

Safeguarding Children & Young People Annual Report

1st April 2020 – 31st March 2021



Mike Menzies
Named Nurse Safeguarding Children & Young People

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1. Introduction

Safeguarding children – the action we take to promote the welfare of children and protect them from harm is everyone’s responsibility. Everyone who comes into contact with children and families has a role to play. Ultimately, effective safeguarding of children can only be achieved by putting children at the centre of the system and by every individual agency playing their full part, working together to meet the needs of our most vulnerable children (Working Together, 2018).

All NHS providers are expected to comply with legislation and statutory guidance, this includes:

- Children Act 1989;
- Children Act 2004;
- Working Together to Safeguard Children 2018;
- Care Quality Commission Fundamental Standard 13: Safeguarding Service Users from Abuse and Improper Treatment - Health & Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 13;
- Safeguarding Children & Young People: Roles and Competences for Health Care Staff (Intercollegiate Document 2019).

This report provides an overview of safeguarding children activity undertaken within the Trust between 1st April 2020 and 31st March 2021.

The aim of this report is to provide assurance that safeguarding children activity:

- meets national and local safeguarding standards;
- demonstrates a model of continual improvement;
- highlights existing or potential risk in relation to statutory responsibilities.

The structure of this report incorporates all safeguarding children standards and performance indicators for key providers of health services 2019-20.

2. Governance and Commitment to Safeguarding Children

Local Safeguarding Children Boards (LSCBs) are the key statutory mechanism for agreeing how organisations will co-operate to safeguard and promote the welfare of children. The LSCBs have changed and each local authority have set up new safeguarding partnership arrangements in line with the recommendations in Working Together 2018, and have combined both children and adults boards. From October 2019 onwards the local authorities are now known as:

BaNES: B&NES Community Safety & Safeguarding Partnership (BCSSP)
Wiltshire: Safeguarding Vulnerable People Partnerships (SVPP)
Somerset: Somerset Safeguarding Children Partnership (SSCP)

The Trust is represented at the BaNES and Wiltshire Operational Board by the Executive Lead for Safeguarding, the Director of Nursing and Midwifery or a nominated deputy. Attendance at the BaNES Board during 2020-21 was 100%;

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attendance at the Wiltshire SVPP board shared by our health partners at Great Western Hospital and Salisbury District Hospital was 100%.

The Safeguarding Team represents the Trust at the following partnership sub groups:

BaNES (BCSSP)

Exploitation Sub-Group, Community Safety Partnership, Joint Training and Workforce Development Sub Group and the Early Intervention Sub Group.

Wiltshire (SVPP)

The Named Midwife attends the Early Intervention Sub Group, and the Domestic Violence lead attends the Domestic Abuse Sub Group supported by the Named Nurse and Named Midwife for safeguarding.

The Director of Nursing and Midwifery is the Executive Director responsible for safeguarding within the Trust; there is a nominated Non-Executive Director as safeguarding champion. The Deputy Director for Nursing and Midwifery is the nominated Deputy for the Director of Nursing and Midwifery as executive lead for safeguarding children.

Further monitoring against the Safeguarding Children: Standards and Performance Indicators for Providers of Health Services occur through the Clinical Outcomes and Quality Assurance reports that are submitted to the Clinical Commissioning Groups (CCG) on a quarterly basis. The CCG Designated Nurse for Children provides supervision and oversight to the Named Nurse and Named Midwife for Safeguarding Children and Young People within the Trust.

Children and Young People’s Safeguarding Committee

The Children and Young People’s Safeguarding Committee is chaired by the Director of Nursing and Midwifery. A report of the meeting is submitted and presented to the Clinical Governance Committee quarterly, drawing attention to any issues that require adding to the Trust Risk Register.

The joint safeguarding team and Deputy Director of Nursing and Midwifery have proposed a new structure to the joint safeguarding committee governance, which links in reporting structures for Learning Disability, Mental Health and Mental Capacity alongside Children and Adults Safeguarding Committees, ensuring that any risks and highlights of each committee is reported to a Vulnerable Peoples Assurance Committee (VPAC). VPAC will highlight the risks, issues and mitigations through the Clinical Governance route to the Trust board. The changes will ensure that each part of the structure have clear lines of reporting and the Clinical Governance Committee and Trust Board will have sight of the appropriate wider safeguarding risks and actions. This process was ratified at the Q4 Clinical Governance Committee and further work is being undertaken to refine the details of the various structures.

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Care Quality Commission (CQC)

The Emergency Department (ED) was visited by the CQC for an unannounced inspection on the 4th January 2021. The visit highlighted the drop in compliance for safeguarding children training for staff, noting how the pandemic had increased the pressure on their service and reduced the amount of time staff had to complete their training.

The safeguarding team are working closely with the ED and have put on additional training dates for ED staff during both 2020 and 2021. Currently all staff out of compliance are booked onto one of the regular or ad hoc training dates. Staff who are already trained to Level 3 now have access to the e learning for health Level 3 safeguarding children course. This continues to be reported through the Safeguarding Committee structures.

Section 11 Audits

BaNES Section 11 Audit

The Named Nurse completed a Section 11 audit with BaNES Community Safety Safeguarding Partnership in Q4, as part of their 3 yearly cycle of Quality Assurance measures. This was ratified by the Director of Nursing and Midwifery before returning to the safeguarding partnership. The audit focused primarily on partner agencies safeguarding response to COVID. The 4 sections covered included: Multi-Agency Safeguarding Arrangements, Threshold/Continuum of Need, Engaging with Children and Young People, and Training and Workforce Development.

An action plan has been created for each section where appropriate and progress will be reported through the safeguarding governance structures. There was no significant risk to the Trust and the focus of the action plan is improving the quality of referrals to children's social care and engaging with children and young people.

Joint Targeted Area Inspection (JTAI)

The JTAIs are 6 monthly themed joint inspections of the multi-agency response to abuse and neglect across the country. These are deep dive inspections of how agencies work together in relation to planned themes. The Named Nurse is meeting bi-monthly with the BaNES JTAI preparation group to ensure that the Trust and partners are prepared for any future JTAIs. There were no local JTAIs in 2020/21.

Child Protection Information Systems (CPIS)

CP-IS is a national programme that shares information for children subject to Child Protection Plans, Looked After Children and pregnant women whose babies are subject to Child Protection Plans with the local authority where the children and families live, if they present to the Trust unscheduled care settings (ED and Urgent Care). There is an effective, interim process in place and IT are working on a full electronic solution which should be in place by Q1 2021-22.

COVID-19 Requirements for Safeguarding

The safeguarding team have attended regular COVID safeguarding risk review meetings with the local Designated Nurses for Safeguarding (BSW CCG) throughout 2020-21 alongside other health providers. This is allowing a 2-way update for the CCG as well as ensuring the Trust safeguarding team are appraised of any further local, regional and national changes.

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Due to the current COVID-19 pandemic the safeguarding team have continued to work from home the majority of the week. There is a rota in place to ensure that there are no more than 5 members of the team in the office at the same time and 2 using a separate safeguarding office in Bath and Wessex House. The team can still be contacted for support via the usual telephone numbers and email addresses whilst working from home. This will be reviewed on a monthly basis. The team are making every effort to remain visible to offer ongoing safeguarding support to the Trust staff, patients and families.

Wiltshire Safeguarding Vulnerable People Partnership (SVPP) COVID Safeguarding Impact Review

The Safeguarding team responded to a request from Wiltshire SVPP in Q4 to examine our COVID safeguarding response and provide a review of how our systems and processes are responding to current COVID restrictions, and guidance from a safeguarding Think Family perspective. This review was completed with the support of the adult safeguarding team to reflect our holistic safeguarding responses across the Trust.

The main themes were around the Trust aiming to keep services and processes as normal as possible during this COVID period. Vulnerable children remain being seen face to face as much as possible, as well as vulnerable maternity clients. Support from both the adult and children’s safeguarding team has continued through training (now delivered virtually), supervision also delivered virtually and for ongoing support through the safeguarding processes and systems. The report highlighted the need to continue monitoring the number of children not being brought to appointments and the increase in children presenting to the Trust with complex mental health issues during the COVID period. Action plans are in place to support these issues. There were no significant risks to the Trust.

Safeguarding Children Audits 2020/21

Safeguarding children audits are included in the Trust Clinical Audit Programme. During this period the following audits were undertaken:

- Knowledge and Skills Audit
- Multi Agency Cuckooing Audit
- Multi Agency Child Sexual Exploitation Audit
- Maternity audits (see maternity report).

Audit reports and action plans were submitted to the Children and Young People’s Safeguarding Committee in 2020/21 and are monitored through the audit action tracker and forward plan process.

3. Policies, Procedures and Guidelines

During 2020/21 a number of policies have been written or revised to meet local or national requirements. The following policies and protocols have been written or updated in this period:

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- Section 85 Policy
- Escalation Policy
- Chronology Guidance Where There Are Safeguarding Concerns
- Discharge Planning Guidance Where There Are Safeguarding Concerns
- Did Not Wait Guidance for the Emergency Department.

4. Appropriate Training, Skills and Competences

Despite the challenges COVID-19 presented in 2020/21 there has been a consistent focus on both Level 2 and Level 3 Safeguarding Children training from the safeguarding children team with support from the departmental educational leads, Education Centre and HR business partners across the Trust, to ensure compliance in achieving the 90% level.

Table 1 shows compliance figures for all levels of training during 2020-21 for all staff including maternity.

(Table 1) Training Compliance Figures (Including Maternity)

Subject	Compliance Requirement	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21
Safeguarding Children Level 1	90%	85.62%	85.99%	87.20%	86.65%
Safeguarding Children Level 2	90%	84.79%	84.34%	85.50%	84.80%
Safeguarding Children Level 3	90%	73.22%	72.51%	73.80%	73.83%

Maternity Services Only Compliance Figures

See Maternity report (Appendix 1)

The Level 2 Safeguarding Children training compliance for the Trust ranges from 84.3%-85.5%. The Named Nurse is working closely with the Education Department to identify and address the areas that require support to meet the 90% compliance. The Named Nurse has revised both the Level 1 and Level 2 e learning so these can be utilised to increase and sustain the compliance back to 90%.

The current Level 3 Safeguarding Children compliance has ranged from 73.22% to 73.83% in Q4 Trust-wide and the Named Nurse has met with the compliance manager in the Education Department quarterly and worked closely with the HR Business Partners, operational managers and practice development leads in each area to identify staff requiring training and ensure they utilise the in house Level 3 safeguarding training days facilitated by the safeguarding children team, or newly agreed national Level 3 e learning package for those staff requiring an update.

Since the COVID restrictions in Q1 2020/21 all face to face training was cancelled and once recommenced numbers were restricted to comply with COVID guidelines

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on social distancing. All training was converted to virtual, via MS teams in Q4 in line with Trust guidelines, including delivery of the Level 3 safeguarding children training. This has had an impact on the compliance with Level 3 training throughout the year. The safeguarding team have defined an action plan, including additional and ad hoc sessions, and successfully tested the use of the National Level 3 e learning package to support staff compliance. The highest risk is for new starters who have never had safeguarding training; these staff groups have been identified and additional training sessions have been made available to meet their needs. This planning continues in 2021/22 with enough sessions and space for those staff either out of compliance or coming out of compliance.

19 Level 3 training sessions were delivered to 210 staff in the year 2020-21.

5. Effective Supervision and Reflective Practice

The safeguarding team provided quarterly one to one supervision with 38 identified leads across the Trust in 2020-21; 20 in Maternity Services and 18 across other children’s facing workforce. Current compliance is:

- Named Nurse 1:1 92% (18 leads); and
- Named Midwife 1:1 94% supported by the Named Nurse and Specialist Safeguarding Midwife (20 leads).

The safeguarding team uses a database to ensure robust recording which is monitored through the Children and Young People’s Safeguarding Committee.

The challenges have been in embedding group supervision in the larger teams namely: Maternity Services, paediatric ward and the Emergency Department.

Group supervision now runs virtually each quarter and is embedded in Maternity community services. In Bath Birthing Centre challenges remain in staff accessing group supervision during this COVID period and action plans are in place to address this (see Maternity report).

On the paediatric ward virtual sessions have been successfully trialed and will commence weekly in 2021/22. In the Emergency Department there are now 2-3 virtual supervision sessions a month for all nursing staff, including Emergency Nurse Practitioners.

In the smaller teams the compliance rates are as follows (standard 90%):

- Paediatric Therapies 78%
- Paediatric Consultants 95%
- Paediatric Diabetes Team 90%
- Integrated Sexual Health Team 68%
- Royal National Hospital for Rheumatic Diseases Centre for Pain Services 69%.

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14 additional supervisors were identified to support the supervision process across the Trust, however, the planned training was postponed due to COVID restrictions and is rescheduled for Q2 2021/22.

The COVID restrictions affected group supervision sessions with all sessions cancelled initially. Currently all supervision sessions are managed virtually via MS teams. All 1:1 supervision and ad hoc consultations with the safeguarding children team have continued virtually and face to face (in line with social distancing guidance) and have not been affected by the COVID restrictions. Action plans are in place in 2021/22 to continue to support the most challenging areas of Bath Birthing Centre.

The supervisors continue to be supported by the safeguarding team and the Supervision Implementation Group. Supervision remains a low risk on the Trust risk register.

6. Effective Multi Agency Working

The Trust actively engages in supporting our external partners in the following:

- the working of the Multi Agency Safeguarding Hub (MASH) within BaNES;
- supporting Trust representation at the Domestic Abuse Multi-Agency Risk Assessment Conference (MARAC) in both BaNES and Wiltshire;
- BaNES Multi-Agency Joint Targeted Area Inspection (JTAI) preparation group;
- BaNES Operational Exploitation Meeting which highlights those most vulnerable to the Trust;
- Health Information Sharing Group (BaNES CCG lead) to ensure robust information sharing, systems and process between health partners in the area;
- Drug and Alcohol Working Group with local partners;
- Sexual Health Information Sharing Group with local partners;
- Paediatric Mental Health Group;
- safeguarding partner agency meetings in both BaNES and Wiltshire;
- Wiltshire Contextual Safeguarding Group.

7. Reporting Serious Incidents

There have been no Serious Incidents reported or investigated by the Safeguarding Children team in 2020/21.

8. Engaging in Serious Case Reviews (SCRs)

BaNES LSCB SCR (Brooke/Button)

This is a case related to Child Sexual Exploitation where the Named Nurse represented the Trust. The SCR has been completed and the report is published, but not for wider sharing. There was no significant risk to the Trust. The Trust have

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returned the single agency action plan to the local BaNES Safeguarding Partnership and all actions are completed as the Trust are fully engaging with the BaNES CCG Health Information Sharing Group.

Somerset SCR Family B

The Named Midwife and Named Nurse responded to a rapid review request where two young children were harmed in the care of their parents. As unborn babies they were both known to Maternity Services and the paediatric team. The Rapid Review chronology was completed and the National SCR Panel agreed this met the criteria for a Serious Case Review. A draft report has been produced by the lead reviewer and the recommendations from this have been agreed and finalised.

An action plan specific to the Trust has been developed; the final action is now completed as the safeguarding walkabouts have restarted in Q4. 2020/21. There is no significant risk to the Trust and we are fully engaged with the processes.

Rapid Review Requests

The Safeguarding Team has responded to 6 Rapid Review requests in line with the new Working Together to Safeguard Children 2018 arrangements; 4 from BaNES BCSSP, 1 from Wiltshire SVPP and 1 from Somerset Safeguarding Partnership.

The 4 BaNES rapid review requests did not meet the criteria for Serious Practice reviews and will be managed as local learning events. Two were related to knife attacks on young people and will be combined as a joint learning event and audit in 2021/22. One related to injuries received by a 7 week old baby and will be managed as a local learning review, focusing on good practice. No risk to the Trust was identified as all expected safeguarding processes were followed. For the final rapid review request please see Maternity report.

The one Wiltshire request also did not meet the criteria for a Serious Practice Review and was managed as local learning event in 2020/21. An action plan has been created reviewing processes for referring young people to local drug and alcohol services.

The Rapid review request from Somerset Safeguarding Partnership was for a young person who sadly died whilst in foster care. The Trust responded and had no information to share for the young person and any members of the family. We will await the outcome of the review to integrate any learning into Trust processes, training and supervision

Wiltshire Domestic Homicide Review (DHR)

The Named Nurse responded to a request for information from Wiltshire Local Authority investigating the homicide of a 17 year old. The Trust had no information related to the victim and only minimal contact with the alleged perpetrator. The report has been completed and is awaiting national ratification before returning to partner agencies. There is no significant risk to the Trust.

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9. Safer Recruitment and Retention of Staff

The Disclosure and Barring Policy has been ratified and published; the policy sets out the requirements of the Trust on checks of criminal records obtained through the Disclosure and Barring Service (DBS).

10. Managing Safeguarding Children Allegations Against Members of Staff

There have been no Safeguarding Allegations against members of staff reported within the Trust in this period.

11. Engaging Children and their Families

The Trust welcomes feedback from children and their families. A number of systems have been established to incorporate feedback; Family and Friends' feedback for the whole family is encouraged across the workforce. Children aged 16 plus are encouraged to complete family and friends' feedback independently. Specialist nurses in the diabetes team run parents' evenings to engage families in sharing experiences and feedback. The safeguarding team work closely with the Patient Advisory Liaison Service within the Trust to support ongoing issues of a safeguarding nature with young people, families and carers.

12. Organisational Risks

There are 7 risks in relation to Safeguarding Children on the Trust risk register, each is clearly defined with controls and action plans in place to reduce risk. (Two were closed, see below.)

Risks that remain open are related to:

- **Safeguarding Children Level 2 and Level 3 training compliance**

There are action plans for both Level 2 and Level 3 training. In relation to Level 2 training the compliance has remained at 84.3%-85.5% for the year.

In relation to Level 3 training the compliance has remained at 73% Trust wide and dropped to 68% in Maternity Services in Q4 2021. A number of training sessions were cancelled at the beginning of the COVID pandemic. Once restarted the numbers were reduced significantly due to social distancing requirements and changing the training from face to face to a virtual platform. Additional sessions were added in during 2020/21 and further sessions are set up from 2021/22 both in children's and maternity Level 3 training to ensure there are sufficient places for those either out of compliance or coming out of compliance. The National Level 3 e learning package has been successfully tested and is now available for staff who require an update.

The highest risk is for new starters or those never having training before and these staff are identified in each area as priorities. It is anticipated that these measures will ensure the Trust returns to pre COVID compliance of just below 90%.

The risk remains low to the Trust.

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- **Implementation of safeguarding supervision**
Action plans are in place to address the issues in the main areas where supervision remains a challenge: ED, maternity and the paediatric ward (see Section 5).

In relation to COVID requirements, all 1:1 supervision with identified leads has continued and the safeguarding team have provided business as usual ad hoc consultations for the Trust. All group supervision is now facilitated primarily by MS teams and face to face with safe social distancing. The training of additional supervisors is booked for Q2 2021/22 and will positively influence the compliance in the Trust.

The risk remains low to the Trust.

- **CP-IS implementation process**
The Named Nurse has followed up with the ED and Maternity Services, and CP-IS is fully integrated using the interim Summary Care Record application route. The IT team are finalising the electronic solution which should be in place in Q1 2021/22. CP-IS remains on the risk register until the electronic solution is implemented and quality assured. The current risk is low as the interim process is working effectively.
- **Reviewing Nurses role in the Emergency Department**
This has been removed from the risk register, after ratification from the ED Clinical governance and Safeguarding Children Committees, as the reviewing nurse role continues to review and action between 80-90% of under 18s presenting within 72 hours and all within 5-7 days.
- **Use of the safeguarding children screening tool in the Emergency Department**
The screening tool rates have remained consistently between 85-90% and this has been removed from the risk register after ratification from the ED Clinical Governance and Safeguarding Children Committees. This is reassessed weekly and contingencies are in place to review the risk if the rate falls to consistently below 80%.
- **Management of paediatric patients that fail to attend appointments across the Trust**
The risk remains low to the Trust as all the safeguarding team actions are complete and the feedback from staff is positive, including contact with the team to support concerning cases. The Named Nurse is working with children's facing areas to assess the compliance with the Was Not Brought Policy in 2021/22.
- **Use of the Pregnancy Management Note on Millennium Maternity**
(see Maternity report Appendix 1)

Actions related to the risks are reviewed at the Children and Young People's Safeguarding Committee and reported through the Operational Clinical Governance Committee.

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13. Achievements 2020/21

- The safeguarding team working with the Trust and BSW partners on a COVID 19 response to ensure that child centred safeguarding activity remains a focus within the Trust.
- Continued embedding of the supervision model across the Trust. Named Leads requiring 1:1 supervision remain consistently over 90% compliance for the Trust. Focus remains on maternity, ED and the paediatric ward in supporting the group supervision agenda. All supervision is now delivered virtually.
- The children's safeguarding team are part of the Health Information Sharing Group in BaNES ensuring robust process are in place for flagging young people at risk of harm and sharing information between health partners. This includes sexual health services sharing attendances of young people with GPs and school nurses (with consent).
- Continued support of the safeguarding children and adults operational committee governance with joint safeguarding children's operational meetings continuing virtually and plans for this to report into a newly formed Vulnerable People's Assurance Committee.
- Supporting work in the ED related to use of the safeguarding screening tool now at 85-90% and removed from the risk register.
- Supporting the reviewing nurse role in the ED with 80-90% of under 18s being reviewed within 72 hours. This has been removed from the risk register.
- Development and delivery of a virtual Level 3 safeguarding children and maternity training package in line with COVID requirements.
- Restarting the paediatric mental health group with safeguarding partners.
- Multi agency work with partners improving the referral systems to local drug and alcohol services for children and young people.

14. Objectives for 2021/22

- To develop a joint adult and children's safeguarding strategy.
- To ensure the Safeguarding team continues to respond to the challenges of COVID-19, including supporting a robust Trust and BSW-wide recovery plan.
- To support the development of reflective safeguarding supervision across the Trust.
- Annual Safeguarding Team Workshop.
- To work with partner agencies and Designated Nurses across the new Partnership arrangements and CCGs on SMART reporting, audit, policy development and work plan priorities. This includes more narrative in reporting on how we are ensuring outcomes are improving for children and families.

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- To work closely with the Adult Safeguarding lead on the implementation of the new Liberty Protection Safeguards.
- To continue working on raising staff awareness of Early Help agenda so children and families get the right support at the right time.
- To re-embed the safeguarding walkabouts in both children's facing and maternity areas.

15. **Concluding Comments**

This report has concentrated on the key safeguarding activity improvements and risks within the organisation. Whilst it has provided an opportunity to capture key activity, it is by no means a full report of achievements of the safeguarding children team and others in the organisation. It is appropriate to acknowledge the achievements of the safeguarding children team, the support of the executive lead for safeguarding, the safeguarding activities of staff and the very positive direction of travel.

References

Intercollegiate Document: *Safeguarding Children and Young People, Roles and Competences for Health Care Staff*, London RCPCH, 2019

Working Together to Safeguard Children, London, DSCF, 2018

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Appendix 1: Maternity Safeguarding Annual Report 2020-2021

1. Governance and Commitment to Safeguarding Children

Maternity Safeguarding Committee

The meetings continued to be held quarterly in line with the Children and Young People's Safeguarding Committee, in order to review new maternity specific policies, completed audits and information prior to this committee. The meetings are chaired by one of the maternity matrons.

The Community Lotus Team

The Lotus team continue to caseload the women with complex social factors managed by the Specialist Perinatal Mental Health Midwife. The Bath area Lotus midwives provide continuity of carer to selected women on their caseload. More midwives have been recruited to the team in the Trowbridge, Paulton and Bath areas. These midwives have received 1-1 support from the safeguarding midwives and will be having supervision quarterly going forward.

Perinatal Mental Health

The Named midwife continues to work closely with the Specialist Perinatal Mental Health Midwife to support the ongoing development of the perinatal mental health service. In the next year there will be a new dedicated mental health service introduced for new, expectant and bereaved Mums. The Bath, Swindon and Wiltshire area will be an early implementer of this service.

Thousands of new, expectant or bereaved mothers will receive help and support for mental health problems through dozens of new dedicated hubs which are being set up across the country.

Safeguarding Children Audits (Maternity)

Safeguarding children and maternity audits are included in the Trust Clinical Audit Programme. During the period the following audits were undertaken:

- Multi-agency Early Help Assessment Audit with BaNES Community Safety and Safeguarding Partnership
- Multi-agency Under 1s with Parental Substance Abuse Audit with Wiltshire Safeguarding Vulnerable People Partnership
- Maternity Spot Check Safeguarding Audit with a focus on domestic abuse routine enquiry
- Audit of Women with Complex Social Factors (Maternity)
- Audit of the use of the pregnancy management note in maternity.

Audit reports and action plans were submitted to the Maternity Services Safeguarding Committee and then the Children and Young People's Safeguarding Committee in 2020-21, and are monitored through the audit action tracker and forward plan.

2. Policies, Procedures and Guidelines

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No new maternity policies and protocols have been written or updated in this period.

3. Appropriate Training, Skills and Competences

The Trust training and compliance figures are listed in the tables below. In line with the revised intercollegiate document introduced in January 2019, all maternity care assistants (MCAs) should be trained at Level 3 safeguarding children. This led to Maternity Services’ compliance dropping below 90% in 2019-20. Plans to ensure that MCAs are booked onto the training were then delayed due to the COVID-19 pandemic. Training was suspended in March 2020. This had the effect of further reducing the compliance figures due to new starters and staff whose compliance has expired not being able to access training. Face to face training did recommence over the summer months, however, due to the need for social distancing measures, the numbers of staff that could be trained in each session were low. Face to face training was again suspended in December 2020 and the training presentation was, therefore, adapted so that it could be delivered via MS Teams. In March 2021 the first MS Teams maternity Level 3 training was delivered.

(Table 1) Maternity Services Only Compliance Figures

Subject	Compliance Requirement	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21
Safeguarding Children Level 1	90%	83.11%	86.71%	89.4%	84.83%
Safeguarding Children Level 2	90%	83.21%	82.26%	86.92%	82.16%
Safeguarding Children Level 3	90%	76.37%	72.8%	74.9%	68.19%

Compliance at the end of the year for Level 3 maternity is 68.19%. In order to bring this back up to over 90% the Named Nurse and Named Midwife have booked in 23 Level 3 safeguarding children training days up until the end of December 2021, 10 of which are maternity specific. The training will continue to be delivered via MS Teams until we have further guidance about the lifting of social distancing and there is currently the capacity to train 14 members of staff on each session. Communication has been sent out to all line managers to ask them to ensure that any staff whose compliance has expired, or will expire before the end of 2021, have booked onto one of the available sessions.

4. Effective Supervision and Reflective Practice

The Named Nurse and Specialist Safeguarding Nurse continue to support the Named Midwife to embed the supervision agenda alongside the supervisors’ network. Safeguarding supervision compliance is monitored through the maternity and children’s safeguarding committees and remains on the Trust risk register.

The maternity compliance for the quarterly 1:1 safeguarding supervision with the 20 identified leads has been consistently above the 90% compliance target for the

year 2020-21 and has been achieved with the support of the whole safeguarding team.

Group supervision remains a challenge within maternity, due to the restrictions on face to face contact during the COVID-19 pandemic. This has been particularly challenging within the acute maternity setting. The safeguarding team continued to be available for any ad hoc or face to face supervision consultations as required and a plan is in place to re-embed safeguarding supervision across maternity as we enter the COVID-19 recovery period.

There is also a plan for reporting compliance with group safeguarding supervision over the next year that has been agreed on discussion with the Designated Nurse. Going forward this will be reported 6 monthly rather than quarterly, as the majority of midwives attend this supervision twice a year. This is because the women with complex social factors are under the care of the Lotus team midwives who have quarterly 1-1 safeguarding supervision.

The training of further supervisors planned for the end of March 2020 was postponed due to the COVID-19 guidance. This is now planned for July 2021 and will be delivered via MS Teams.

5. Multi-Agency Working

- The Named Midwife is an accredited trainer for the Wiltshire Graded Care Profile 2 and is disseminating multi-agency training to identified leads and members of the safeguarding team.
- The Named Midwife has attended multi-agency Five to Thrive training in Wiltshire and is now a champion for this trauma-informed practice.
- The Named Midwife for Safeguarding is involved in the Best Start in Life Sub Group. This is a multi-agency group that meet to ensure that services for children from conception to school age are cohesive and affective, with a particular focus on early help.
- The Named Midwife for Safeguarding is a member of the BaNES Early Intervention Sub-group.
- The Named Midwife for Safeguarding has been involved in multi-agency safeguarding audits with both BaNES and Wiltshire Safeguarding Partnerships.
- The Named Midwife for Safeguarding has joined the Somerset Mendip area pre-birth tracking meetings that were set up early in 2020. These are monthly meetings attended by representatives from health and social care in order to monitor the progress of unborn babies on either Child in Need or Child Protection plans. The Named Midwife has set up similar meetings in the Wiltshire area and will be setting them up in BaNES in the next year.

6. Reporting Serious Incidents

There have been no Serious Incidents reported or investigated by the Safeguarding Children team in 2020/21 (Maternity).

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7. Engaging in Serious Case Reviews (SCR)

Somerset Serious Case Review Family B (see main report).

Somerset Rapid Review request

In Q4 2019-20 the Named Nurse and Named Midwife responded to a Rapid Review request for information related to a child that died in the care of his father. The case was discussed at the National Safeguarding Child Practice Review Panel who decided that this met the threshold for a local Serious Practice (Case) Review. The Trust was informed that the timeline for the review was outside of the period of time that midwives were giving care. The focus is on domestic abuse and its impact on children. The review will be published following completion and shared via the usual process. The only issue identified for the Trust Maternity Services was staff not following usual processes for contacting the safeguarding team with issues raised in labour. This had already been recognised and actioned by the Named Midwife and added to the Trust risk register.

BaNES Rapid Review Request

There was a rapid review request at the end of Q3 with regard to an incident involving a woman who delivered at home having not accessed any NHS antenatal care. Consequently no risk to the trust was identified. This will not be going to serious practice review. We are awaiting the outcome regarding whether there will be a local learning review.

8. Organisational risks

- **Use of the Pregnancy Management Note on Millennium records (1978)**

It has been noted that since the introduction of the pregnancy management note in early 2019, midwives have been using this to document safeguarding concerns rather than creating a separate safeguarding note. In addition to this there is no safeguarding alert generated and sent to the safeguarding midwives and often no flag placed on the woman's Millennium record.

This was placed on the risk register and action was taken to establish the extent of the problem and ensure that safeguarding information is kept separate from general obstetric documentation. Following communication of the correct process for documenting safeguarding concerns shared with all midwives and managers an audit of 160 maternity Millennium records was carried out. This demonstrated that midwives are now using the correct process to communicate and document safeguarding concerns, and the risk has been removed from the risk register.

Maternity safeguarding Achievements 2020-21

- The Named Midwife is a designated trainer supporting the implementation of the GCP2 in Wiltshire and also a Five to Thrive champion for the Royal United Hospitals NHS Foundation Trust.
- Continuation of full support and care via the Lotus team for women with complex social factors during the COVID-19 pandemic.

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- Increased support from the safeguarding midwives with attending child protection conferences, core groups etc during the period of social isolation.
- The Named Midwife has gained the letter of competence from the Faculty of Sexual and Reproductive Health, to fit the Nexplanon contraceptive implant for Lotus team women and has fitted 5 implants since being trained in August 2020.
- The Named Midwife was involved in the delivery of an NHS England webinar on domestic abuse support for pregnant women during the COVID-19 pandemic.

Maternity Safeguarding Objectives 2020/21

- To continue working on raising staff awareness of Early Help Agenda so children get the right support at the right time.
- To re-embed safeguarding supervision across maternity in the COVID-19 recovery period in both the community and acute settings.
- To increase the compliance of Level 3 safeguarding training back up to the required level across the Trust in the COVID-19 recovery period by continuing to deliver both generic and maternity specific training for new starters, maternity care assistants and maternity staff coming out of compliance.
- To carry out safeguarding walkabouts in the community birthing centres along with the new domestic abuse support practitioner, in order to provide assurance that maternity staff are aware of the Trust safeguarding processes and policies.
- To work with the Domestic Abuse Support Practitioner to ensure that routine enquiry about domestic abuse becomes fully embedded within maternity, ensuring that all women coming through the RUH maternity service are asked about domestic abuse at every safe opportunity.
- To continue as part of the Best Start in Life working group in order to improve outcomes for children from conception to aged 5.
- To continue to work with the IT lead midwife to improve the recording and storage of maternity safeguarding information.
- To continue to attend the pre-birth tracking meetings in Somerset and Wiltshire and to set up these meetings in the BaNES area so that babies on Child in Need and Child Protection plans are effectively safeguarded.
- To work with the other members of the children's and adults safeguarding teams to ensure that women with complex social factors coming through the RUH maternity services receive holistic individualised care that supports all of their needs and ensures that their babies are effectively safeguarded.

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