding left the Trust in October 2014. This provided an opportunity to further review and strengthen the team and to further improve partnership working with the Birmingham Children's Hospital NHS Foundation Trust. Two Children's Safeguarding Practitioners have been jointly appointed with the Birmingham Children's Hospital NHS Foundation Trust and will rotate between the two hospitals. This is an innovative approach, but which supports the hospitals working closely together.

3.2 It will be noted in Table 5 / Figure 3 that the number of Health Visitor and School Nurse referrals has increased markedly during the last two quarters of the year reflecting the departure of the Named Nurse. However, new practise has been adopted with all children who are seen in the Trust's Emergency Department being referred to a Health Visitor or a School Nurse by letter. This is seen as good practice particularly as the Trust predominately cares for adult patients.

Table 5 shows the Safeguarding activity

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Safeguarding Referrals	96	85	95	92	368
Health Visitor / School Nurse referrals	241	167	960	794	2162
Advice Calls	12	14	3	23	52

Figure 3 shows the Safeguarding activity



3.3 The source of children's referrals is shown in Table 6 below which relates to outpatient services and the Emergency Department. The majority of referrals are in relation to parental capacity.

Types of Abuse	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Domestic Abuse	10	10	19	10
Parental Capacity	69	55	63	45
Neglect	9	7	4	6
Physical	3	5	5	5
Emotional	1	3	4	2
Sexual/Child Exploitation	3	2	1	1
Not stated	1	3	0	0
Total	96	85	96	69

3.4 All Safeguarding activity is reported to the Trust's Safeguarding Group which meets on a 6 weekly cycle at which patient cases are discussed to identify areas of learning and good practice / development.

4 Training For Adult and Children Safeguarding (PROTECTION, PREVENTION & ACCOUNTABILITY)

4.1 During 2014/15, a robust training needs analysis was undertaken which enabled the identification of the groups where improvement was necessary and allowed training to be targeted to those staff groups, increasing the percentage number trained. The tables below indicate the numbers of staff trained.

4.2 All staff on induction to the Trust receive Level 1 Awareness Training in Safeguarding and PREVENT (Table 7); this is given via a leaflet and is available on the Trust intranet. Percentage attendance is shown below.

Table 7: Percentage number of staff receiving Level 1 Awareness Training

	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Level 1	99.7%	99.7%	99.7%	99.7%

All existing staff within the Trust were also given a Level 1 Adult's Safeguarding / PREVENT leaflet during October 2014 as good practice to update staff.

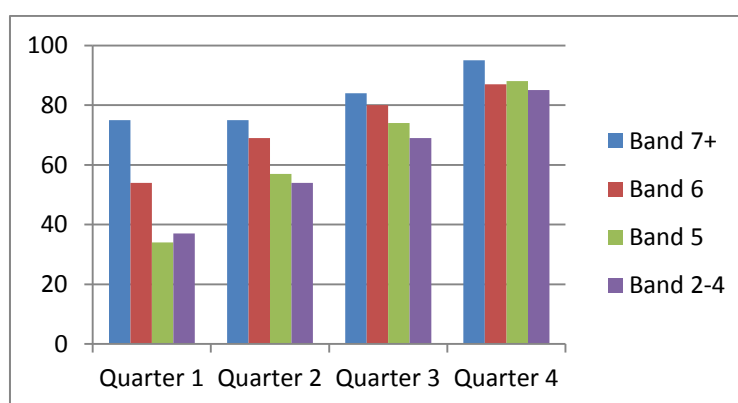
4.3 Adult Training Level 2

Table 8 shows the percentage number of staff trained to Level 2 at each clinical Band during 2014/15; this is shown graphically in Figure 4. This training includes Deprivation of Liberty Safeguards training and training in relation to the Mental Capacity Act.

Table 8: Percentage Number within each Clinical Banding Level 2 Trained

Band of Staff	Baseline	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Band 7+	72%	75%	75%	84%	95%
Band 6	44%	54%	69%	80%	87%
Band 5	15%	34%	57%	74%	88%
Bands 2-4	24%	37%	54%	69%	85%

Figure 4: Level 2 Trained staff in each Clinical Band



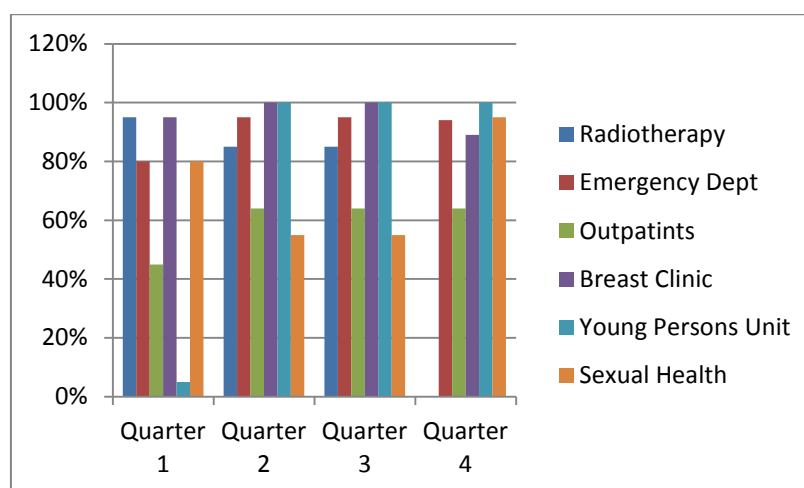
4.4 Training for Children- Level 2

Following a training needs analysis, groups of staff were targeted that the Lead Nurse identified as requiring training based on those clinical areas in which children or parents are most likely to be seen. These areas are shown in Table 9 and Figure 5.

Table 9: Level 2 Training for Children

Target Groups	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Radiotherapy	95%	85%	85%	96%
Emergency Department	80%	95%	95%	94%
Outpatients	45%	64%	64%	64%
Breast Clinic	95%	100%	100%	89%
Young Person's Unit	5%	100%	100%	100%
Sexual Health	80%	55%	55%	95%
Radiology	30%	53%	53%	72%

Figure 5: Table 9: Level 2 Training for Children



4.5 PREVENT Health Workshop to Raise Awareness of Prevent (WRAP) 3 (Counter Terrorism Strategy)

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 session.

Table 10: Percentage number of clinical staff trained by area

Area	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Burns	37%	37%	37%	66%
Emergency Dept	41%	41%	41%	68%
Matrons	61%	61%	61%	88%
On Call Managers	67%	67%	67%	79%
Clinical Site Managers	50%	86%	96%	100%

5. Safer Recruitment (PREVENTION & PARTNERSHIP)

- 5.1 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 to the Trust from staff entering the workforce is within tolerance.
- 5.2 All staff entering the Trust are subject to 6 employment checks and these include a verification of identity and a Disclosure and Barring Service (DBS) check.
- 5.3 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.

6. Governance – Adults and Children (PROPORTIONALITY & PARTNERSHIP)

- 6.1 The Trust Safeguarding Group is chaired by the Lead Nurse for Safeguarding which meet on a 6 weekly cycle and there are representatives from the Clinical Commissioning Group (CCG) Safeguarding Team in attendance. Safeguarding cases are discussed to show good practice and areas within Safeguarding that need to be improved.
- 6.2 A Safeguarding report is presented quarterly at the Executive Chief Nurses Care Quality Group. Membership of the group includes public/patient Governors.
- 6.3 An Annual Safeguarding report is submitted to the Board of Directors.
- 6.4 A Safeguarding report is submitted quarterly to the Clinical Commissioning Group (CCG).
- 6.5 Monthly supervision meetings take place between the Lead Nurse for Safeguarding at UHB by the CCG Lead Nurse.
- 6.6 The Lead Nurse for Safeguarding receives details of Datix incidents on a daily basis.
- 6.7 The Lead Nurse for Safeguarding receives a copy of any Complaint or Patient Advice and Liaison Service (PALS) concern relating to Safeguarding.

- 6.8 The Adults Safeguarding Policy and Procedures are in date.
- 6.9 The Children's Safeguarding Policy and Procedures were updated in 2014/15.
- 6.10 Monthly dashboard figures are submitted through Governance to the CCG.
- 6.11 Section 11 Children's Act is completed for the Birmingham Safeguarding Children's Board.
- 6.12 A 'Looked After Children' Care Quality Commission (CQC) Inspection was conducted during the year and an action plan developed to address areas for improvement highlighted. This action plan is monitored by the Trust and the Birmingham Safeguarding Children's Board.
- 6.13 The CCG undertook a review of Adult Safeguarding and the progress being made by the Trust in its delivery. An action plan has been completed and is reported on to the CCG.
- 6.14 During the Trust's CQC Inspection in January 2015, the Safeguarding elements of care and practice were scrutinised.

7. Achievements for Adults and Children's Safeguarding 2014/15

- 7.1 Patient information leaflets have been produced and are displayed in wards and clinical areas.
- 7.2 The Safeguarding Team are available on the wards to support staff and to visit patients who are identified as being at risk and who have been reported as a Safeguarding concern.
- 7.3 Business cards have been produced which provide contact details for the Safeguarding Team. These are available throughout the hospital and given to patients so that they have a point of contact.
- 7.4 A robust flow chart has been developed in relation to the use of Deprivation of Liberty Safeguards (DoLS) together with the procedures to follow for referral. This particularly references the Supreme Court judgements relating to the use of DoLS (March 2014).
- 7.5 A training needs analysis was carried out and a matrix developed and successfully utilised to identify staff groups to be targeted in relation to training, as reported above.
- 7.6 To increase staff knowledge, training fact sheets were developed in relation to the requirements of Deprivation of Liberty Safeguards (DoLS) and Mental Capacity Act.

- 7.7 Training fact sheets have been developed regarding child sexual abuse, child sexual exploitation, domestic abuse, emotional abuse, female genital mutilation, financial abuse, neglect, physical abuse and witchcraft
- 7.8 Mental Capacity Act tools have been further developed and are awaiting upload onto Trust Prescribing Information and Communication System (PICS). This will be utilised in clinical areas for day to day decisions regarding capacity.
- 7.9 Policies and procedures relating to Adult Safeguarding have been reviewed during the year and updated as required.
- 7.10 Policy and procedural documents in relation to Children's Safeguarding are in place, robust and current.
- 7.11 Prompt cards are given to staff when they have received Level 2 Adult and Children Safeguarding training.
- 7.12 Practitioner knowledge has been enhanced in relation to domestic abuse, child sexual exploitation and the national 'Think Family' and 'Troubled Families' initiatives.
- 7.13 70 Clinical Champions have been trained in Level 2 Adult and Children Safeguarding and promote Safeguarding within the clinical areas.

8. Plans for Next Year (2015/16)

(EMPOWERMENT, PROTECTION, PREVENTION, PROPORTIONALITY, PARTNERSHIPS & ACCOUNTABILITY)

- 8.1 To embed the Care Act (2015) within Safeguarding training.
- 8.2 To gain patients views regarding their experience of the processes around Safeguarding whilst an inpatient; developing Making Safeguarding Personal for patients ensuring that the patient voice is at the centre of Safeguarding concerns.
- 8.3 Patient Information leaflets for Children's Safeguarding to be developed.
- 8.4 Training fact sheets to be developed in relation to adult sexual abuse, honour based violence, self-neglect, modern slavery and forced marriage.
- 8.5 The development of an additional Trust Best Interest Decisions guidance document is currently being developed.
- 8.6 To enhance practitioner knowledge in relation to domestic abuse liaising with minority groups to ensure parity of provision.

- 8.7 To enhance practitioner knowledge on adult and child sexual exploitation.
- 8.8 To embed the national 'Think Family' and 'Troubled Families' initiatives within the Trust.
- 8.9 'Right Service, Right Time' initiative needs to be embedded into practice.
- 8.10 Audit numbers of Mental Capacity Assessments completed on Prescribing Information and Communication System (PICS), reviewing gaps in use and targeting training accordingly.

9. **Recommendation**

The Board of Directors is asked to receive the Safeguarding Children and Vulnerable Adult Annual Report for 2014/15.

Philip Norman
Executive Chief Nurse
October 2015