Safeguarding Annual Report 2023 – 2024

Contents

1. Foreword:

This annual report demonstrates that safeguarding remains a significant priority for the Trust. The report offers assurance that the safeguarding annual work programme has identified and achieved some key safeguarding work streams and the team has been responsive to emerging safeguarding themes within the Trust, and those also evident from wider multi-agency collaboration.

This reporting year, there has been an increased visibility from the safeguarding team across all areas of the Trust, this has resulted in increased knowledge for our colleagues and enhanced opportunities to safeguard our patients, whilst they are in our care.

The Trust recognises its continued commitment to demonstrate compliance to safeguarding statutory duties and the continued focus on increasing safeguarding team resources in the year ahead, which will further enhance our arrangements.

It is evident that there has been a clear shared safeguarding vision, underpinned by a detailed safeguarding team work plan that has assisted in driving forward the achievements that have been recognised in this report. It is also clear that safeguarding activity and divisional collaboration has greatly increased, with the recognition to increased visibility and increased resources in the safeguarding team that has undoubtedly impacted upon this observation.

We look forward to another successful year to come and continuing to support the team to achieve the priorities that have been outlined for the forthcoming year ahead.

Karen Jessop
Chief Nurse

Simon Brown
Deputy Chief Nurse

2. Introduction

Doncaster and Bassetlaw NHS Teaching Hospitals (DBTH) provides acute services for 420,000 people across South Yorkshire, North Nottinghamshire, and the surrounding areas. As a Trust we employ over 6000 colleagues.

As a Safeguarding team covering the DBTH footprint, we are pleased to support all DBTH colleagues every day in identifying and managing safeguarding concerns. This annual report is an opportunity to share with you our safeguarding achievements, improvements, innovations and areas of priorities that we have driven forward over the past 12 months.

This report also provides an overview of the safeguarding activity that has occurred within our Trust, and summarises our areas of risk, good practice and significant developments that have occurred over the last reporting year (1st April 2023 – 31st March 2024).

Safeguarding has remained a Trust priority and this has been evidenced by the significant support and engagement across all Divisions, in the continuation of working together to protect our patients from harm, whilst they access our services.

Safeguarding will always remain unremittingly complex and challenging, but as a Trust we have a clear picture of our areas of safeguarding focus and a clear safeguarding work plan that outlines our commitment to progress, and to address identified and emerging safeguarding themes.

The purpose of this report is also to provide assurance that as a Trust we have robust safeguarding systems in place to effectively respond to safeguarding concerns and uphold our statutory safeguarding responsibilities.

The message that '**safeguarding is everyone's responsibility**' has been at the forefront of all our work and will remain a central focus as we also look forward to the year ahead.

3. Safeguarding Governance

Figure 1: Safeguarding lines of Accountability at DBTH (March 2024 position)

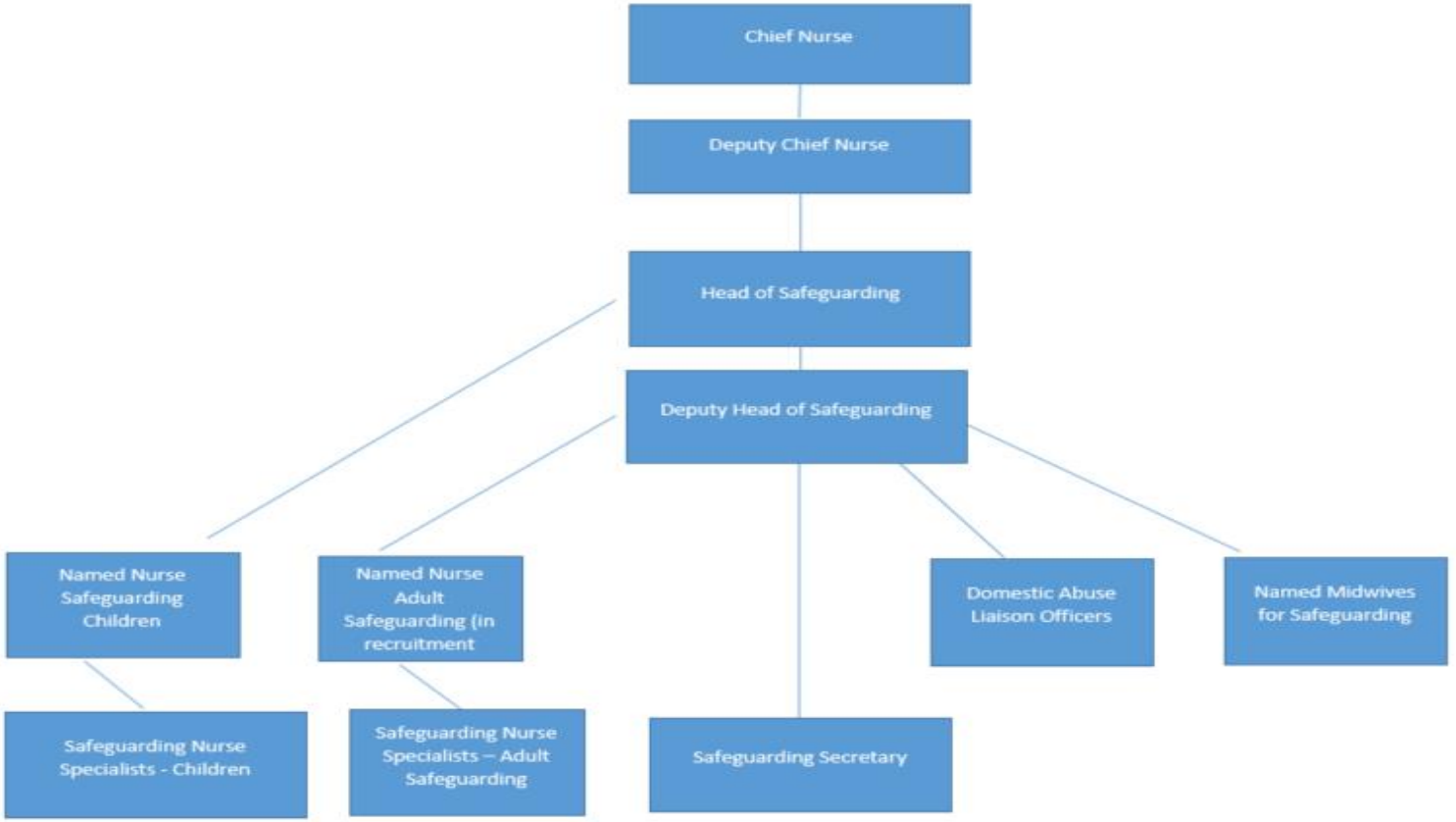


Figure 1.1: Evidences the governance flow and oversight at year end.

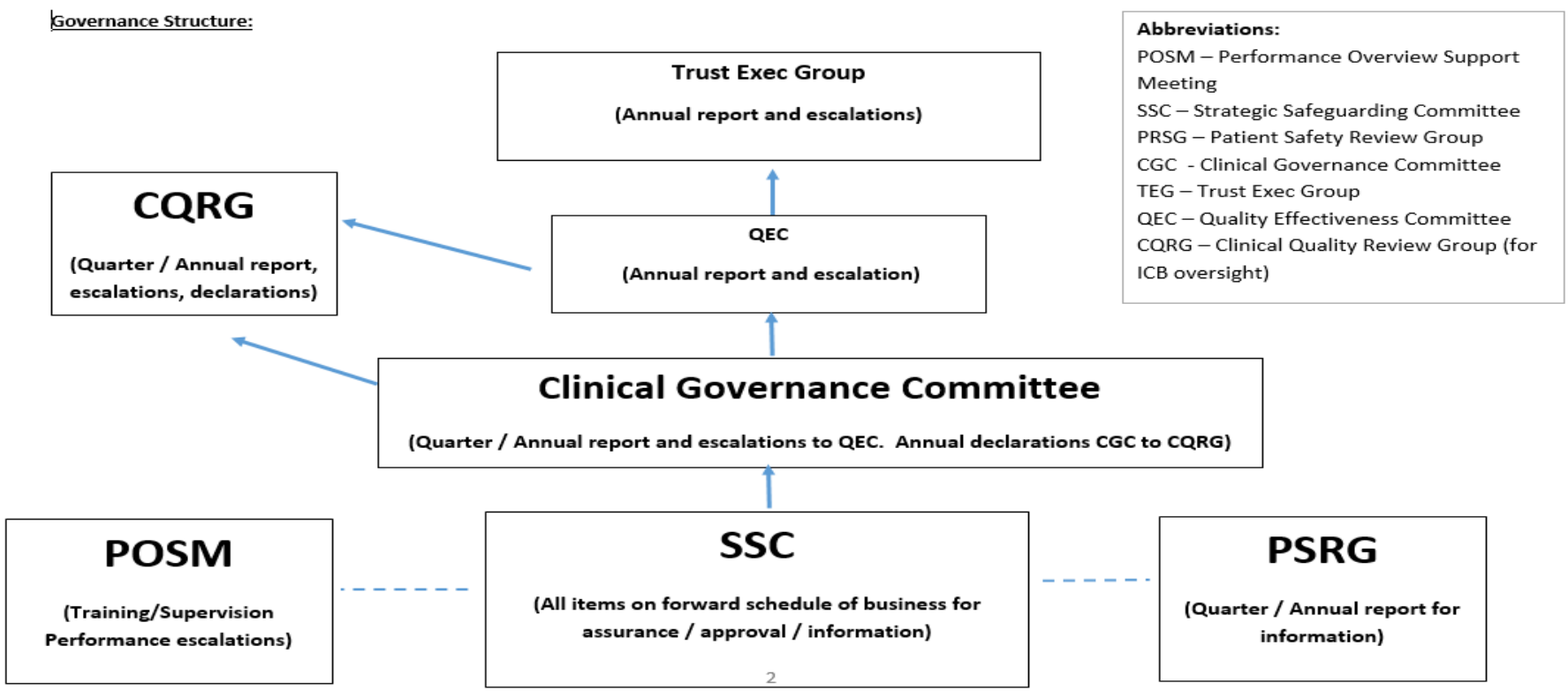


Figure 1 and 1.1 illustrates that there are clear lines of accountability in relation to roles, accountability and committee/board oversight within DBTH for Safeguarding. The safeguarding team provide specialist advice and support on all safeguarding matters Trust wide, to all colleagues. Of noting in the coming year the governance flow for the Trust has been streamlined and new arrangements will be outlined in 2024 – 2025 annual reporting. During this year the Strategic safeguarding committee's terms of reference and membership have been significantly reviewed to ensure divisional representation and refresh the agenda items being discussed. The strategic safeguarding committee (SSC), (renamed Strategic safeguarding group (SSG) from May 2024), remains the key meeting that oversights and coordinates safeguarding information with divisional and ICB members in attendance. **Appendix 1** provides an overview of how business was scheduled for discussion at the SSC throughout the reporting year. **Appendix 2** provides a year end summary of the safeguarding work plan. **Appendix 3** provides details of the safeguarding team members.

4. Overview of Safeguarding Activity:

One of the key indicators that we look at is the number of safeguarding referrals that are generated from Trust colleagues to social care, in relation to unborn babies, children and adults.

5. Safeguarding Referrals:

Figure 2: highlights the number of referrals made to social care, where abuse or harm was identified relating to patients accessing DBTH services:

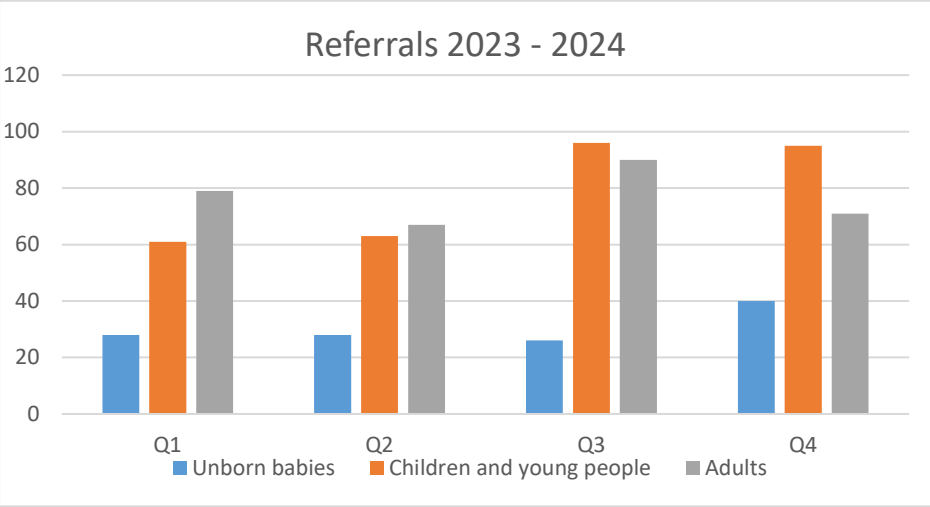


Figure 3: Highlighted comparison referral figures from the previous reporting year.

	Unborn babies	Children and Young people	Adults
Q1	28	61	79
Q2	28	63	67
Q3	26	96	90
Q4	40	95	71
Total 2023 - 2024	122	315	307
Comparison to 2022 - 2023	**281** (referrals were not previously split for unborn / children referrals for recording purposes)		**313**

The above data in **Figure 2 and 3** indicates an increase in activity for this reporting year across all areas of safeguarding, with a particular increase in referral activity noted in Q3 and Q4. In comparison to the previous year's reporting, it is evident there is significantly more referrals noted from children and unborn referrals, with a total of 437 children/unborn referrals this year in comparison to 281 from 2022 – 2023. Interestingly the safeguarding huddles commenced at the end of Q2, increasing opportunities for safeguarding discussions across paediatric

areas which may have contributed to a greater awareness of safeguarding impacting on increased safeguarding activity in Q3 and Q4; this will be an area of observation for the year ahead, made easier to oversight now the named midwives are part of the safeguarding team, providing a further opportunity for closer alignment with reporting mechanisms. Whilst referrals for Safeguarding adult referrals have largely remained comparable to 2022 – 2023, there has been a significant increase in the number of Deprivation of Liberty Safeguard (DOLS) applications that have been quality assured by the safeguarding adult nurse specialists in the team prior to submission to the relevant local authority.

Safeguarding Adults:

6. **Deprivation of Liberty Safeguards (DOLS):**

Figure 4: Deprivation of Liberty Safeguard (DOLS) Applications submitted

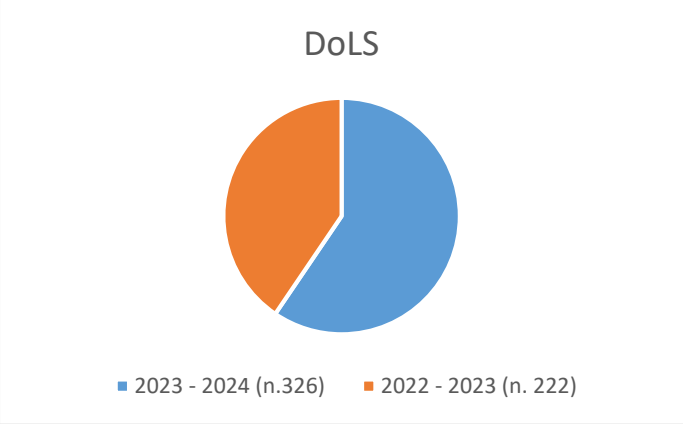


Figure 5: DOLS breakdown by reporting Quarter 2023 - 2024

2023 - 2024	DOLS applications referrals
Q1	63
Q2	61
Q3	92
Q4	110
Total	326

The above data in **Figures 4 and 5** provides an opportunity to compare the DOLS activity to the previous reporting year (2022 – 2023). There is a significant increase noted from 222 applications in the previous year to 326 applications in this year, evidencing an increase by 46%. Of particular note is the increase in activity in Q3 and Q4, anecdotally this could be attributed to the increase in safeguarding team capacity and the correlation that 2 safeguarding specialist adult nurses commenced in the team at the end of Q2 (September 2023) and the beginning of Q3 (October 2023); this will be an area of continued observation to monitor the activity trend for the year ahead.

7. Mental Capacity Act (2005): Embedding the framework:

During this reporting year, there has been an externally commissioned 360 Audit on Mental Capacity, with the final report being published in January 2024 (Q4). The focus of this audit was to provide an independent opinion on the systems and processes in place to support compliance with the Mental Capacity Act. For context, this audit was undertaken in August 2023 prior to the increased capacity in the Safeguarding team. There was already an organisational extreme risk opened, outlining the concerns regarding compliance to the Mental Capacity Act. This audit confirmed the concerns and provided an additional framework to progress improvements. There has been significant activity undertaken following this audit as outlined below:

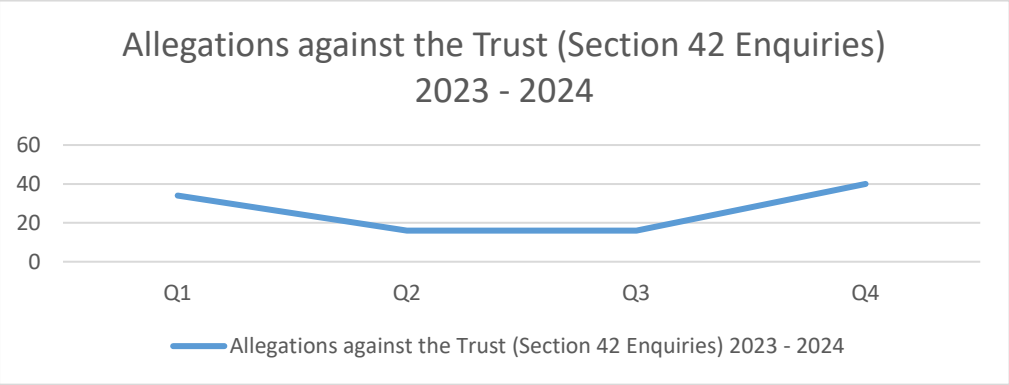
- Completed Quality Improvement project in preparation to implement a Trust Mental Capacity forum with divisional representation.
- Increase in Safeguarding Adult Nurse Specialists to support Trust colleagues in their responsibilities and legal duties in relation to MCA
- Review of the Strategic Safeguarding Committee to provide scrutiny and oversight responsibility for Trust MCA activity.
- A review of DBTH face to face training content, utilising 'gold standard' examples of MCA assessments and case studies to support practical application
- A review of the e-learning training offer to ensure robust content for any colleagues choosing this training route, and in line with e-learning for health resources.
- Development of bespoke drop in sessions on Mental Capacity and DOLS throughout Trust areas, driven by the newly appointed safeguarding adult nurse specialists
- Quality assurance of any MCA assessment prior to processing of any DOLS applications, to ensure robust content and an opportunity for learning and feedback to colleagues involved.
- Planning with DBTH Digital leads to develop patient electronic record options to support clear MCA assessment recording.
- Review of the MCA policy, to outline the planned quarterly audits to be routinely scheduled from Q1, 2024 – 2025, and to support further follow on from the previous scrutiny offered by the 360 audit.
- Completion of all 360 (Q4 - March 2024) actions with confirmation that auditors were assured of work undertaken and evidence provided. Significant ongoing progress is evident and will provide assurance on the remaining 360 actions that have a completion deadline of Q1 – June 2024. This will be further reported in the proceeding reporting year.
- Executive agreement to progress recruitment plans for a Trust MCA lead and supporting MCA Specialist advisors to continue with the drive and improvement plans.

8. Allegations against the Trust:

Allegations against the Trust (Section 42 Enquiry) are submitted via DBTH Safeguarding team. The safeguarding professionals will investigate the circumstances of the concern where possible, or they will direct the concern to the relevant Division for a response. All concerns are reported via the Trust DATIX reporting system.

Responses are returned to the Local Authority on completion with a clear outline of what actions have been taken by the Trust, where allegations are upheld.

Figure 6: provides details of allegations against the Trust that have been received for 2023 - 2024



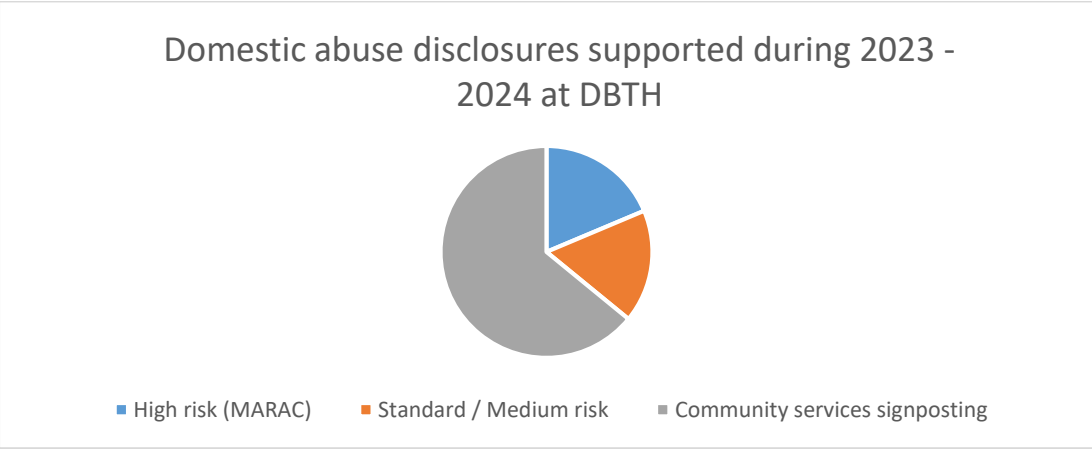
Q1	Q2	Q3	Q4
34	16	16	40

The common themes during this reporting year related to discharge concerns, neglect and medication concerns. Going forward, to support safeguarding investigations the team will be developing a bespoke training package, with supporting investigatory templates to enhance investigatory responses and support more timely returns to the Local Authority.

9. Domestic Abuse:

During this reporting year, our Domestic Abuse Liaison officers have supported 284 people who have disclosed domestic abuse. 53 of these have resulted in a referral to a Multi-Agency Risk Assessment Conference (MARAC) as risk has been deemed high. The purpose of MARACs are to prevent a domestic homicide and disrupt perpetrator behaviours, by providing a risk based response to keeping victims safe. Of the remaining disclosures, 49 cases were referred to the Doncaster Domestic Abuse Hub and the remaining 182 people were signposted to wider services within the community (adult / children's social care, mental health services, substance use services are some examples of community signposting actions that were undertaken.) We also collaborated with Doncaster Domestic Abuse Hub to provide relevant patients with personal alarms prior to discharge, where their circumstances supported this. This resulted in supporting patients experiencing domestic abuse, to feel safer on discharge home.

Figure 7: indicates the number of people supported by DBTHs Domestic Abuse (DA) liaison officers



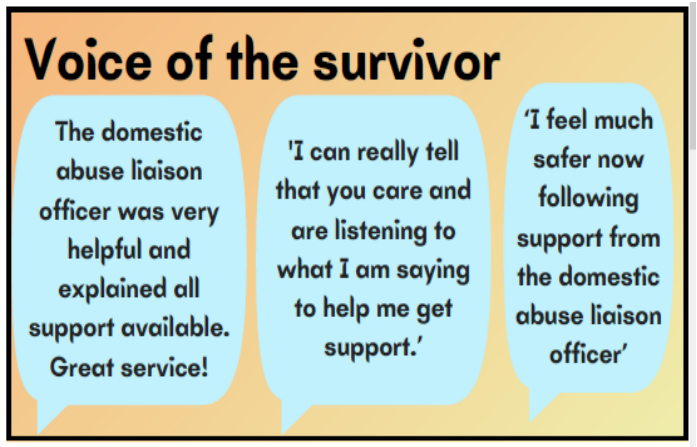
"Of these 284 disclosures, 101 referrals were made to the police to report a crime"

In addition to supporting disclosures, the domestic abuse liaison officers have successfully recruited a further 150 Trust colleagues to be 'domestic abuse champions', taking the running total of DBTH domestic abuse champions to over 400 colleagues. All domestic abuse champions have had additional training from our DA liaison officers to support them in how to ask the questions sensitively to support domestic abuse disclosure.

Importantly, it provides additional training to equip colleagues with the confidence to respond and understand how to enlist support from our specialist DA liaison officers following a disclosure. The DA officers have successfully developed a clear domestic abuse reporting flowchart to support Trust colleagues in escalating cases of concern. Additionally, they have worked closely this year to support all the Professional Nurse Advocates to receive additional training, whilst also ensuring they have supported sessions as part of preceptorship, induction, and international nurse recruitment sessions. These posts continue to be funded by the South Yorkshire Police Commissioner until March 2025. Sustaining this provision remains a key financial objective for the safeguarding team to ensure this essential resource is not lost, and this has been supported by the opportunity to deliver a presentation to the Board to outline how these roles are making a difference at DBTH. The contribution of these roles has also been significantly recognised from our wider partners in the Doncaster Safeguarding Adult Board, when our DA officers were presented with an award for their contribution in responding to Domestic Abuse and keeping the people of Doncaster safe:

Figure 7: shows our DA liaison officers proudly accepting their well-deserved award!

An important reminder of why these roles are so important:



Scan to access Doncaster reporting flowchart:

Scan to access Bassetlaw reporting flowchart:

Safeguarding unborn babies, children and young people:

10. Development of Safeguarding Huddles:

A key focus this year has been to develop 'safeguarding huddles' across paediatric areas of the Trust. Our safeguarding specialist nurse for children has been a key driver in scoping, developing, launching and embedding these across relevant areas of the Trust. This has increased the opportunities to support colleagues in having safeguarding conversations, assist in safeguarding escalations and referrals, whilst increasing the opportunities for safeguarding team members to be visible in key areas. Huddles have also been implemented in our emergency department with an 'all age' focus – to assist our colleagues to identify safeguarding concerns, be curious and ultimately support patients of any age to be safeguarded.

Looking forward, we recognise the increasing Trust implementation of wider 'Safety Huddles', as a team we have therefore decided to rebrand our 'Safeguarding Huddles' to ensure colleagues are not confused by the similar titles and we look forward to rebranding to 'safeguarding liaison meetings' as the new reporting year progresses. However, we want to recognise in this reporting year we have supported 370 Safeguarding huddles – outstanding!

Figure 8: Shows our specialist safeguarding Nurse Kim coordinating one of the first safeguarding huddles

11. Successful completion of the DBTH Management for Bruising or Injury in non-mobile infants and children pathway:

During Q1, a young baby was seen in our emergency department where several serious injuries were identified. One of the presenting features in this presentation was identification of bruises in a non-mobile baby. This case triggered a safeguarding rapid review and the multi-agency guidance and DBTH pathways were updated as a result. The safeguarding team has extensively supported the learning from this case by wide delivery of a presentation on 'Injury in non-mobile infants and children', development of a bespoke 7-minute briefing on non-mobile babies, and the development of a management flowchart to support future presentations in our emergency department. Resources related to this are on the Safeguarding HIVE pages: Presentation and bruising in non-mobile babies and infants.

12. ICON

During Q3 our Named Midwives and Specialist safeguarding nurse, joined forces to raise awareness of crying babies with the aim to support the reduction of abusive head trauma from babies being 'shaken' due to a care giver being triggered in response to the baby crying. ICON is a mnemonic that stands for **I** – Infant crying is normal, **C** – comfort methods can help, **O** – it's ok to walk away, **N** – Never, ever shake a baby. This is a national programme to support parents and care givers in how to respond when their baby cries, know what is normal crying to expect and understanding who can offer support. ICON

Figure 9: shows safeguarding team members raising the awareness of ICON across Trust departments. This picture was featured in the National ICON newsletter in October 2023 to recognise the fantastic work DBTH was doing.

Doncaster and Bassetlaw safeguarding team members speaking to parents in antenatal clinic about why babies cry and where to get support.

13. Pregnancy Liaison Meetings and Midwifery background checks:

Where potential safeguarding concerns emerge during pregnancy, DBTH work closely with our partner agencies to ensure proportionate information is shared and cases are discussed to provide support and ensure families are supported and unborn babies are safeguarded in preparation for birth. As part of this process multi-agency colleagues meet weekly as part of a 'Pregnancy Liaison Meeting - PLM' to proactively plan and support the identification of escalating safeguarding concerns, by completion of midwifery background checks to support risk-based decision making:

Figure 10: shows the number of PLMs and midwifery background checks completed during this reporting year

2023 - 2024	Number of patients discussed at PLMs	Number of midwifery multi-agency background checks completed
Q1	99	126
Q2	188	164
Q3	160	89
Q4	160	168
Total	**607**	**547**

14. Female Genital Mutilation (FGM):

The practice of FGM includes illegal procedures that intentionally alter or injure female genital organs for non-medical reasons. This practice is irreversible, has no health benefits and can cause serious injury or death (FGM Act, 2003). There is a national requirement to report cases of FGM via NHS Digital, health professionals can also add a FGM-IS tab on a female child's summary care record if they are deemed at risk of FGM – this allows for greater professional awareness to safeguarding female children at risk as they access health services. There is also a mandatory duty of regulated professionals to report known cases of FGM in under 18s to the police via 101. In Q2 the Trust FGM policy was reviewed to support the understanding of Trust responsibilities and a FGM lead was identified. For the Trust the FGM lead is Colleen Biltcliffe (Named Midwife for Safeguarding) and she will be driving forward future improvement plans as part of the safeguarding team's 2024 -2025 work plan. This will strengthen Trust arrangements on FGM and continue the collaborative working arrangements with our multi-agency partners to make risk based decision to safeguard women and girls at risk of FGM.

Figure 11: Indicates the FGM Trust data, which is now oversighted from Q4 by the Named Midwife

2023 - 2024	Number of FGM notifications (for adults)	Number of FGM-IS alerts progressed
Q1	0	2
Q2	5	2
Q3	0	2
Q4	13	0
Total	18	6

The above data in **Figure 11**, provides a quarterly overview of FGM activity known for patients accessing the Trust. In comparison to wider regional areas, Doncaster and Bassetlaw do not have high numbers of FGM. The recent transfer of the named midwives identified an opportunity for undertaking a gap analysis on FGM arrangements. The outcome of this triggered the addition of a Trust risk around notification processes (added outside of this reporting period – Q1 2024 -2025), it has also shaped actions on the safeguarding team work plan to progress additional scrutiny around the notification process and the development of a subsequent new monthly reporting oversight by the FGM lead looking at data from K2 to correlate with the number of FGM notifications received (K2 is the electronic system used in maternity). Following receipt of a notification the FGM lead now reviews the risk assessments undertaken, to ensure robust actions are in place; future work is also planned to increase additional awareness of FGM across wider Trust divisions, the detail of this is outlined in the forthcoming 2024 – 2025 safeguarding work plan. These actions will provide mitigations and a way forward to address the risk identified. Of noting, the appropriate risk assessments to the patient and any female baby or children had been undertaken on all prior FGM notifications. The risk triggered was around the systems in place for identifying the number of notifications for reporting to NHS Digital, the monthly reporting mechanism is the mitigation that has now been implemented.

15. Good practice (team award / gold standard safeguarding awards)

In Q1 the safeguarding team introduced the 'Gold standard safeguarding award'. This is a monthly award where colleagues are presented with a certificate and a love to shop voucher is provided, in recognition of their good safeguarding practice. Throughout this reporting year we have recognised the following colleagues for some great safeguarding practice:

- Michelle Shipley: Occupational Therapist
- Rebecca Rider / Sandra Rafferty: Paediatric Emergency Department
- Amymarie Tucker: Advanced Nurse Practitioner, Emergency Department

- Andrew Manroop: Staff Nurse, Medical Division
- Megan Naughton, Early Intervention and Inclusivity Lead Midwife
- Andrea Berry, Legal Services officer
- Claire Rogers and Jackie Jobling: Orthopaedic outpatients
- Laura Clarkson: Occupational Therapist
- Dr Aubrey Franco: Orthopaedic Registrar
- Charlotte Bellamy: Community Midwifery Support Worker

In Q4 the safeguarding team themselves were winners of the DBTH Star of the Month for the recognition to the continuation in providing vital support to Trust-wide colleagues:

Figure 12: shows Simon Brown, Deputy Chief Nurse presenting some of the safeguarding team members with their award

It was also good to capture the voices of safeguarding team members in the end of year work plan reflection session. Above are some of the comments captured on how it feels to be part of the safeguarding team one year on.

16. Safeguarding cases:

The team provide a detailed quarterly case update as part of the DBTH Strategic Safeguarding Committee on all ongoing activity related to child rapid reviews, child safeguarding practice reviews, safeguarding adult reviews, domestic homicides and other thematic safeguarding learning reviews that are initiated across Bassetlaw, (Nottinghamshire Children's Partnership and Adult Board) and Doncaster (Children's Partnership, Adult Board and Domestic Abuse Strategic Board). The activity remains high and the safeguarding team have responded within timescales to all information requests in this reporting year. Learning identified from reviews has included themes of the following:

- Bruising / injury in non-mobile children, including 'shaken baby' injuries
- Neglect, including not being brought to appointments
- Professional curiosity
- Exploitation (child sexual / criminal and financial)
- Unsafe sleep
- Suicide with links to domestic abuse experiences

Learning that is identified is shared via divisional representatives who attend the Strategic safeguarding committee. Key themes are also incorporated into the DBTH Safeguarding training and work streams are developed to respond to any specific relevant areas. Examples of DBTH responses include the pathway development for injuries / bruising in non-mobile babies, raising the awareness of abusive head trauma in babies, instilling professional curiosity as the underpinning ethos at safeguarding huddle discussions, progressing resources to recognise and respond to domestic abuse, working with our partners to respond to exploitation and neglect.

17. How we work with our partners:

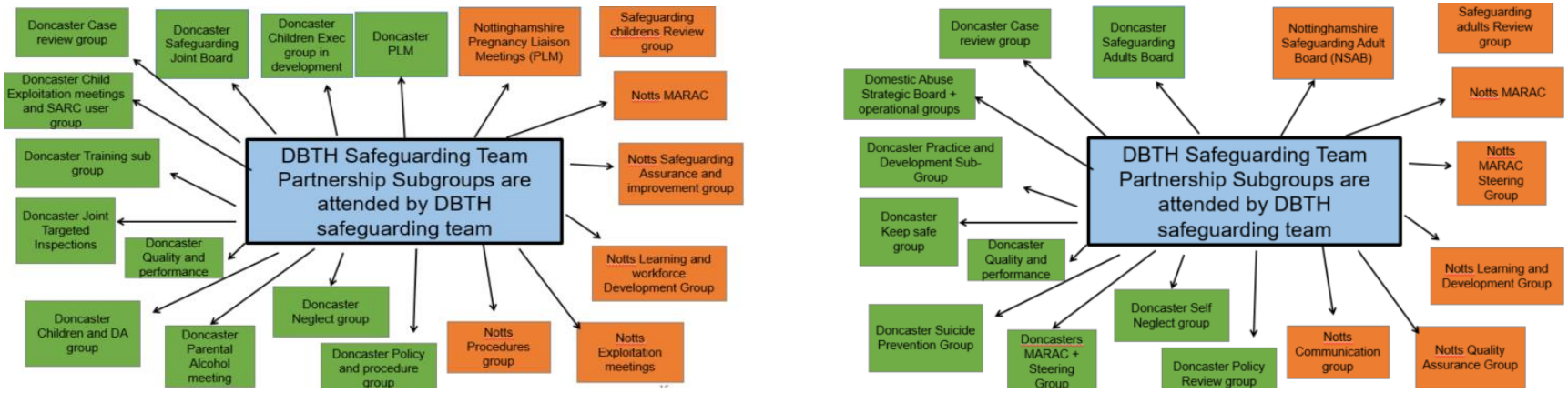
During this reporting year the team have undertaken a review of all partnership meetings across both Nottinghamshire and Doncaster (children and adult work streams), to ensure the voice of DBTH is represented and to support the opportunity to continue our active collaboration with local authorities, integrated care board (ICB) members and wider partner agencies.

As organisations we work together to share and have joint ownership to improve outcomes for children and adults.

This is achieved by:

1. Being able to challenge appropriately and hold one another to account
2. Early identification and analysis of emerging safeguarding risks
3. Learning being promoted in a way that as an organisation we can become more reflective and improve services for our patients and families

Figure 13: Provides an overview of key children and adult multi-agency meetings that the safeguarding team actively contribute to *(this is not an exhaustive list)*



18. Risks

The Deputy Chief Nurse and Head of Safeguarding continue to review the safeguarding risks as recorded on the DATIX risk register and at the frequency required for the risk grading. All safeguarding risks are reviewed in addition, each quarter at the strategic safeguarding committee that is chaired by the Deputy Chief Nurse. The position as of March 2024 identified 5 open risks that related to safeguarding functions, as outlined below:

1. Safeguarding training compliance
2. Safeguarding supervision
3. Capacity (resources) in the safeguarding team
4. MCA and DOLS: compliance
5. SABA Security and subcontract – behaviours of concern.

All risks have mitigations and actions in place to address the resolution. The annual safeguarding work plan additionally demonstrates significant progress to further respond to reducing the risks. The strategic safeguarding committee (now group) meetings provide a further opportunity for wider scrutiny by its members which includes divisional leads and integrated care board members from Doncaster and Nottinghamshire. A progress report on all outstanding risks is provided as a standing agenda item at each strategic safeguarding committee.

19. Training:

This year there has been a firm focus on increasing the safeguarding training compliance and ensuring all colleagues were correctly aligned to the appropriate level of safeguarding training. A full review of all 6000 plus roles was undertaken by the safeguarding team, to review the safeguarding training alignment as part of the foundation work on improving compliance, support was also provided from Education leads to address any re-alignments identified.

As a team we are now in a confident position that roles are appropriately aligned. Divisional leads have joined the team in collaborating to support colleagues to prioritise safeguarding training. This has resulted in a continued rise in compliance, the last remaining 'amber' (Children's Level 3), is now above 81% - from the starting Q1 position of the new reporting year (2024-2025) – all safeguarding training compliance will remain in continued focus for the year ahead.

In the Trust, we recognise that a low compliance in safeguarding training, can correlate with colleagues having reduced safeguarding knowledge, which directly impacts on a reduced capacity to recognise and respond to safeguarding concerns. This observation was also made by CQC during their inspection period, unfortunately during their visit to the Trust in August 2023, the safeguarding training data available was from June /July 2023 which was the lowest compliance. Whilst work had begun in earnest to improve this, time was needed to start to see an improved outcome. The results below demonstrate how this is now clearly evident, it provides an assured position that this area of concern is fully oversighted and progressing positively. Training compliance is discussed quarterly at the strategic safeguarding committee as part of the ongoing organisational risk and the target is to attain 90% compliance or above to achieve green 'RAG' status.

Of noting the Level 4 data from September 2023 to February 2024 was directly related to incorrect alignment of the adult safeguarding specialist's position numbers when they joined the team (incorrectly setting adult safeguarding colleagues with the same requirement as children's safeguarding colleagues) – this has now been rectified with new position numbers and compliance is now accurately presented.

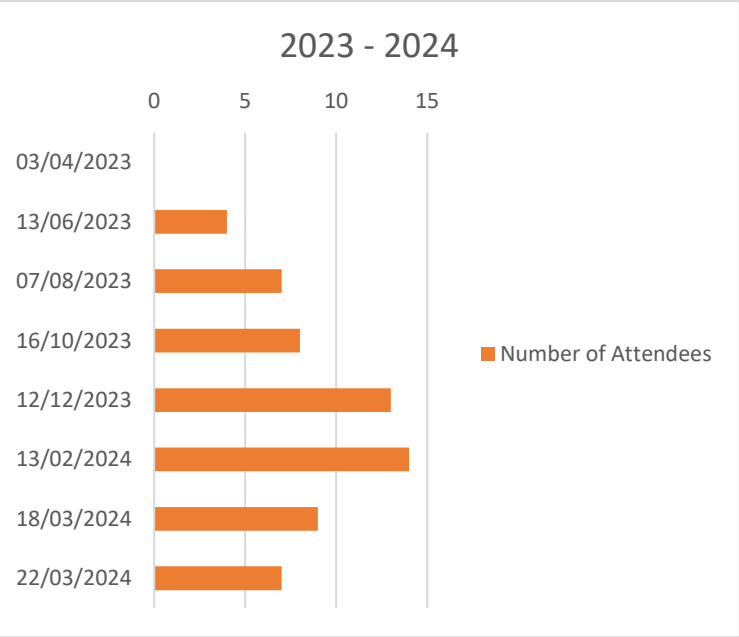
Figure 14: Provides monthly safeguarding training compliance % and highlights the year end position. Training figures have continued to evidence an improving picture.

	Level 1 - Children	Level 2 – Children	Level 3 – Children	Level 4 – Children	Level 1 – Adult	Level 2 - Adult	Prevent
April 2023	96.69	85.10	72.88	100	96.68	88.90	94.64
May 2023	96.40	86.97	73.91	100	96.40	90.06	94.91
June 2023	96.28	75.23	57.56	100	96.30	78.73	95.37
July 2023	95.48	76.56	59.94	100	95.59	78.68	95.47
August 2023	95.71	78.29	62.44	100	95.74	81.91	95.78
September 2023	95.99	81.47	64.39	75	96.02	84.50	96.05
October 2023	96.39	83.56	69.14	75	96.50	85.26	96.02
November 2023	96.37	85.29	70.01	75	96.49	86.83	95.00
December 2023	96.61	86.76	73.42	75 (3/4 com)	96.73	87.66	95.21
Training alignment role cleanse completed and submitted to education team: Each DBTH role was reviewed in line with Intercollegiate roles and responsibility guidance requirement on safeguarding training – this gave an assured position that all DBTH roles were correctly aligned.							
January 2024	96.80	88.37	74.25	75 (3/4 com)	96.88	89.24	95.70
February 2024	96.40	90.46	76.78	60 (3/5 com)	96.57	91.61	95.67
March 2024 (year-end position)	96.21	90.47	77.99	100	96.24	91.26	95.61

Data on training sessions provided:

Safeguarding Children Level 3 Training attendance:

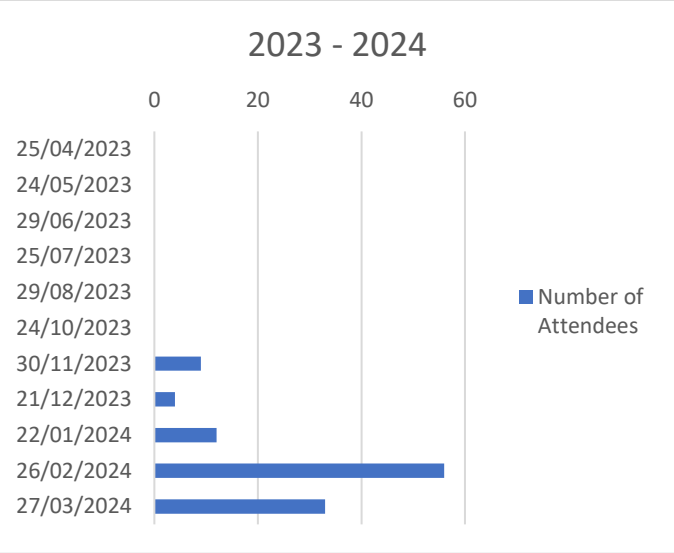
Figure 15: Indicates that during this reporting year there has been 8 offered Children's Level 3 safeguarding full day sessions scheduled. One session was cancelled due to no delegates (3/4/2023). The remaining sessions were completed with vacant spaces on all sessions except February 2024 when the session were booked to full capacity. In response to greater uptake on training from December 2023 the frequency of sessions were increased to respond to demand. The increase in demand correlates with increased focus from Divisional leads to support safeguarding training as a priority.



Date of training	Location of training	Room capacity	Delegates attended
03/04/2023	DRI – Learning Room 2 (Education Centre)	25	0
13/06/2023	BDGH – Blyth Room	14	4
07/08/2023	DRI – Learning Room 2 (Education Centre)	25	7
16/10/2023	DRI – Learning Room 4 (Education Centre)	18	8
12/12/2023	BDGH – Blyth Room	14	13
13/02/2024	DRI – Learning Room 1 (Education Centre)	14	14
18/03/2024	BDGH – Blyth Room	14	9
22/03/2024	DRI – Board Room	24	7

Safeguarding Adults and Children Level 2 Training Attendance

Figure 16: Indicates that during this reporting period 11 Level 2 (Joint Adult and Children's safeguarding) training sessions have been scheduled. The 6 sessions in grey in the table below were cancelled due to no delegate bookings. There has been a significant increase in attendance from Q3, again correlating with Divisional collaboration to prioritise attendance.



Date of training	Location of training	Room capacity	Delegates attended
25/04/2023	DRI – Lecture Theatre	140	0
24/05/2023	DRI – Lecture Theatre	140	0
29/06/2023	BDGH – Board Room	48	0
25/07/2023	DRI – Lecture Theatre	140	0
29/08/2023	DRI – Lecture Theatre	140	0
24/10/2023	DRI – Lecture Theatre	140	0
30/11/2023	DRI – Lecture Theatre	140	9
21/12/2023	BDGH – Board Room	48	4
22/01/2024	BDGH – Board Room	48	12
26/02/2024	DRI – Lecture Theatre	140	56
27/03/2024	DRI – Lecture Theatre	140	33

In addition to the mandatory safeguarding training sessions (Joint Level 2 children / adult and Level 3 Children), the team have also provided input to the preceptorship and international nurses sessions, with support also commencing on the foundation of care sessions in the coming year. They have also delivered 2 (Joint Level 2) sessions to the junior doctors, training 39 additional medical colleagues in total; this has provided additional safeguarding training opportunities. The team have also supported multi-agency partnerships with sessions during November 2023's safeguarding week when sessions on Bruising in non-mobile babies and ICON were delivered and attendance was offered to wider partnership colleagues.

Capturing the voice of our learners:

Below are some of the voices of our learners that have been captured during training evaluation:

20. Responding to NHS England's launch of the NHS Sexual Safety Charter:

In June 2023, NHS England contacted ICB and NHS Trust leads to highlight the increasing number of sexual safety incident reports relating to colleagues and patients across the NHS landscape. This triggered NHS England to launch the sexual safety charter in September 2023: setting out the clear ask for all NHS organisations to sign up and commit to embedding 10 zero tolerance principles by July 2024.

On behalf of the Trust our Chief Nurse signed the charter and the Safeguarding team has driven this work stream to ensure we are charter ready by July 2024. This has been an immense piece of work that has been supported with equal collaboration from our wider teams in People and Organisational Development, Patient Safety, Speak up Guardian, Education, Patient Experience, Equality and Diversity and Communications.

On reflection with other teams across the region, we are in a positive position and at year end we are prepared with a draft policy, reporting flowchart, expected standards of behaviour and training slides. Our focus has been on finalisation of the data capture via Datix, this is progressing and once completed will allow the policy / training slides to be finalised and communication plan to support the launch can then be progressed.

It has been useful to link with NHS England's Assistant Director for the Domestic Abuse and Sexual Violence Programme and show case our progress to date – of which positive recognition has been received.

21. Looking back on our 2023 – 2024 priorities

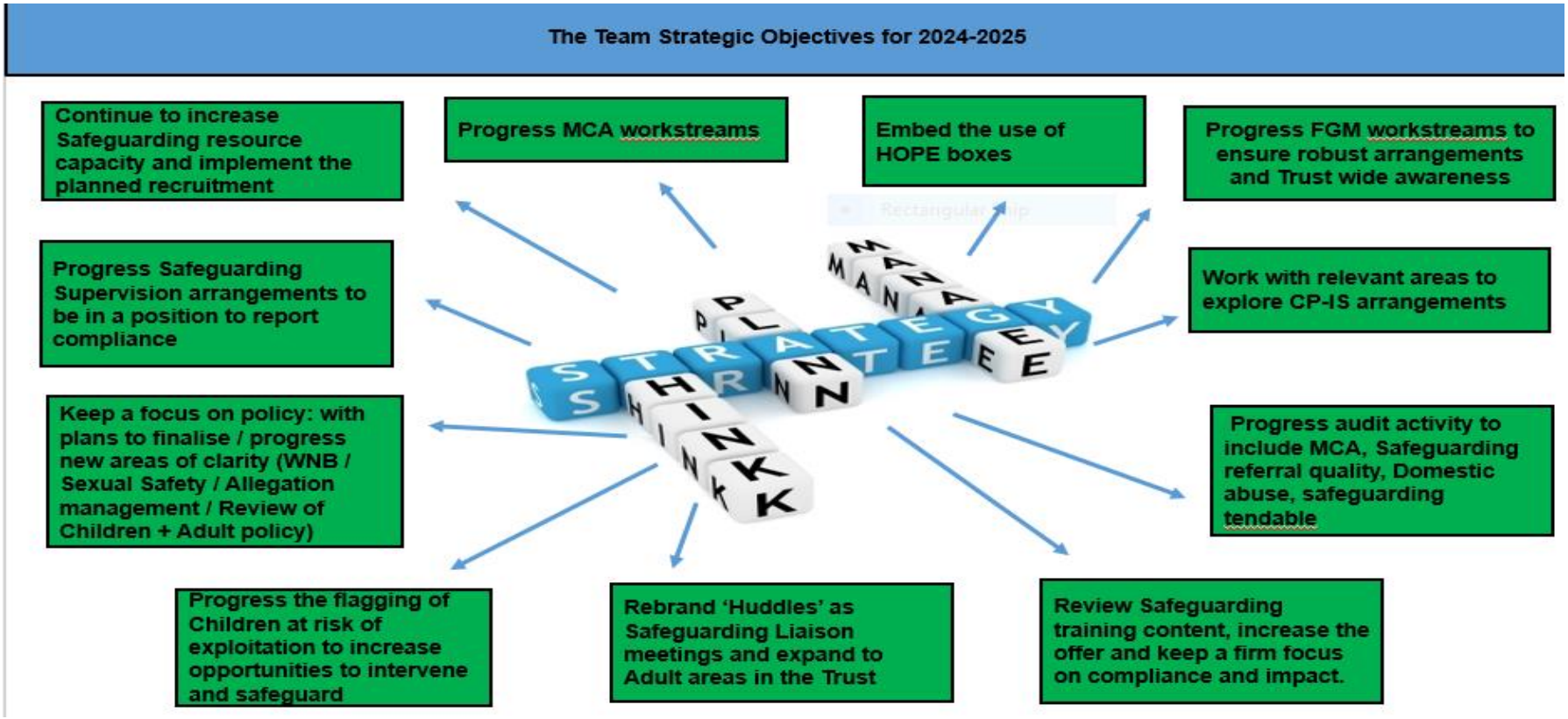
Figure 15: Provides a positive year end position with completion of all priorities that were outlined in the 2023 – 2024 annual report.

Safeguarding Priorities 2023 – 2024: How did we do?

Undertake a gap analysis, develop, and implement a safeguarding work plan to outline the identified priorities including a focus on audits, safeguarding supervision and training	✓
Develop and implement Safeguarding Huddles in order to increase visibility and embed safeguarding opportunities across DBTH.	✓
Recognise good practice and develop a 'Safeguarding Gold Standard Award' for DBTH colleagues who have demonstrated good examples of safeguarding our patients.	✓
Domestic abuse liaison officers to provide bespoke sessions for the preceptor programme (nurses and midwives) and international nurses and attend ED in order to raise awareness and embed professional curiosity.	✓
Review how requests for legal statements for Children's cases are currently managed by the team and align to Adult processes.	✓
Strengthen links with the Trust's Professional Nurse Advocates	✓
To refresh the quarterly and annual report format with the vision of purpose, readability and focusing on key headlines	✓
Progress the vision to increase the safeguarding team capacity.	✓
Review Trust Governance arrangements for Safeguarding.	✓

22. Looking forward to our 2024 – 2025 priorities

Figure 16: The safeguarding team have identified a number of key priorities for 2024 -2025 that will strengthen safeguarding arrangements for the Trust. The team work plan provides the ongoing oversight to ensure these priorities remain in focus, under the scrutiny of the Strategic Safeguarding Group.



23. Conclusion and closing remarks:

As we move forward into 2024, development of this annual report has been an opportunity to reflect on the DBTH safeguarding journey so far. It has allowed for recognition of our achievements and the opportunity to focus our efforts for the year ahead. This report provides assurance to the Trust, its patients and their families, and our partner agencies that safeguarding remains a key priority. During this year, our team has seen a growth in resources as part of our ongoing business planning. We have welcomed two safeguarding adult nurse specialists, a named nurse for safeguarding children, a safeguarding secretary, a deputy head of safeguarding and my own role as Head of Safeguarding.

In February 2024 we were also pleased to welcome our named safeguarding midwives, as they transferred from the maternity team to our safeguarding team. Expanding our resources will continue to be one of our priorities as we stride into another ambitious year ahead.

This report demonstrate the enhanced visibility of the team as our Trust safeguarding resources have expanded, and the impact this has had on increased safeguarding activity across Trust areas. The refreshed arrangements as part of the quarterly Strategic Safeguarding Group (formally known as Strategic Safeguarding Committee) has also contributed to robust Divisional collaboration and increased commitment to prioritise safeguarding training. The correlation between a workforce that has enhanced safeguarding knowledge and an increase in safeguarding referrals is also a clear observation that is outlined in this report. Colleagues' ability to recognise, respond and escalate safeguarding concerns has contributed to enhanced Trust safeguarding arrangements and a greater ability to keep our patients safe.

The priorities outlined for this reporting year have all been achieved and further ambitious priorities are outlined for the year ahead, underpinned by the finer detail outlined within the Trust's safeguarding team work plan. I am confident that the safeguarding team will have another productive and proactive year ahead, embedding practice to continuously improve the outcomes for children, young people and adults at risk.

Denise Phillip
Head of Safeguarding

Appendix 1: Strategic Safeguarding Committee (SSC) Forward Schedule of Business (April 2023 – March 2024)

DBTH SSC Forward Schedule of Business (April 2023 – March 2024)				
For Assurance	**Q1 April – June 2023**	**Q2 July – Sept 2023**	**Q3 Oct – Dec 2023**	**Q4 Jan – March 2024**
SG Quarterly report	✓	✓	✓	✓
Annual Report	✓			
Training Compliance		✓		✓
Safeguarding Self-Assessments	On Completion / when scheduled			
Audit outcomes / action plans	On Completion / when scheduled			
Update on SG risks	✓	✓	✓	✓
Update on SG cases	✓	✓	✓	✓
Good Practice	✓	✓	✓	✓
Outstanding Datix and Divisional responses	✓	✓	✓	✓
Looked after Children's update			✓	
SEND update			✓	
For Approval	**Q1 April – June 2023**	**Q2 July – Sept 2023**	**Q3 Oct – Dec 2023**	**Q4 Jan – March 2024**
Policies	On Completion / when scheduled			
ToR	✓			
Group Membership	✓			
Agree Forward schedule of Business	✓			
Audit action plans	On Completion / When scheduled			
For information	**Q1 April – June 2023**	**Q2 July – Sept 2023**	**Q3 Oct – Dec 2023**	**Q4 Jan – March 2024**
SG Briefings / newsletter	✓	✓	✓	✓
Key SG headlines regional/nation	When available			
Learning from other areas	When available			
Updates from ICB / DBTH Divisions	✓	✓	✓	✓

Appendix 2: 2023 – 2024 Work Plan summary

Safeguarding Work Plan: Position update and summary Feb 2024 – Denise Phillip (Head of Safeguarding)
This has been an ambitious work plan for 2023 – 2024, with key priorities and safeguarding work streams identified following the initial GAP analysis that was undertaken in May 2023. In total there were 23 work streams identified. **Current areas completed:** - **Safeguarding GAP analysis and benchmarking against the national Safeguarding Accountability framework:** this supported a clear understanding of gaps and risks. All risks identified as part of the gap analysis and SAAF benchmark are reflected in our organisation risk register. **(Action 1)** - **Refresh and reframe from Strategic Safeguarding People Board to the current Strategic Safeguarding Committee:** this committee is functioning well, good engagement across divisions that has supported divisional oversight and progression with safeguarding work across the Trust. **(Action 2)** - **Safeguarding meeting commitments:** an overview of all internal and external meeting have been mapped to create a database of commitments, clear representation and ensure work streams are covered. This exercise indicated the high number of commitments that the Safeguarding team have to partnership and organisational work streams. It maximises opportunities to champion safeguarding, share learning, receive good practice points from other areas and ensure the voice of DBTH is represented locally, regionally and nationally. **(Action 3).** - **Outline of all Safeguarding cases:** A live case matrix is now used for knowledge on the status of safeguarding cases – this supports key points of learning and information to be shared at SSC. **(Action 4).** - **Legal statement process for children and unborn babies:** This has been reviewed and DBTH legal team now oversight the requests, quality assurance and return of legal statements. This ensures we have a safe process within the Trust and has evidenced ongoing collaboration between Legal and Safeguarding teams in DBTH. **(Action 5)** - **Enhance SG team frameworks:** supportive frameworks and regular team meetings / 1-1's now established. **(Action 7)** - **DA Liaison officer work stream:** Significant work completed including: reporting flowcharts, links with PNA's, attendance at preceptor and international nurse programmes. Regular DA champion sessions and recruitment of DBTH DA champions increasing each month. Successful collaboration with Doncaster local authority to issue safety equipment from DBTH. Evaluation tool developed to seek feedback from colleagues on support of DA liaison officer in their professional roles and from colleagues personally using the DA support services. **(Action 8)** - **Safeguarding Huddles:** Established across DBTH sites with positive feedback and enhanced visibility of the SG team. **(Action 9)**

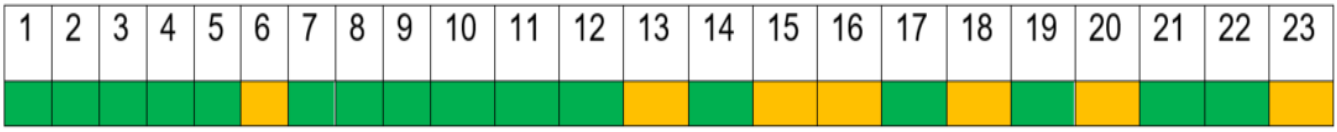
- **Raise the profile of SG across Trust sites:** A successful programme of work has been undertaken, including development of SG Gold Standard awards, huddles, monthly briefings, new style quarterly reporting. Presence at internal and external meetings. Stalls outside cafeteria. **(Action 10)**
- **Safeguarding standards:** The requested self – assessment was undertaken and completed for Doncaster ICB (continued oversight on areas that remain in progression). Yearly requirement for this submission. Notts Section 11 self – assessment will be submitted in 2024 **(Action 11)**
- **Audit schedule:** CP-IS / legal processes registered but decision made to pause until 2024 – 2025 due to change in Children's lead and colleagues in legal team. They will be added to 2024 – 2025 audit schedule. Decision made for FGM audit not to be progressed – for this to be a gap analysis instead (initial part of this commenced 8.2.24). ICON audit in progress, DA quarterly audit embedded and progressing well. MCA quarterly audit registration submitted to commence Q1. **(Action 12)**
- **MCA / DOLS:** the initial phases as identified have been completed, this has included enhancing SG adult team resources, commencing programmes of support and reviewing training content. This will continue to be on the 2024 – 2025 work plan as ongoing work required to support 360 action plan, outcomes of QI project and enhanced provision in the team with a specific focus on MCA/DoLS **(Action 17)**
- **Transition of Named Midwives for Safeguarding:** Transition date 27th Feb 2024 **(Action 19)**
- **Review of SG Secure Drives:** completed **(Action 21)**
- **Review of Intranet and External internet SG information:** External content updated to ensure SG team information is correct. Work progressing with review of intranet (this will be an ongoing piece of work of continual improvement and review). **(Action 22)**

Ongoing areas that will transfer to 2024 – 2025:

- **Safeguarding Supervision arrangements:** Significant progress made but this is an ongoing work stream. Successes in scoping, securing and funding SG supervisor training (3 cohorts will have been completed in total by year end of Q4 – increasing our SG supervisor capacity greatly. Compliance matrix developed and has been shared with relevant divisions to support Divisional data capture with ongoing work in progress for capturing compliance rates on ESR – this can only be progressed when the policy has been reviewed and frequency requirements of supervision agreed (update in progress). Next steps planning has been delayed to ensure our newly appointed Named Nurse for Children's safeguarding can lead this work stream, with wider SG team support. **(Action 6) Likely new target date will be set to Q2 2024 -2025.**
- **SG Policies for updating:** Good progress made on FGM / Prevent / Managing visiting dignitaries / Bruising pathways for non-mobile infants. Scoping completed on WNB, decision to progress this policy as a standalone (in final stages of drafting). Children's policy review date extended to include Bruising and FII/perplexing presentations and to support newly appt'd named nurse to oversight. Scoping undertaken for Sexual Safety policy – progress and in draft format. Decision made for LADO/PiPoT to be a stand-alone policy. Policy work transferred to 2024 – 2025 work streams will be: WNB / LADO and PiPoT / Children's Policy / Sexual safety (**Action 13**)
- **Flagging of children discussed at MARAC and children at risk of exploitation:** MARAC flagging SOP finalised and go live date finalised **(Action 14).** Exploitation flagging processes delayed to allow for new named nurse to induct into role. This will transfer to 2024 – 2025 work stream **(Action 15)**
- **Review of SG Training arrangements:** Significant progression made including increase across all levels of compliance (particular progression in L2/3 children and L2 adults. DERICK system allows for greater oversight of Trust compliance. Divisions have made significant efforts to engage colleagues to access training. Additional training sessions have been scheduled to support demand. MCA eLearning content reviewed and ReST approval panel has agreed progression with adoption of elfh packages, go live date awaited. Work ongoing to capture the 'job specific additional hours required for some roles with L3 requirements (additional 4 hours on top of core L3 training.) this will transfer to 2024 -2025 work stream. **(Action 16)**

- **FGM:** Trust lead identified and initial commencement of gap analysis. Meetings scheduled to look at wider partnership processes and gain assurances on current DBTH practice. Recommendation for Trust risk to be registered until assurances in place. Trust FGM lead will progress work streams into 2024 – 2025 work plan. **(Action 18)**
- **CP-IS:** Significant delay with this action but there has been limited national steer on next step changes. ICB (Notts) are linking with NHS E for further steer. Links made with CP-IS lead in Doncaster. Further work needed with ICB lead to understand multi-agency picture. Scoping and assurance needed on DBTH processes and this will form part of 2024 – 2025 work plan. **(Action 20)**
- **Sexual Safety: this action was added in September 2023.** Significant progress made in comparison to national and regional picture. DBTH working group established, draft policy / behaviour standards / reporting flowchart / training slides in development. Data capture work streams being explored. Target Trust implementation date is July 2025. When draft documents have been agreed by working group, next steps will include linking with Divisional leads. Action plan in place as part of working group**. (Action 23)**

Overarching key of Work plan completion – amber areas will transfer to 2024 – 2025:



Appendix 3 – Meet the DBTH Safeguarding team:

Meet the DBTH Safeguarding Team

Dr Lavleen Chadha
Named Doctor for Safeguarding Children

Denise Phillip
Head of Safeguarding

Amanda Timms
Deputy Head of Safeguarding

Dr Bushra Ismaiel
Designated Doctor for Safeguarding Children

Natalie Jacques
Specialist Nurse for Safeguarding Adults

TBC
Lead Nurse for Safeguarding Adults

Deborah Searson
Specialist Nurse for Safeguarding Adults

Sean Humphreys
Domestic Abuse Liaison Officer

Caitlyn Porter
Domestic Abuse Liaison Officer

Debbie Rees-Pollard
Named Midwife for Safeguarding

Colleen Biltcliffe
Named Midwife for Safeguarding

Kim Armistead
Specialist Nurse for Safeguarding Children

Vicki Baker
Named Nurse for Safeguarding Children

Anne Lundy
Specialist Nurse for Safeguarding Children

Susie Bullock
Safeguarding Secretary

What is our role?

As a Safeguarding team we provide safeguarding support, advice, safeguarding supervision and safeguarding training for colleagues working with adults and children (including maternity services) across Trust areas.

We ensure that safeguarding policies and procedures are in place in order to support safe practice to all patients whilst they are accessing care from service areas.

As a team we work closely with Partner agencies to ensure robust safeguarding arrangements are in place for children and adults in a 'think family' approach. We contribute as a Partner agency to shape and influence, local, regional and national safeguarding arrangements.

We work across South Yorkshire and Nottinghamshire to share practice, develop a shared safeguarding vision and champion a coordinated safeguarding response.

What do we offer?

The team's core hours of work are Monday – Friday (9-5pm). Outside of these hours safeguarding support resources can be found on the HIVE. We support the multi-agency safeguarding partnerships and boards to undertake reviews of serious safeguarding cases, domestic homicides and allegations that may have been made against our Trust; liaising with relevant Trust areas to provide and share information.

We support Trust colleagues with any Safeguarding advice or support that may be required to support care of an adult or child, answering any safeguarding questions that colleagues may have.

We provide Safeguarding training on a range of topics for Trust colleagues and opportunities to access safeguarding supervision.

We disseminate key local and national safeguarding information across Trust areas and signpost to internal and external safeguarding training opportunities.

We are the interface for partners and support safe sharing of safeguarding information when necessary to safeguard an unborn baby, child, young person or adult at risk.