Adult Safeguarding Annual Report

1st April 2024 – 31st March 2025

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Named Professional Adult Safeguarding

Content

1. Introduction

This report highlights the work undertaken by the Royal United Hospitals Bath NHS Foundation Trust (RUH) in respect to its commitment and responsibilities in maintaining the safety and protection of adults at risk of abuse and neglect.

The RUH is required under statute and regulation to have effective arrangements in place to safeguard and promote the welfare of adults at risk of harm and abuse in every service that they deliver.

This report covers the period from 1st April 2024 to 31st March 2025 and provides assurance that systems are in place to ensure that patients using Trust services are effectively protected, and that staff are supported to respond appropriately where safeguarding concerns arise

2. Governance Arrangements

The Bath and Northeast Somerset (B&NES) Community Safety and Safeguarding Partnership (BCSSP) and Wiltshire Safeguarding Vulnerable People Partnership (SVPP) are the key statutory mechanisms for agreeing how relevant organisations in each local area will cooperate to promote the welfare of adults at risk and safeguard them from the risk of being abused. Senior representation is held at relevant subgroups for both partnerships.

The Chief Nursing Officer is the Executive Lead for safeguarding and has responsibility to ensure that the Trust contribution towards safeguarding is discharged effectively throughout the organisation.

We have a nominated Non-Executive Director on the Board who is a safeguarding champion.

The Trust has an Associate Director for Vulnerable People who leads on the wider safeguarding and vulnerability agenda within the Trust.

The BANES, Swindon and Wiltshire Integrated Care Board (BSW ICB) Designated Nurse for Adults (BANES locality) provides supervision oversight to the Lead Professional Adult Safeguarding and has standing invitations to the safeguarding committee ensuring oversight of the Trust's safeguarding work.

2.1 Vulnerable People Committee (VPC)

Clinical Outcomes and Quality Assurance reports are produced quarterly and submitted to BaNES, Swindon and Wiltshire Integrated Care Board (BSW ICB). These reports monitor adult safeguarding activity against the Quality Schedule Key Performance Indicators. Performance and key messages are reported to VPC quarterly.

The Joint Operational Adult and Children's Safeguarding Prevent Group meet quarterly and seek assurance that all safeguarding commitments and responsibilities for adults and children are met. It oversees the work of the Safeguarding Team and safeguarding activity across the Trust and seeks assurance that there are suitable processes in

place to ensure that safeguarding arrangements are reviewed and updated on a regular basis. This group reports to VPC.

VPC is the focal point of Safeguarding governance and assurance and is chaired by the Chief Nursing Officer. The purpose of this is to provide a Trust overview of the safeguarding systems and processes and ensure that this agenda remains core to the Trust's values and that the Trust remains compliant with all statutory and regulatory requirements. Summary highlights are reported to the Quality Assurance Committee and Trust Board.

2.2 Care Quality Commission (CQC)

Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect, as well as promoting good practice for responding to concerns and partnership working.

The Care Quality Commission (CQC) role is to monitor, inspect and regulate services to make sure they meet the fundamental standards of quality and safety.

The Adult Safeguarding Team provide updates to CQC through the RUH engagement sessions.

3. Learning Development and Training

The Adult Safeguarding: Roles and Competencies for Health Care Staff Second Edition (2024) was published on 29th July 2024.

All Adult Safeguarding training is aligned to this document, training is provided by eLearning (Level 1 and Level 2), and Level 3 is a full day classroom-based training. The Level of training is commensurate to your role and required competencies.

All training outline key principles, roles, and competencies necessary for identifying, preventing, and responding to adult abuse and neglect.

Adult Safeguarding training ensures healthcare staff have the appropriate knowledge and skills to safeguard vulnerable adults.

Table 2: Mandatory Training Compliance 2024-25

Subject	Target Compliance %	Q1 %	Q2 %	Q3 %	Q4 %
Level 1 Adult Safeguarding	90%	92.93%	91.58%	91.28%	92.65%
Level 2 Adult Safeguarding	90%	92.08%	91.08%	90.39%	90.80%
Level 3 Adult Safeguarding	90%	37.97%	52.41%	71.58%	79.38%
Prevent awareness	90%	96.61%	92.36%	91.68%	92.53%
Prevent WRAP 3	85%	94.27%	74.15%	86.20%	89.99%

Training evaluations are demonstrating that staff feel more confident on how to raise safeguarding concerns and the importance of culture 'the way we think and do things' has a huge part to play in whether all people are safe.

An acute hospital that encourages open conversations about safeguarding, and where suspected or alleged abuse and neglect can be readily reported, will be well placed to prevent incidents and respond effectively.

4. Supervision and Reflective Practice

All staff have access to informal support and advice from the adult safeguarding team. This is commonly accessed by phone, email and face to face within wards and departments. Advice focuses on assessment of safeguarding risk supporting referral processes as well as reviewing care options in response to safeguarding risk.

The adult safeguarding team have line management supervision meetings to share learning and concerns around complex cases.

The Associate Director for Vulnerable People provides monthly and ad hoc supervision for the Named Professional for Adult Safeguarding.

The Named Professional Adult Safeguarding Lead provides supervision to the Director of Nursing at the Sulis Hospital.

5. Polices and Guidance

The policies are all up to date and reviewed at least 3 yearly or when there are changes in legislation.

The Adult Safeguarding Policy also refers to the SVPP or BCSSP policy and procedure guidance.

6. Safeguarding Activity

6.1 Harm Events

The Safeguarding Adults team received a total 1013 referrals from clinical services across the Trust in 2024/25. This is an increase of 8% from last year.

Staff are being professionally curious and whilst many referrals do not meet the criteria for formal safeguarding, it enables the team to review through a safeguarding lens and respond and signpost appropriately.

Activity	Q1	Q2	Q3	Q4	TOTAL
Advice	12	12	16	23	63
Complaint	0	0	0	0	0
Discriminatory	0	0	1	0	0
Domestic Abuse	58	61	52	92	263
Financial	14	12	15	10	51
Honour-based Violence	0	0	0	0	0

Activity	Q1	Q2	Q3	Q4	TOTAL
Modern Slavery	3	2	1	1	7
Neglect	32	32	45	32	141
Organisational	4	1	3	2	10
Physical	9	16	17	9	51
Prevent	0	0	0	0	0
Psychological	7	7	13	5	32
Public Protection	0	0	0	0	0
Self-Neglect	93	75	104	109	381
Sexual	2	3	3	5	13
TOTAL	**234**	**221**	**270**	**288**	**1013**

Self-neglect, domestic abuse and neglect continue to form the highest percentage of referrals made.

An ongoing theme identified in relation to the categories in the above table is the high degree of complexity and risk which involves multiple agencies and the time taken by the team to scrutinise and assess each concern.

Allegations against the Trust
Section 42 of The Care Act (2014) establishes the process of local authority led Safeguarding Adults Enquiry, which may be in relation to concerns about abuse or neglect within a health or care setting.

The Trust received 96 allegations (compared to 84 in 2023/2024). These concerns were raised about care services delivered by the RUH. The Adult Safeguarding team works closely with B&NES Local Authority to ensure that we respond effectively to identify areas that need further investigation.

To this end, regular face-to-face meetings take place to review progress on all such reports with the local authority.

Of the 96 allegations: 54 were referred to B&NES Local Authority (The Care Act 2014)

A central part of the review process for these cases is to ensure transparency and consistency between any Trust Governance processes and to avoid duplication and possible miscommunication when managing parallel processes. For example, if a case has been raised involving pressure related skin damage, it is important that the response undertaken within the Datix incident management process is clearly integrated into any Section 42 Enquiry.

In relation to the allegations which did not meet the threshold for further safeguarding enquiries, it was considered that the actions and learning already implemented by the Trust following initial internal investigations was appropriate and no further investigations were required.

7. Key Risks and themes arising from allegations

7.1 Discharge Related Concerns

- Individual discharged too early (before medically optimised).
- Lack of involvement and engagement of relevant others (i.e. professionals, care providers, family and friends)
- Failure to consider and apply MCA and appropriate Best Interests (with a specific focus on self-neglect)
- Poor sharing of information (including failure to provide appropriate documentation
- Failure to supply correct prescription and medication
- Inaccurate and/or delayed discharge summaries.

How have these been addressed?

To further address allegations and themes around Discharges, the safeguarding team will be involved in Home is Best strategy. A standing agenda item for the Community Subgroup is 'Safeguarding'. The Lead Professional for Safeguarding Adults will sit on the subgroup and will provide a summary of key themes in relation to allegations against the Trust around discharge. The group will examine the themes and issues to ensure robust analysis of risk and action required. The group will identify learning and ensure oversight of embedding learning into practice through the relevant governance structures, including the Safeguarding Joint Operational Group.

8. Effective Multi Agency Working

The overarching purpose of the Safeguarding Partnerships is to ensure that adults with care and support needs are safeguarded from abuse and neglect.

As part of the Trust's adult safeguarding responsibilities, we participate in multi-agency reviews and have Trust representation on the Safeguarding Partnerships subgroups as below:

- Domestic Abuse Multi-Agency Risk Assessment Conference (MARAC) in both BaNES and Wiltshire
- Member of Safeguarding Vulnerable People Partnership (SVPP) Domestic Abuse Local Partnership Board
- Member of BaNES Operational Exploitation Meeting
- Safeguarding partner agency meetings in both BaNES and Wiltshire.
- National Named Professionals Network.
- Southwest Prevent Network Meetings.
- Community in Practice Mental Capacity Forum
- SVPP Senior Partners Forum

9. Statutory Reviews

All NHS organisations that are asked to participate in a statutory review must do so.

Statutory reviews are processes for learning and improvement and all health providers are required to provide and share information relevant to any statutory

review process. Safeguarding Adult Reviews (SAR) and Domestic Abuse Related Death Reviews (DARDRs) formerly known as Domestic Homicide Reviews (DHR) form an essential part of the multi-agency partnerships safeguarding strategies

The extent of RUH involvement in the statutory review process will depend on the Trust's involvement in the case. This most commonly includes providing a comprehensive chronology and practitioners involved in the case participate in practice review workshops. A representative for the Trust will also be a member of the oversight panel for the review.

Learning from local and national enquiries, SAR and DARDRs, alongside case learning reviews is incorporated into training.

9.1 Safeguarding Adult Reviews (SARs)

During 2024-2025 the adult safeguarding team has completed Agency Involvement Summaries and Chronologies for 10 notifications for consideration of Safeguarding Adult Reviews (SARs), 1 for BaNES Community Safety and Safeguarding Partnership (BCSSP) and 8 for Wiltshire Safeguarding Vulnerable People Partnership (SVPP) ad 1 for South Gloucestershire.

9.2 Domestic Abuse Related Death Reviews (DARDRs) formerly known as Domestic Homicide Reviews (DHRs)

Domestic Homicide Reviews (DHRs) have been renamed to Domestic Abuse Related Death Reviews (DARDRs). This change reflects a broader scope of review to include deaths from domestic abuse, including suspected suicides, not just homicides. The name change was confirmed in the Victims and Prisoners Act 2024.

The team is currently part of the panel for 1 DARDR in BANES and 1 DARDR in Wiltshire.

10. Applications for Deprivation of Liberty Safeguards (DoLS)

Local authorities, as supervisory bodies, continue to hold overarching responsibility for DoLS authorisations. Therefore, they continue to hold most of the legal risk. The RUH, as a managing authority, should be mindful of ensuring compliance with the Human Rights Act (1998) as a key component of these safeguards. Although managing authorities cannot lawfully authorise a deprivation of liberty, they are not exempt from legal challenge if the Mental Capacity Act (2005), and particularly its interaction with the Human Rights Act, is not applied appropriately during a patient's stay in hospital.

There were 997 DoLS applications made during the year (2024/2025), an increase of 24 applications from the previous year (2023/2024).

The number of Standard DoLS authorisations continues to be very low. This reflects the adoption of the 'SWADASS prioritisation tool' amongst local authorities which assigns a lower priority to most people in hospital who are considered deprived of their liberty. A lower priority for allocation is reflective of the relatively short time that patients stay in hospital in comparison to those people who reside in care homes and local authorities assigning their limited resources accordingly.

11. Safer Recruitment

The Disclosure and Barring Policy is published. The policy sets out the requirements of the Trust to check for criminal records obtained through the Disclosure and Barring Service (DBS).

12. Organisational Risks

The following risk in relation to safeguarding adults training is on the Trust Risk Register, with clear trajectories. The current risk level is low.

Safeguarding Adult Level 3 Training Compliance dropped to 30% in April 2024. The key staff initially identified are compliant, widening the audience will only strengthen and further embed Adult Safeguarding. Trajectories indicate we will reach 90% compliance in the Autumn (2025).

13. Achievements 2024-2025

- Independent Domestic Abuse and Sexual Violence Advisor (IDSVA) started in the Trust on Monday 2nd December 2024.
  The post holder is raising the profile of the Trust's IDSVA service and ensuring all staff know how to refer accurately into the service and increasing signposting across the Trust for community Domestic Abuse/Sexual Violence services for both staff and patients.
- Development of the Maternity, Children and Adults Safeguarding Strategy unpinned by the Trust Vulnerable Peoples Strategy.
- The safeguarding adult team delivered 25 full day Level 3 safeguarding face to face sessions to 539 staff during 2024/25. We remain on trajectory to have reached 90% compliance in the Autumn.
- Reduction of Hospital Acquired Pressure Ulcers that meet the criteria for safeguarding.
- Continue to align the adult and child agenda to focus on the 'Think Family' agenda.
- Reestablished representation and participation in BANES and Wiltshire Multi Agency Risk Assessment Conference (MARAC)
- Representation for the Trust on the BaNES Community Safety and Safeguarding Partnership Quality and Performance subgroup.
- Representation of the Trust on the Wiltshire SVPP Senior Partners Forum

14. Safeguarding Priorities for 2025–2026

- To develop an Adult Safeguarding Supervision Policy and an action plan in relation to the delivery of supervision for adult facing care provision within the Trust.
- Explore the introduction of Safeguarding Adults Champions to help to share learning and embed safeguarding principles.
- Achieve level 3 adult safeguarding and Prevent training compliance.

- Continue to develop quality assurance mechanism through thematic auditing to ensure assurance of the effectiveness of safeguarding activity and that practice is continuously improving patient experience and outcomes.
- To address allegations and themes around Discharges, the safeguarding team will be involved in Home is Best. A standing agenda item for the Community Subgroup is 'Safeguarding'. The Lead Professional for Safeguarding Adults will sit on the subgroup. She will provide a summary of key themes in relation to allegations against the Trust around discharge. The group will examine the themes and issues to ensure robust analysis of risk and action required. The group will identify learning and ensure oversight of embedding learning into practice through the relevant governance structures, including the Safeguarding Joint Operational Group**.**
- The dedicated role of Professional Lead for MCA/DoLS has been appointed and starting in June 2025. Part of their role will be to support improvements in compliance with CQC Regulation 13 (5) across inpatient services. As such, we should expect the number of DoLS applications made to local authorities to rise in subsequent quarters as the new role becomes more embedded (which would be a positive improvement). The Professional Lead for MCA/DoLS will provide separate regular assurance reports associated with their role to Vulnerable People Committee (VPC) once key metrics and priorities have been established**.**
- IDSVA role to build professional connection with MARACs, community DA services and other relevant outside agencies (including BCSSP and DALPB).
- Embedding role of Named Medic for Safeguarding Adults

15. Concluding Comments

The Adult Safeguarding Team are committed to ensuring that the Trust effectively executes its duties and responsibilities in adult safeguarding. The Team adopts a whole systems approach to its work with community partners as well as those within the Trust, to ensure that a multi perspective 'Think Family' approach is adopted.

This report demonstrates safe and effective practice in relation to our statutory and regulatory agenda, with good compliance to internal and external safeguarding standards. The team will continue to build on existing work to ensure Trust culture around safeguarding processes are robust and effective and remain aligned with core Trust values.

References: *Adult Safeguarding: Roles and Competencies for Health Care Staff* London RCPCH, *Second edition: July 2024*

Appendix 1

Effective
Well Led
Safe
Responsive
Caring

Safeguarding Adults Monitoring Form 2024-2025

NHS Funded Service Name	**Royal United Hospitals Bath NHS Foundation Trust**

		Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total/ Average
		April / May / June	**July / Aug / Sept**	**Oct / Nov / Dec**	**Jan / Feb / March**	
Appropriate Training, Skills, and Competencies - Standard 3 - The minimum training compliance target is 90%.						
New staff joining the organisation and have received Level 1 awareness training - adults and children within 3 months	***Number***	Not collected at present	Not collected at present	Not collected at present	Not collected at present	
	Percentage	Not collected at present	Not collected at present	Not collected at present	Not collected at present	Not collected at present

Safeguarding adult training level 1 uptake	***Number***	5571	1729	1768	1764	
	Percentage	92.93%	91.58%	91.28%	92.65%	92.11%
Safeguarding adult training level 2 uptake	***Number***	3769	3064	3056	3048	
	Percentage	92.08%	91.08%	90.39%	90.80%	91.09%
Safeguarding adult training level 3 uptake	***Number***	243	359	481	539	
	Percentage	37.97%	52.41%	71.58%	79.38%	60.34%
Safeguarding adult training level 4 uptake	***Number***	1	1	1	1	
	Percentage	100%	100%	100%	100%	100%
Comments on training						
Safeguarding children training level 1 uptake	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	

	Percentage	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	
Safeguarding children training level 2 uptake	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	
	Percentage	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	
Safeguarding children training level 3 uptake	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	
	Percentage	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	
Safeguarding children training level 4 uptake	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	
	Percentage	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	
Comments on training	Please use this section to add any extra information. For eg: please provide details, if able to, on the number and percentage of Safeguarding Children training update at Core and Specialist level.					

Domestic Violence/ FGM / CSE / Modern Trafficking **and Slavery training uptake. Not currently collected but would be obtained through Level 3 (or at earlier levels) records.**	***Number***	243	359	481	539	
	Percentage	37.97%	52.41%	71.58%	79.38%	60.34%
Prevent Level 2 training uptake	***Number***	5792	4463	4473	4458	
	Percentage	96.61%	92.36%	91.68%	92.53%	93.30%
Prevent Level 3 training uptake	***Number***	3867	872	1018	1070	
	Percentage	94.3%	74.2%	86.2%	90.0%	86.2%
MCA DoLS training for all relevant staff	***Number***	243	359	481	539	
	Percentage	37.97%	52.41%	71.58%	79.38%	60.34%
Effective Supervision, Reflective Practice & Case Consultation - Standard 4						
Supervision sessions received by Safeguarding Specialist Practitioner (level 3 Practitioners) Record Adult, Maternity and Children Supervision separately and by	***Number***	2	2	2	2	
	Percentage	100%	100%	100%	100%	

specialist group where appropriate						
Safeguarding supervision received by Sexual Health **Only complete if you employ Sexual Health staff**	***Number***	Not applicable	Not applicable	Not applicable	Not applicable	
	Percentage	Not applicable	Not applicable	Not applicable	Not applicable	
Comments on implementing this standard						
Effective Multi-Agency Working - Standard 5 - only complete if applicable; otherwise submit a nil return						
Initial Adult S42 Meetings invited to	***Number***	3	7	5	6	21
Initial Adult S42 Meetings attended	***Number***	3	7	5	6	21
	Percentage	100%	100%	100%	100%	100%
Adult Protection reports requested by Local Authority	***Number***	Section 42 Enquiry reports 2	Section 42 Enquiry reports 0	Section 42 Enquiry reports 2	Section 42 Enquiry Reports 4	8
Adult Protection reports submitted to the Local authority	***Number***	Section 42 Enquiry reports 2	Section 42 Enquiry reports 0	Section 42 Enquiry reports 2	Section 42 Enquiry Reports 4	8

	Percentage	100%	100%	100%	100%	100%
Review Meetings invited to	***Number***	7	2	5	4	18
Review Meetings attended	***Number***	7	2	5	4	18
	Percentage	100%	100%	100%	100%	100%
Review Meeting reports requested	***Number***	7	0	5	4	16
Review Meeting reports completed / provided	***Number***	7	0	5	4	16
	Percentage	100%	100%	100%	100%	100%
Safeguarding Adult referrals made using section 42(1) (a) & (b) of the Care Act 2014	***Number***	24	17	19	9	69
Comments on implementing this standard						

CP Strategy Meetings invited to all data available	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
CP Strategy Meetings attended	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	Percentage					
ICPCs / RCPCs invited to	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
ICPCs / RCPCs attended	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	Percentage					
ICPC / RCPC reports requested	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
ICPC / RCPC reports submitted to the Local Authority	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	Percentage					
CP Core Groups Invited to	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team

CP Core Groups attended	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	Percentage					
Referrals to Children's Social Care or / triage or / MASH (depending on locality)	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Referrals for Early Help, CAF	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Comments on implementing this standard						
Complete midwifery section if you attend any						
Referrals to social care for unborn infants - child protection	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Referrals to social care for unborn infants - Early Help	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Referrals to the children's social care for pregnant women under 18 years old	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team

Midwifery referrals to the Family Nurse Partnership, (by Local Authority Area)	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Unborn infants subject to a child protection plan	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Pregnant women under 18 years subject to a child protection plan	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
CP Strategy Meetings attended	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
ICPCs / RCPCs invited to	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
ICPCs / RCPCs attended	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	Percentage	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
ICPC / RCPC reports requested	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
ICPC / RCPC reports submitted to the Local Authority	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	Percentage	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team

CP Core Groups Invited to	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
CP Core Groups attended	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	Percentage	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
CIN meetings invited to	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
CIN meetings attended	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	Percentage	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Comments on implementing this standard						
Children not brought to appointments	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	Percentage	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Number of adults presenting that are subject to FGM (only complete if you have actioned this)	***Number***	0	0	0	0	0

Reporting Incidents - Standard 6						
How many incidents were reported as safeguarding concerns? Report by Local Authority area	***BANES Number***	4	4	3	3	14
	SWINDON Number	0	0	0	0	0
	WILTSHIRE Number	11	10	10	8	39
	outside BSW	4	3	4	0	11
Engaging in Statutory Reviews and Multi-Agency Working - Standard 7						
Attendance at Partnership Board Meetings (only complete if you attend or are a member of any subgroups)	***Number***					
Active SARs (under investigation) (that you are involved in)	***BANES Number***	3	0	0	1	4
	SWINDON Number	0	0	0	0	0
	WILTSHIRE Number	0	0	0	2	2

	outside BSW	0	0	0	0	0
Active CSPRs / Rapid Reviews (under investigation) (that you are involved in)	***BANES Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	SWINDON Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	WILTSHIRE Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	outside BSW	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Active DHRs (under investigation) (that you are involved in) Number of cases escalated using the Partnership's escalation policy (submit nil returns if no escalation during this period)	***BANES Number***	0	1	1	1	3
	SWINDON Number	0	0	0	0	0
	WILTSHIRE Number	0	0	0	0	0
	outside BSW	1	1	1	1	4

Use of the Safeguarding Partnership Escalation Policy (submit nil returns if no escalation during this period)	***BANES Number***	0	0	0	0	0
	SWINDON Number	0	0	0	0	0
	WILTSHIRE Number	0	0	0	0	0
	outside BSW	0	0	0	0	0
Managing Safeguarding Allegations Against Staff - Standard 9 and 12						
The number of referrals made to LADO/ DOFA/ PIPOT/Prevent related reported by Local Authority area	***BANES Number***	1	0	0	1	2
	SWINDON Number	0	0	0	0	0
	WILTSHIRE Number	0	0	0	0	0
From the number of referrals reported above, how many triggered a section 42 (2) enquiry? Reported by Local Authority area	***BANES Number***	1	0	0	1	2
	SWINDON Number	0	0	0	0	0

	WILTSHIRE Number	0	0	0	0	0
Safeguarding Adults criteria are applied to all new category 3 and 4 pressure ulcers - Standard 14						
Pressure ulcers assessed against adult safeguarding criteria, screening tool applied & a safeguarding referral made	***BANES Number***	0	0	0	0	0
	SWINDON Number	0	0	0	0	0
	WILTSHIRE Number	1	0	0	0	1
Looked After Children (CLA)						
For those providing specific CLA Health services						
Health Assessments carried out - Initial 0-5 years old	***BANES Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	SWINDON Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	WILTSHIRE Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Health Assessments carried out - Review 0-5 years old	***BANES Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	SWINDON Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team

	WILTSHIRE Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Health Assessments carried out - Initial 5+ years old	***BANES Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	SWINDON Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	WILTSHIRE Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Health Assessments carried out - Review 5+ years old	***BANES Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	SWINDON Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	WILTSHIRE Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Initial Health Assessments - Total to be completed	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Initial Health Assessments completed within 28 days of going into care	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Initial Health Assessments completed within 28 days of notification	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team

Initial Health Assessment Appointments offered within 28 days of notification	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Number of those children who have declined assessment/ where not brought	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Onward referrals for health services	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Annually provide a breakdown of servces referred onto i.e., CAMHS, Smoking cessation, SALT, other	***CAMHS Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	Smoking cessation Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	SALT Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	Other Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Total CLA open to service	***BANES Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	SWINDON Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	WILTSHIRE Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team

CLA: Out of Area with overdue Assessments	***IHAS Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
	RHAS Number	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Adoption Medicals- Initial	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Adoption Medicals- Follow up/update	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Requests for Initial Health Assessments from <u>other areas</u> for children placed in Local Authority area.	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Requests for Review Health Assessments from <u>other areas</u> for children placed in Local Authority area: 0-5 years	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
All other Provider Services who have contact with Children						
Identified CLA referrals to your service	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Number of CLA accepted into your service	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team
Number of those who Decline/ Where not brought	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team

Feedback from CLA users and their carers to your service	***Number***	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team	Not reported by Adult Team