

Safeguarding, Mental Health & Learning Disability Annual Report 2022/23

The Safeguarding Mental Health & Learning Disability Team

Safeguarding Team



Jane Wooldridge
Learning Disability
Liaison Nurse



Catherine Bradley
Learning Disability
Liaison Nurse



Amanda Shearer
Named Midwife
Child Protection



Robyn Horgan
Safeguarding
Practitioner



Annette Shore
Clinical Nurse
Specialist



Joanne Horsburgh
Named Nurse
Child Protection



Elizabeth Porter
Lead Nurse
Safeguarding Adults



Annalise Steggall
Lead Nurse for
Mental Health



Alison Drew
Head of Safeguarding



Sharon Herring
Associate Chief Nurse

Compassionate

Aspirational

Resourceful

Excellent

CONTENTS

EXECUTIVE SUMMARY	3
1. INTRODUCTION.....	5
1.1. Safeguarding, Mental Health and Learning Disability Structure	5
1.2. Trust Training Figures	6
2. SAFE RECRUITMENT AND ALLEGATIONS MANAGEMENT.....	7
3. CHILD PROTECTION AND SAFEGUARDING	8
4. MATERNITY CHILD PROTECTION.....	11
4.1. Local Authority Vulnerable Person Figures for 2022/23	15
5. MATERNITY MENTAL HEALTH	16
6. FEMALE GENITAL MUTILATION (FGM).....	17
7. CHILD PROTECTION AND SAFEGUARDING CHILDREN AT DINGLEY CHILD DEVELOPMENT CENTRE (CDC)	18
7.1. Child Protection Medicals	18
7.2. Child Protection (CP) Peer Review Meeting	18
7.3. Child Protection Network Meeting.....	18
7.4. Looked After Children (LAC) and Fostering and Adoption	18
8. CHILDREN & YOUNG PEOPLE MENTAL HEALTH / CHILDREN WITH SPECIAL EDUCATIONAL NEEDS AND DISABILITY (SEND).....	19
9. SEXUAL HEALTH.....	21
10. SAFEGUARDING ADULTS	23
11. DOMESTIC ABUSE	27
12. MENTAL HEALTH	29
13. LEARNING & COMPLEX DISABILITIES – ADULTS.....	32
14. ADMINISTRATION	35
15. APPENDICES.....	38
15.1. Appendix 1 – Summary of Training Activity 2022/23 and Plans for 2023/24	38

EXECUTIVE SUMMARY

Welcome to the Royal Berkshire NHS Foundation Trust Annual Report for 2022/23.

Key Achievements:

- Review of safeguarding investigations and reports with newly appointed investigators as a form of supervision and to promote best practice.
- Child protection activity has continued to increase with more complex cases presenting. The team continue to work closely with frontline practitioners and partner agencies to ensure that the child remains the focus; vulnerabilities and abuse is recognised and that each child is safely managed and discharged from our wards and other services.
- In January 2023, we secured a 6 month secondment for a Maternity Safeguarding Practitioner, who has been a great asset.
- Project developed for a Domestic Abuse support worker from Alana House, funded by Wokingham and Reading Local Authorities and matched by Alana house for 6 months
- Domestic Abuse conference was successfully held for 80 delegates with speakers from Thames Valley Police, volunteer organisations and the Local Authority at the Select Car leasing stadium
- Domestic Abuse working group for champions re-launched
- Level 3 Safeguarding Adults training has been successfully rolled out and year one compliance has been reached
- Learning Disability and Autism working group established with good engagement Trust-wide
- New CAMHS Liaison and Clinical Interface Lead post agreed by BHFT to support patient flow through acute hospital
- Working group with BHFT re-established to improve transfers of patients between mental health and acute hospitals
- Pilot of 50 staff undertaking the Oliver McGowan Mandatory Training
- The Administration team have continued to support the wider safeguarding team despite increases in all aspects of their work

Alison Drew
Head of Safeguarding

2022/23 Safeguarding, Mental Health and Learning Disabilities Quick Facts:

Adult Safeguarding

- Safeguarding Adults L3 training was rolled out from April, Phase one compliance reached 91% for first year.
- Specialist Sexual Health Outreach service appointments for vulnerable people have doubled in the last year
- The number of Adult safeguarding referrals raised against the Trust has risen by 68% and those raised by the Trust by 10%.

Child Protection Safeguarding

- The number of child protection referrals to Local Authorities (LA's) has reduced by 5% this year
- There was a 23% increase in CP medicals at Dingley

Maternity Safeguarding

- Maternity CP referrals to LA's have continued to increase - 30% rise this year (42% increase over 2 years).
- The number of women reaching Poppy team criteria has increased by 36%
- There was a 23% increase in maternity FGM referrals this year

Learning Disability

- The number of referrals for in-patients with Learning Disabilities increased by 28% and for out-patients by 85%.

Mental Health

- The number of mental health attendances through the Emergency Department has increase by 17% over the past year and hospital admissions by 4%

Safeguarding Allegations and Concerns

- There was a 30% increase in the number of Safeguarding allegations and concerns this year.

Mental Health Act – Detentions to RBH

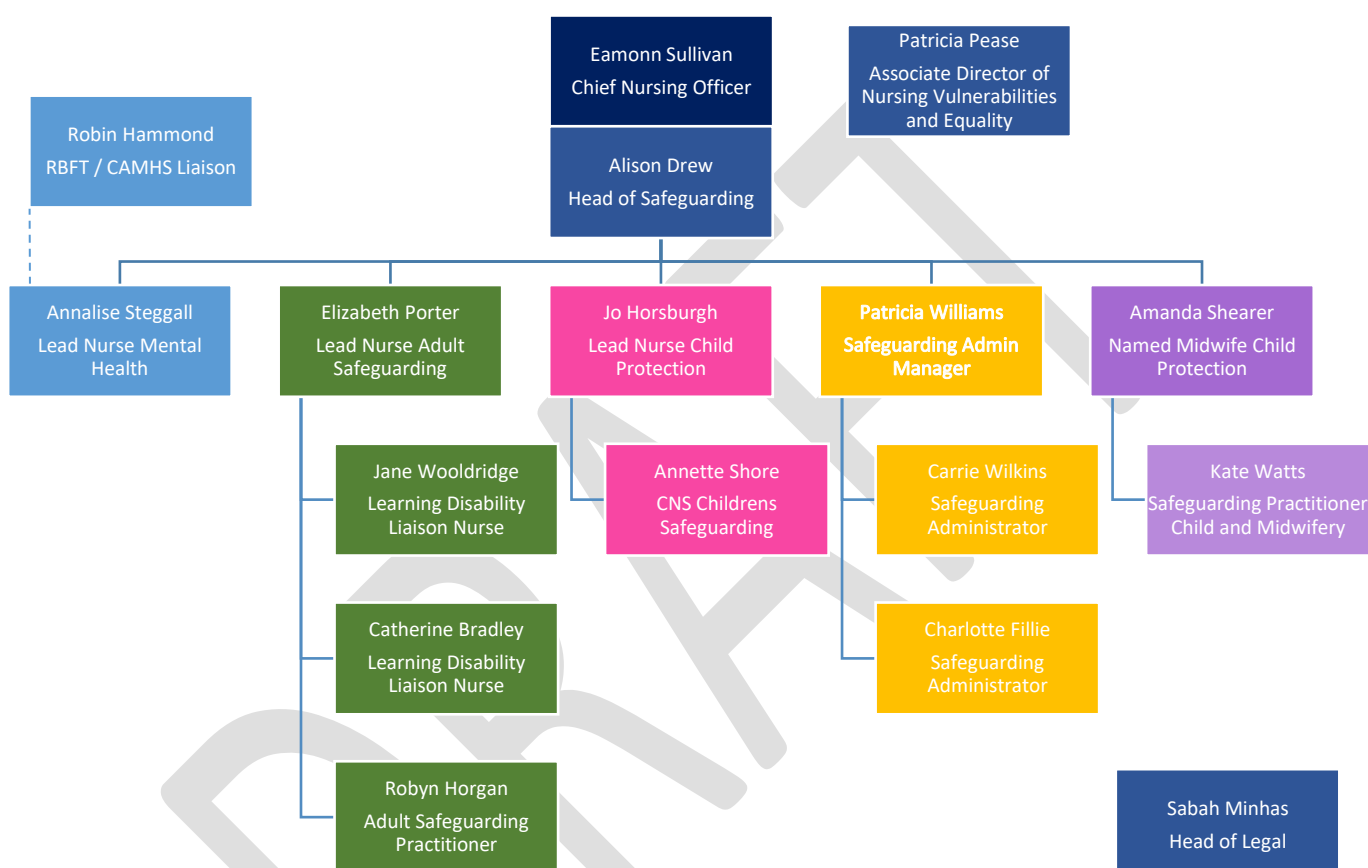
- The number of detentions under the Mental Health Act has reduced by 24%

1. INTRODUCTION

This report covers all areas of safeguarding, mental health and learning disability work across the Trust and sets out our priorities for further work. Safeguarding means protecting people's health, wellbeing and human rights, and enabling them to live free from harm, abuse and neglect (NHSE, 2018). Safeguarding at the RBFT is fundamental to high-quality health care. Safeguarding is everybody's responsibility.

1.1. Safeguarding, Mental Health and Learning Disability Structure

The safeguarding, mental health and learning disability structure (nursing and administration) and lines of responsibility and accountability for the RBFT are shown in the diagram below:



Adult Safeguarding Medical Leads	<ul style="list-style-type: none"> Urgent Care Group: Joseph Mulae Planned Care Group: recruitment underway Dr Hannah Johnson: Networked Care Group
Adult Safeguarding Matron Leads:	<ul style="list-style-type: none"> Georgie Brown: Urgent Care Group Erin Jarvis: Planned Care Group Angela Clarke: Network Care Group
Child Protection Medical Leads:	<ul style="list-style-type: none"> Dr Ann Gordon: Named Doctor for Child Protection Dr Andrea Lomp: Designated Doctor Child Protection, Berkshire West, CCG Dr Aziz Siddiqui: Locality Paediatrician, Children's Safeguarding Dr Niraj Vashist: Medical Advisor to Fostering and Adoption Panel
Child Death	<ul style="list-style-type: none"> Ravi Kumar. Designated Healthcare Professional Child Death Berkshire West, CCG
Sexual Health	<ul style="list-style-type: none"> Julia Tassano-Edgecombe: Nurse Consultant
Human Resources	<ul style="list-style-type: none"> Suzanne Emerson-Dam: Deputy Director Workforce & OD, Designated HR Officer Safe Recruitment & Allegations Management
Legal	<ul style="list-style-type: none"> Sabah Minhas: Head of Legal Affairs

1.2. Trust Training Figures

Training and Compliance %	Trust	Urgent	Planned	Net	Corp	E and F
Child Protection Level 1 (90%)	↑94.2%	↑95.8%	↑95.6%	↑95.2%	↑95.6%	↑90.9%
Child Protection Level 2 - 1 year (85%)	↑94.2%	↑81.8%	↑87.1%	↑88.8%	↓ 96.3%	n/a
Child Protection Level 3 Full Day (85%)	↑92.5%	↑92.0%	↑100.0%	↓ 92.7%	↑100.0%	n/a
Child Protection Level 3 Annual Update (85%)	↓ 80.0%	↓ 79.8%	↓ 71.4%	↓ 85.4%	↓ 86.7%	n/a
Prevent WRAP or equivalent (90%)	↑92.9%	↑93.3%	↑93.9%	↑97.4%	↑71.4%	n/a
MCA & DoLS Basic (80%)	↑73.1%	↑74.1%	↑73.7%	↑70.0%	↓ 88.5%	n/a
MCA & DoLS Enhanced (85%)	↑88.0%	↑88.1%	↑88.7%	↑88.7%	↑93.3%	n/a
Safeguarding Adults Level 1 (90%)	↑93.8%	↑96.2%	↓ 96.8%	↑96.4%	↑97.3%	↑87.0%
Safeguarding Adults Level 3 Year 1 (Mandatory x 3) 90%	↓92.1%	↓92.2%	↑93.3%	↑90.2%	↑100.0%	n/a

KEY	
Learning Matters	
MAST	
Compliant	
Below compliance target by <5%	
Below compliance target by >5%	
Not Applicable	

* These figures are from 5th April 2023

Ongoing training challenges / risks:

- Child Protection level 3 update compliance.
- MCA and DOLs Basic compliance.
- Oliver McGowan Mandatory Training roll-out.
- Induction training still not face-to-face so team do not meet new starters and local stories are lost.

2. SAFE RECRUITMENT AND ALLEGATIONS MANAGEMENT

Key Achievements:

- Review of safeguarding investigations and reports with newly appointed investigators as a form of supervision and to promote best practice.
- Key themes are considered at the Monthly Safeguarding Review Meetings to feed into communications to raise awareness of safeguarding and/or training.
- Increased knowledge and experience within the HR Team relating to dealing with safeguarding concerns and allegations.

Summary of Cases:

- In the financial year 2022/23 a total of 27 cases were referred to the Safeguarding Team; 19 cases relating to vulnerable adults and 8 cases relating to children. Of the 27 cases referred 15 were classified as concerns whilst the remainder were classified as allegations. Most of the concerns/allegations related to Trust employees however a few related contractors or agency staff. Four cases were relating to matters outside of the workplace and three cases were related to historical incidents.
- The highest number of safeguarding concerns/allegations were from Networked Care and Urgent Care, with 10 cases each. Planned Care had 5 cases, and there were 2 cases in Estates and Facilities.
- The main categorisation of concerns/allegations relate to rough handling or assault. Allegations were investigated and where warranted, appropriate action was taken in line with the Trust's Expected Behaviours and Conduct Policy or learning was identified for individuals. External parties were notified of concerns/allegations as appropriate and some concerns/allegations were reported into the Trust from external parties.
- There has been an increase in the number of cases in 2022/23 compared with the previous year with 19 cases referred in 2021/22.

Ongoing safe recruitment and allegations management challenges / risks:

- Timely management of cases where third parties or partner organisations are involved.

Key Areas of Work for 2023/24:

- Further development of relationships with partner organisations e.g. The LADO's and Thames Valley Police.
- To take forward actions agreed as part of the review of safeguarding investigations and reports with newly appointed investigators.

3. CHILD PROTECTION AND SAFEGUARDING

Key Achievements:

- Child protection activity has continued to increase with more complex cases presenting. The Named Nurse Child Protection (NNCP) and the Clinical Nurse For safeguarding continue to work closely with frontline practitioners and partner agencies to ensure that the child remains the focus; to ensure that vulnerabilities and abuse is recognised and that each child is safely managed and discharged from our wards and other services.
- Child Safeguarding Clinical Nurse continues to be a huge asset to the service.
- The Child Protection team continue to work closely with partner agencies, meeting them monthly to discuss cases and operational issues. These meetings build relationships and aid good joint working for children and their families.
- The child safeguarding audit programme, policies and protocols are up to date.
- Referrals to our three key LAs have been audited for clarity, quality and voice of the child. All audits show that the referrals made by our staff are clear, with concise decisions around safeguarding children. Where issues are identified, reflection with practitioners enhances practice.
- Child protection level 3 training continues 3 times a year with a good attendance from all areas of the hospital. The full day is delivered face to face and continues to receive excellent feedback.
- Back to basic training has continued for all staff within the Paediatric Unit which has been a great success, especially ensuring our new staff are supported. This training has started in midwifery and has now been rolled out to Gynae, Acute Medical Unit, Short Stay Unit and Emergency Department with good feedback.
- 1:1 supervision and management oversight continues for staff who work with highly vulnerable patients, these include, the Paediatric Diabetes team, Poppy team (midwifery) and sexual health advisors.
- Peer review is offered to Radiology and Emergency Department Advanced Practitioners, Paediatric Emergency Department and Paediatric Ward staff.
- Following some near miss incidents involving babies, a dashboard of infants under 6 months seen in the Emergency Department (ED) with injuries has been in place since June 2021. The senior nursing team for ED, Safeguarding Children's Team and the Named Doctor for Child Protection meet weekly to review all cases and ensure that all safeguarding processes are followed. A recent audit was completed and highlighted that frontline practitioners were following pathways and escalating appropriately.
- Child protection Clinical Governance meets bi-monthly to review all areas of safeguarding children and is well attended with good engagement. NNCP attends the Paediatric and Paediatric Emergency Department Clinical Governance meetings to explore safeguarding collectively.
- The NNCP and Named Midwife for Child Protection support staff in the Special Care Baby Unit to identify babies who are admitted under social care, monitor babies and families that may need further support and ensure safe discharge.

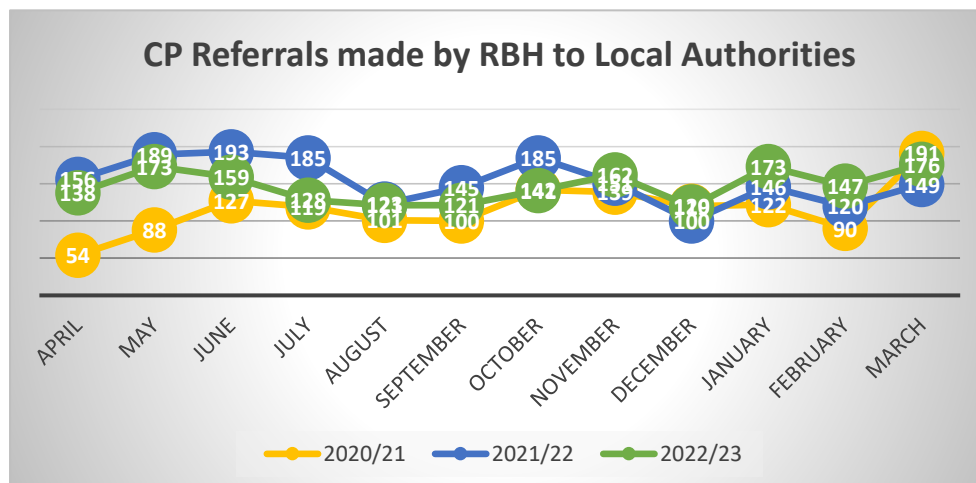
Partnership Working:

- RBFT continue to be involved in learning reviews where a child has sustained significant harm. RBFT have contributed the full chronologies, analysis of practice and actions in response to recommendations.
- The NNCP is currently chairing the Case Review Group for the Berkshire West Safeguarding Children Partnership.
- The NNCP attends the Reading and Wokingham Independent Scrutiny group and a Consultant Paediatrician attends the West Berkshire Independent Scrutiny group. The NNCP has worked closely with frontline practitioners in Paediatrics and Emergency Department to raise safeguarding skills and confidence. Safeguarding champions have been identified in the Paediatric Wards,

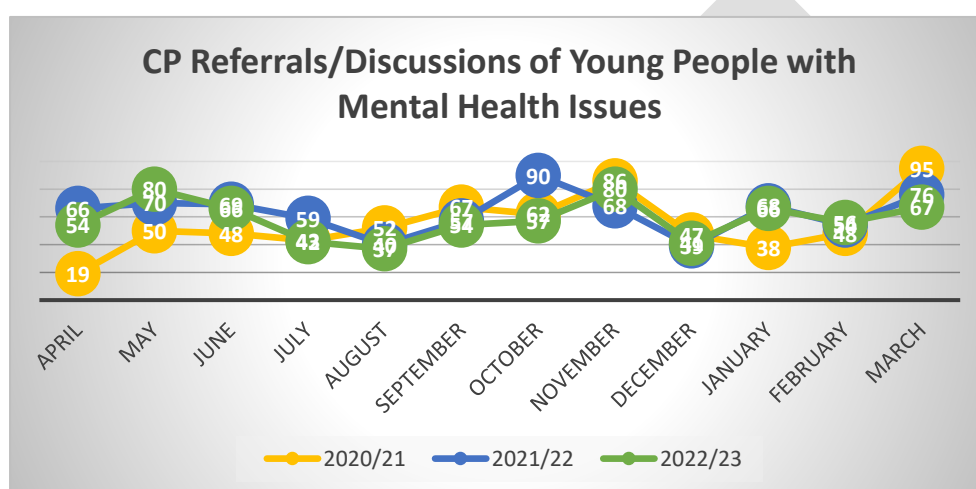
Emergency Department and in the Paediatric Emergency Department. The champions are meeting regularly with the NNCP to strengthen safeguarding practice. A Volunteer Navigator Service developed during 2020/21 has started in to our Emergency Department (ED). This has been funded through Thames Valley Police Violence Reduction Unit. Starting Point, a third sector organisation has been commissioned to provide and co-ordinate the service. The aim of the Navigator Service is to provide mentoring to supporting young people aged 13–24 who attend ED journeying with them to access support within the wider community. This support is proving to be a great success.

Key Concerns:

- We have continued to see an increase in activity and a significant increase in complexity of cases from both a safeguarding and a psycho-social context in relation to the needs of specific patient groups:
 - Pregnant women, unborn babies and babies under six months.
 - Children and young people from troubled families.
 - Children and young people with complex mental health presentations particularly eating disorders, disordered eating and neurodiversity.
 - Children and young people with a learning disability and autism.
 - Adolescents presenting and admitted with risk taking behaviours, including injury due to violence.
 - Drug and alcohol presentations and cases involving domestic abuse.
 - Increase in adults with mental health presentations who have required Intensive Care support, along with supporting their children during a very difficult time.
 - Increase in support to the Palliative Care team at RBH who are experiencing more families that have a range of complex social issues and the Safeguard Team offer that support and liaison with partner agencies.
- The safeguarding and safe discharge of babies and children who have been abused and children and young people with vulnerabilities, including mental health needs admitted to the RBH is monitored closely by the Safeguarding Team.
- On-going work with frontline practitioners around the interface liaison and discussion with children's social care and CAMHS remain a challenge, especially for 14 – 17 year-old inpatients.
- Covid-19 has and will continue to have a huge impact on children and families socially and economically. The impact for RBH has and will be seen in the complexity and vulnerability of child protection cases presenting to practitioners at the frontline and the safeguarding team.
- The capacity of the NNCP and child safeguarding team to support the demand for level 3 training, the Rapid Reviews and learning process and the number and complexity of cases presenting to RBH. These cases require longer admission, more multiagency meetings and the use of the escalation policy internally and externally to partners to ensure the safety and safeguarding of children and young people. The increase in the number of requests from the Local Authority Joint legal Team for notes or statements for family court proceedings and the increase in children on child protection plans in Berkshire West has and will continue to result in significant pressure on the capacity of the Safeguarding Administration Team.
- It is highly likely that during 2023, Brighter Futures for Children, Reading, will be inspected by Ofsted/CQC under their Joint Targeted Agency Inspection (JTAI) framework. This will require the child safeguarding team to respond swiftly and efficiently, so that we can evidence multi-agency working and plan and prepare for 'Criminal Exploitation' and 'Front Door'.

Activity:

Year	Total	%↑↓
2020/21	1393	7% ↑
2021/22	1842	32% ↑
2022/23	1758	5% ↓



Year	Total	%↑↓
2020/21	655	6% ↑
2021/22	756	15% ↑
2022/23	700	7% ↓

Ongoing child protection and safeguarding challenges / risks:

- Nurse vacancies and turnover on Paediatric Wards and ED.
- Safeguarding skills and experience of practitioners in managing complex cases.
- The numbers of children and young people with mental health problems at risk from self-harm and suicidal ideation attending the Emergency Department.
- The large number of neuro-divergent <16s with disordered eating being admitted to the paediatric unit detained under the Mental Health Act requiring admission to Tier 4 Child and Adolescent Mental Health. Many of these are delayed in the Royal Berkshire Hospital and have increased length of stay.
- The Trust does not have an adolescent or young person service model or facility to consistently support unscheduled admission 13 – 16 year old to Paediatrics or 16 – 24 year olds to adult wards.
- Capacity of the child safeguarding team to manage the increase in activity and complexity. To mitigate risk by supervising, providing management oversight, challenging and escalating. To participate in Berkshire West Safeguard Children Partnership activities including case reviews, multiagency audit and JTAI inspections; deliver training and internal and external governance responsibilities.
- While Covid-19 challenged all services, the greatest safeguarding risk continues to be to children and young people and ensuring a robust approach to protecting them from harm and the impact still continues to affect children and young people.

Key Areas of Work for 2023/24:

- Continue to respond to emerging child protection and safeguarding trends and themes due to the psycho-social impact of Covid19 and the rise in cost of living on the most vulnerable children, young people and families.
- Continue to offer supervision/ reflective sessions for all Paediatric and Emergency Department and Paediatric Ward staff as part of their level 3 child protection updates.
- Work closely with senior nurses in Paediatrics to ensure knowledge and skills are embedded in their practice, alongside the safeguarding champions and ensure all staff receive the Back to Basic training.
- Continue to audit referrals made to each Local Authority within Berkshire West to ensure that good, clear and concise referrals are being made for children and adhere to the audit plan agreed for 2023.
- Continue to monitor young people who attend and are admitted to the RBH with mental health needs, conduct disorders and particularly eating disorders and work closely with the clinical teams, Lead Nurse for Mental Health and all partner agencies.
- Work closely with our Local Authorities who are expected to have a Joint Targeted Area Inspection in 2023.

4. MATERNITY CHILD PROTECTION

Key Achievements:

Maternity child protection activity continues to increase significantly with more complex cases presenting. The Named Midwife Child Protection (NMCP) works closely with frontline practitioners in both our hospital and community maternity teams and partner agencies to ensure that protecting the unborn and baby from harm remains the focus. To ensure that vulnerabilities and potential for abuse is recognised and that each baby is safely managed and discharged from our wards and other services.

Child Safeguarding Clinical Nurse Specialist (CNS) started in May 2021 and is a great asset.

In January 2023, we secured a 6 month secondment for a Maternity Safeguarding Practitioner, who has been a great asset and work is ongoing to continue the secondment past the 6 months.

NMCP continues to work closely with partner agencies to promote the sharing of information between agencies. Monthly meetings with all 3 local authorities (LA) to discuss cases and operational issues build relationships, for joint working, improve information sharing, support professional challenge and promote the welfare of unborns and babies.

Referrals to our three key LAs have been audited for clarity, quality and voice of the child. All audits show that referrals made are clear, with concise decisions around safeguarding unborns and babies. Where issues are identified, reflection with practitioners enhances practice.

The transition of new Heads of Midwifery has been successful, NMCP meets with Head of Midwifery on a monthly basis or as needed to discuss high risk cases, emerging themes or concerns.

Specific maternity child protection data demonstrating the level of activity, complexity and intensity needed to safeguard mothers, unborn and new born babies are included in monthly Integrated Board Report:

- Unborn safeguarding concerns raised
- Unborn babies on child in need/child protection plans
- Women reaching Poppy Team criteria and the Poppy team caseload.
- Babies born on child in need/child protection plans
- The number of invites to Child Protection Conferences, along with attendances and report produced for the Conferences.

Partnership Working:

The NMCP or the Maternity Safeguarding Practitioner attends:

- Poppy team allocation meetings to get an overview of new referrals, potential risks and to provide ongoing support and advice.
- Meetings of Named Midwife Regional and National networks, to gain insight into pressures in other Maternity Units, bringing learning and good practice back.
- Vulnerable women’s meetings. (A member of the Brighter Futures for Children’s and Reading Early Help team also attend, which is beneficial.)
- Brighter Futures for Children monthly Pre-birth Meetings which includes the local authority legal team.
- Wokingham Children Social Care have established bi-monthly strategic child safeguarding health liaison meetings and monthly Pre-birth meetings.
- West Berkshire hold Monthly Health Liaison Meetings, this year we rewrote the Terms of Reference for these meetings to ensure we are being as effective as possible.

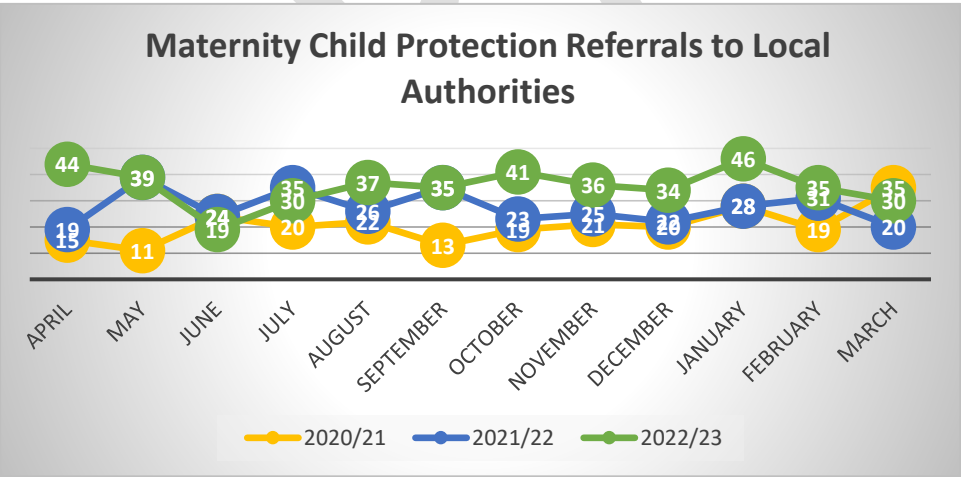
The NMCP continues to support clinical teams, particularly the Poppy Team, by providing 1:1 supervision and management oversight of highly complex cases.

The Child Safeguarding CNS Band 7 provides monthly group and individual case supervision as necessary for Community Midwifery teams managing high levels of vulnerability.

Having considered the recommendations of the National Child Safeguarding Panel Report - Safeguarding children under 1 from non-accidental injury caused by male carers in practice.

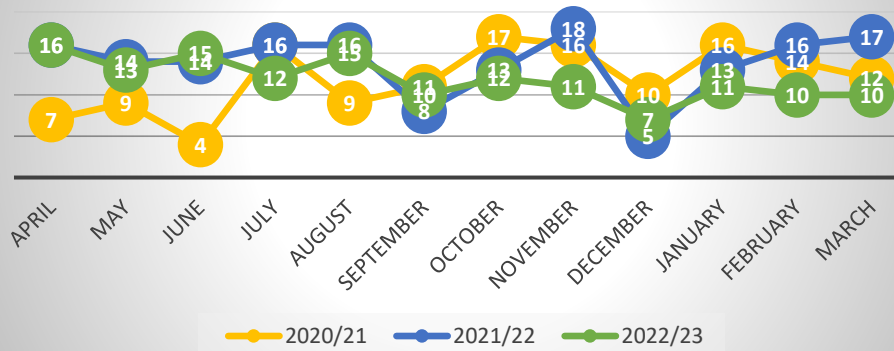
- Brighter Futures for Children have set up a multiagency ‘Dad’s to Be’ course, which has been well evaluated
- In West Berkshire Midwives have set up a father’s group.
- Multidisciplinary maternity team meetings to offer support and ensure visibility within Maternity Services to all staff.

Activity:



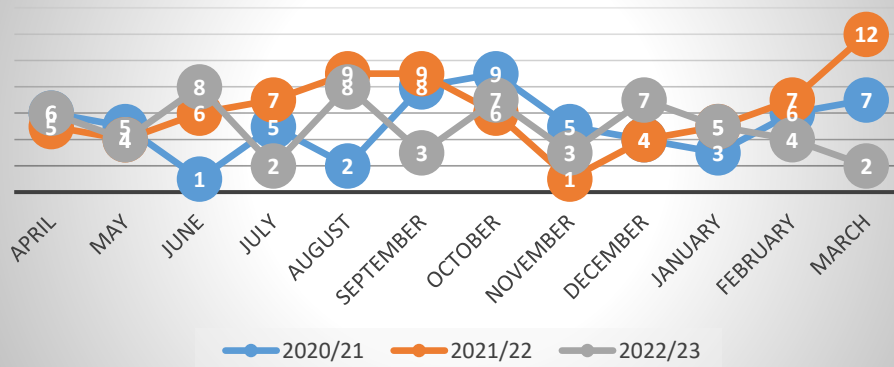
Year	Total	%↑↓
2020/21	247	10% ↑
2021/22	327	32% ↑
2022/23	426	30% ↑

Maternity Child Protection Case Conference Invites, Unborns



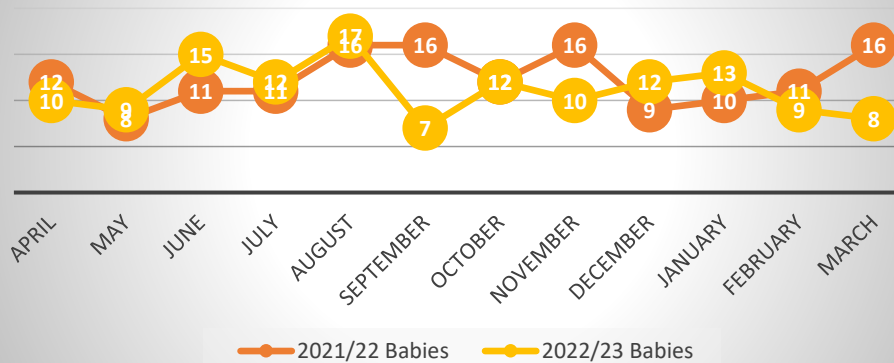
Year	Total	%↑↓
2020/21	141	17% ↑
2021/22	166	17% ↑
2022/23	142	14% ↓

Babies Born on Child Protection Plan



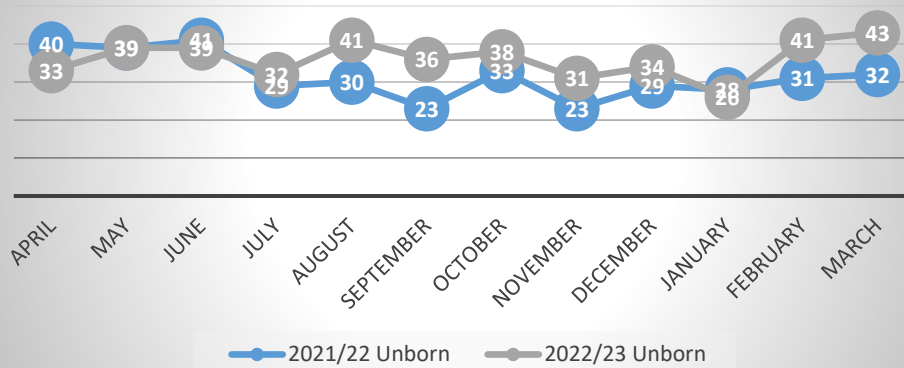
Year	Total	%↑↓
2020/21	61	
2021/22	75	22% ↑
2022/23	59	21% ↓

Babies on CP/CIN Plans



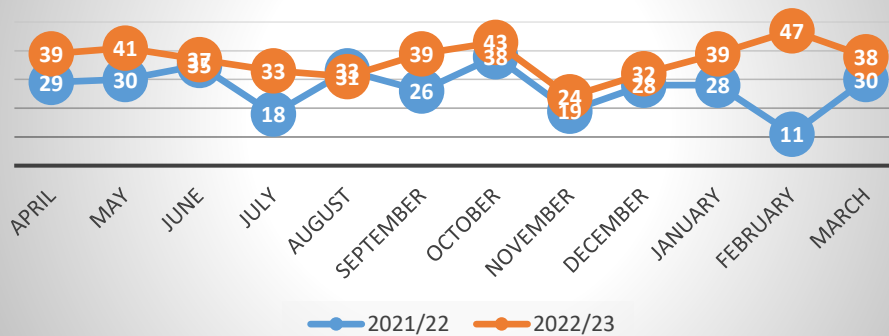
Year	Total	%↑↓
2021/22	148	
2022/23	138	9% ↓

Unborn Babies on CP/CIN Plans



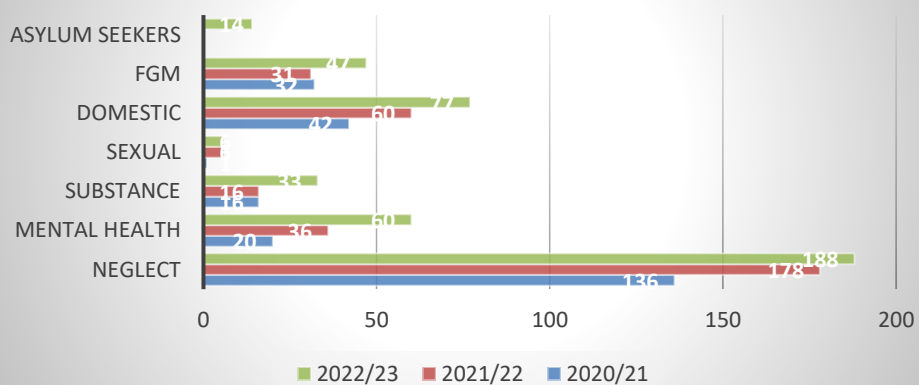
Year	Total	%↑↓
2021/22	378	
2022/23	433	15% ↑

Number of Women reaching Poppy Team criteria

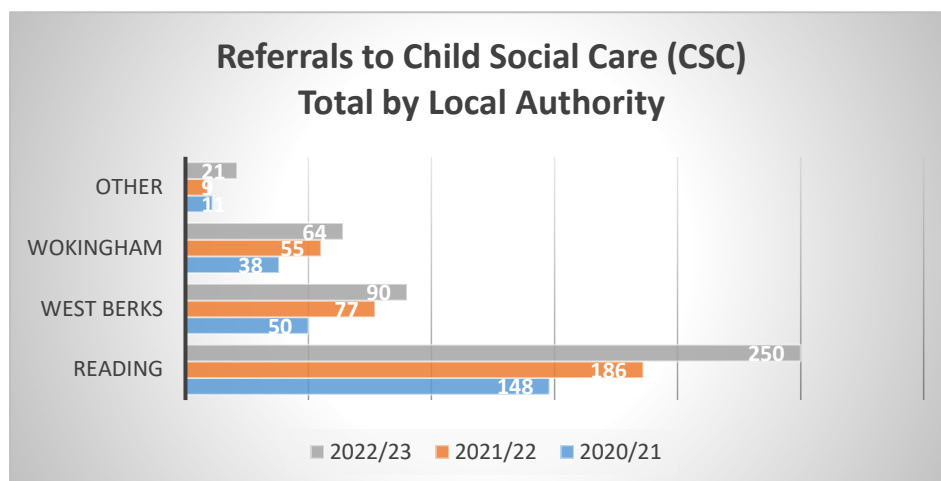


Year	Total	%↑↓
2021/22	325	
2022/23	443	36% ↑

Referrals to Child Social Care (CSC) Type of Abuse



Year	Total	%↑↓
2020/21	247	
2021/22	327	32% ↑
2022/23	425	30% ↑



Year	Total	%↑↓
2020/21	247	
2021/22	327	32% ↑
2022/23	425	30% ↑

Ongoing maternity child protection challenges / risks:

- Trajectory of increased activity and complexity.
- High turnover of midwifery staff – safeguarding skills, confidence, professional curiosity.
- Capacity of NMCP to respond to increasing demand for safeguarding supervision case oversight and training in Maternity services and maintain their trusted visible approachable model.
- Ensuring that safeguarding is integral during changes to operational and patient safety models e.g. the implementation of continuity of care and recommendations from the Ockendon Report
- To secure further funding for Maternity Safeguarding Practitioner Role

Key Areas of Work for 2023/24:

- Review the capacity within the Maternity Child Safeguarding Team - develop a Business Case.
- Continue with bespoke training, supervision, management oversight of cases with staff and multiagency working.

4.1. Local Authority Vulnerable Person Figures for 2022/23

5. MATERNITY MENTAL HEALTH

A referral into social care due to poor mental health is only considered when it is likely to impact on the mother's or partner's ability to safeguard their unborn or successfully parent their child. Many parents suffer from mental health issues but are able to protect and prioritise their children and meet all their physical, emotional and psychological needs.

Over the past three years the referrals into social care have increased threefold, this may be due to a better understanding of the impact of poor mental health; however we also know that the Covid-19 Pandemic has had a significant impact on the mental health of the general public.

Key Achievements:

- Birth Reflections clinic continues to support families
- A new Birth Reflections support worker has joined the team, who is extremely experienced with supporting women in distress
- Increased capacity in the joint perinatal mental health and obstetric clinic with the Berkshire Perinatal Mental Health Team
- Appointment of new Trainee ACP for perinatal mental health
- Perinatal Mental Health provide Level 3 training
- Perinatal Mental Health continue to attend the Vulnerable Persons meeting to share information with Midwifery and Health Visiting services to ensure best outcomes for families.

Key Concerns:

- The increased number of women experiencing poor mental health impacting the workload of midwifery, obstetrics and perinatal mental health professionals

Ongoing maternity mental health challenges / risks:

- On-going impact of Covid-19 on women's mental health and previous birth experiences.
- Staffing pressures in the Berkshire Perinatal Mental Health Team have meant we have been unable to progress with a plan to add additional clinics to our joint Mental Health clinic

Key Areas of Work for 2023/24:

- Continue to review expansion of joint perinatal mental health clinic when staffing capacity allows
- Expansion of joint clinic specialist midwife role once Birthrate Plus assessment available.
- Head of Midwifery to Completing a Birth rate plus assessment in Oct, to assess the increased complexities of midwifery cases to consider whether the Trust has the correct number of Midwives for the number/complexity of women booked and delivering at the Royal Berkshire Maternity Unit.

6. FEMALE GENITAL MUTILATION (FGM)

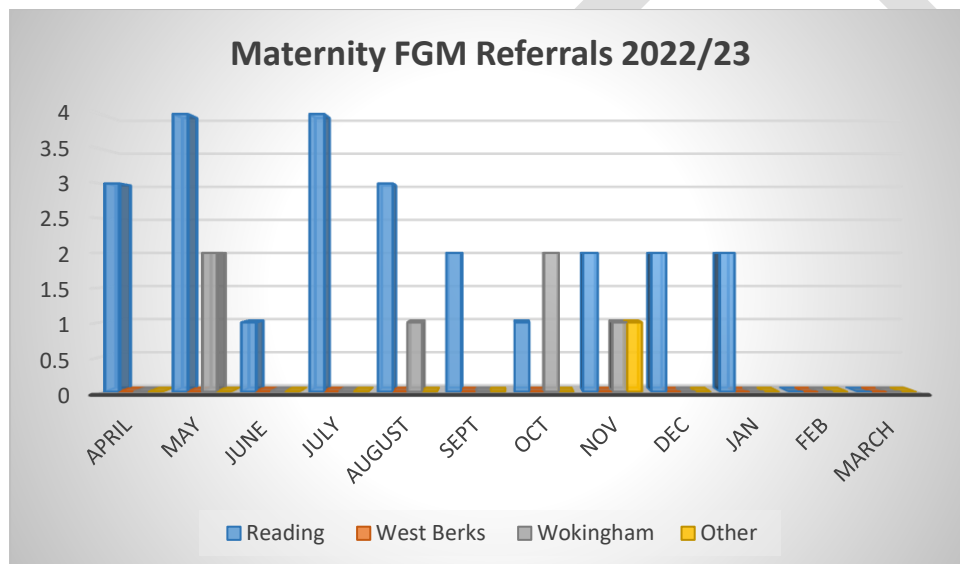
Key Achievements:

- The Trust remains fully compliant with adding FGM-IS to the National Spine; the safeguarding team are responsible for adding this data.
- NMCP provides FGM figures each quarter to BWSCP.
- FGM policy has been reviewed and updated in line with National Guidelines.

Partnership Working:

- NMCP monitors the FGM activity on a monthly basis and ensures that Maternity Services are compliant with reporting to the relevant social care the female infants born to women who have undergone FGM.
- Dr Leila Rushamba, Obstetrics and Gynaecology Specialist and Trust FGM Clinical Lead continues to run a clinic at the Royal Berkshire Hospital, every two weeks where she sees all pregnant women affected with FGM.

Activity:



- Increase of referrals from 27 in 21-22 to 35 referrals in 22-23
- A further 7 referrals made when female infants born to women that had undergone FGM and all added to FGM-IS
- The Trust including Paediatrics, have had no referrals regarding FGM within the last year.
- Sexual Health made 3 referrals all with appropriate referrals

Ongoing Female Genital Mutilation (FGM) challenges / risks:

- Continue to provide training to all maternity staff to ensure all staff are aware of FGM guidelines and follow the guidelines when caring for women who have undergone FGM.
- Together with the Maternity Equality project lead, explore working with Utuliva Women's Group a Reading based charity around the topic of FGM, including support that could be offered to women and targeted update training for our staff.

Key Areas of Work for 2023/24:

- Ensuring all staff are aware of the risks of FGM and continue to follow guidelines especially in reporting to social care female infants that have been born to women who have undergone FGM.

7. CHILD PROTECTION AND SAFEGUARDING CHILDREN AT DINGLEY CHILD DEVELOPMENT CENTRE (CDC)

7.1. Child Protection Medicals

April 2022 – April 2023:

197 children seen, which is an increase of 46 from last year

Age ranges: 81 under 5 years of age; 116 over 5 years of age

By Area 2022 – 2023:

Reading 76, West Berkshire 41, Wokingham 80.

Compared to previous year 2021-2022: Reading 50, West Berkshire 9, Wokingham 64, 12 unaccounted for.

7.2. Child Protection (CP) Peer Review Meeting

CP peer review meeting are held one a months. All senior and junior clinicians are in attendance plus Named or Designated Professionals for safeguarding

7.3. Child Protection Network Meeting

Ongoing efforts are being made to fully embed the meeting with all three local authorities. The goal is to receive feedback on outcomes for Child Protection medical assessments and to discuss any issues around process.

7.4. Looked After Children (LAC) and Fostering and Adoption

Adult health assessment numbers: 278 which has increased by 119 assessments from year 2021-2022.

Pre adoption medical assessments: 102 which has increased by 53 from previous year.

Prospective adopter's consultations: 10 which was 24 in previous year.

Fostering / Adoption Panel attendance: once or twice a month.

Due to high demands in the CLA service we have recruited a second Pre adoption medical advisor. This will allow coverage for sickness and annual leave and provide more flexibility within the system.

Ongoing child protection and safeguarding children at Dingley Child Development Centre (CDC) challenges / risks:

- The number of child protection medical referrals continues to increase.
- Due to national changes of trainee rota we have less junior doctors available to cover the CP rota, a new specialty doctor was recruited to cover the gap.
- Recruitment of a medical support worker trained in chaperone work and developmental assessment who is able to support CP medical assessments.
- Referral process from social care to Dingley is going well. Since the introduction of our referral form, we have received more detailed referral information.

8. CHILDREN & YOUNG PEOPLE MENTAL HEALTH / CHILDREN WITH SPECIAL EDUCATIONAL NEEDS AND DISABILITY (SEND)

Key Achievements:

- Good representation at Berkshire West strategic committees and task and finish groups.
- Regular representation at SEND Berkshire West Joint Implementation Group (JIG).
- Good working relationship with the Designated Clinical Officer for Special Educational Needs and Disabilities (0-25).
- Focussed piece of work undertaken to review crisis pathways for young people experiencing crisis with MH and/or SEND.
- Improvements in system working regarding young people with MH issues has led to a significant reduction in young people admitted with MH crisis
- Launch of RBH LD/A working group at RBH- all age.
- SEND family forums represented at CYP strategy delivery group.
- Increased number of SEND notifications from Dingley.
- Early years support in attendance of our Dingley MDT meetings which facilitates working together and early interventions for families.
- Established transition pathway for children with complex neurodisability to adult service
- Ongoing development of the Neurodisability Nurse Role at Dingley to support Children with complex needs and their families.
- Participation in research projects in conjunction with the UoR to improve patient care.

Areas of Concern:

- Specialist LD/CAMHS service has been commissioned but significant delays in launch of service due to recruitment challenges. No confirmed date for launch but estimated for Q4 2023/24. The proposed LD CAMSH service work force is unlikely to meet the demands of the area due to high number of patients in need for the service.
- CYPIT activity significantly increased with long waiting times.
- CYP long waiting times for spinal surgery in OUH.
- Psychology services- progress is slow but additional funding has been identified to increase Psychology provision in RBH.
- CYPIT physio - and occupational therapy provision for children at school age – living in different borough to school location, home schooled children, children in independent school settings, provision for children in mainstream schools without an EHC plan, lack of long term care for children with non-neurological long term condition (i.e. connective tissues disorders, osteogenesis imperfecta).
- Limited access to hydrotherapy pools.
- Lack of support/ treatment for children with FND (Functional Neurological Disorder).
- Lack of specialise autism intervention for children with and without learning disabilities.
- Lack of ARFID support (limited diet due to sensory issues in context of autism leading to nutritional deficits). So far we parents are able to access advice on you tube from Dieticians, OT and SALT.
- Schools struggle to provide universal support (“ordinary available”).
- Lack of family support services on site (increased number of vulnerable families not able to access service due to language barrier, poverty, cultural differences, learning disability, mental health issues...). Such families often do not access services and follow sign posting. On site services would be more accessible to families.

- Lack of tiered sleep service locally (impacting on behaviour which again impacts on clinical assessment and treatment. Lack of commissioning of GP's to prescribe melatonin hence patients cannot be discharged by Paediatrician which is not cost effective.
- Lack of obesity service again this impacts in treatment of other conditions such as cerebral palsy. Patients are compromised physically and lose ability to walk and rely more on their wheelchair due to their weight.

Key Areas of Focus 2023/24:

- Progress Psychology service development
- Development of place-based SEND partnership board, to support standardisation of services and consistency in prioritisation and service delivery.
- Progress SEND agenda within RBH LD/A working group.
- Continue multiagency approach to improving services for young people in preparing for adulthood, including co-production with families.
- Continue to build on coproduction working with families and young people.
- Health based therapy review (BHFT and RBH), commissioned by BOB, led by independent organisation - Clarity. Commencing June 2023.
- SEND notification for all children with additional needs at the earliest possible time.
- Development of a disabled friendly departmental web site and patient feedback tool (ongoing).

9. SEXUAL HEALTH

Key Achievements:

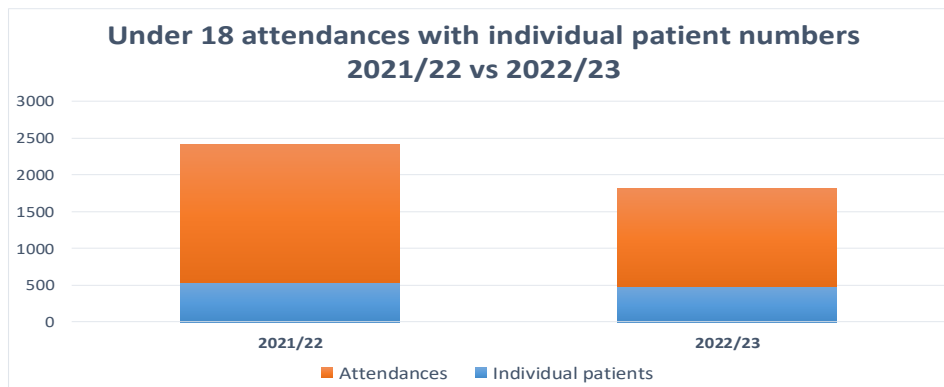
- Service Delivery - Service Level 3 Clinical Delivery at 21a Craven Road (Main hub)
- Service Delivery - Service Level 2 Clinical Delivery at Satellite Clinics at 3 locations across the 3 Local Authority Areas, Reading, Wokingham and West Berks, with a focus on holistic care.
- Service Delivery – Specialist Outreach Service delivered 289 appointments to vulnerable patients under the age of 19 who were otherwise unable to access mainstream services.
- Service Delivery - Specialist Outreach Service delivered 651 (50% increase on 2021/22) appointments to vulnerable patients who were otherwise unable to access mainstream services – (ages 13 to 55)
- Safeguarding processes – all under 18's continue to have a full safeguarding assessment carried out at the time of each and every consultation
- Safeguarding Process – all vulnerable patients over the age of 18 have an assessment at each consultation which enquires about exploitation, substance use, mental health, learning disability and sex work. Care is delivered appropriately according to particular vulnerability need identified
- Safeguarding process – all patients, regardless of sex or gender are asked about domestic abuse and all female patients asked about FGM
- Training – Safeguarding Training is delivered every other month for 60 minutes to all staff in clinic. Topics rotate according to need/ new guidelines/legislation etc
- Training – Safeguarding 'drop-in' sessions held weekly for 30 minutes for junior staff to discuss cases in an informal setting to aid learning
- Supervision – Safeguarding supervision is embedded for clinical staff that encounter challenges on a regular basis. Conducted by the RBH Safeguarding Team and Designated Nurse for Safeguarding Children, BOB (Depending on Clinician)
- Staffing - Post of Safeguarding Health Advisor successfully converted to substantive post from secondment

Partnership Working:

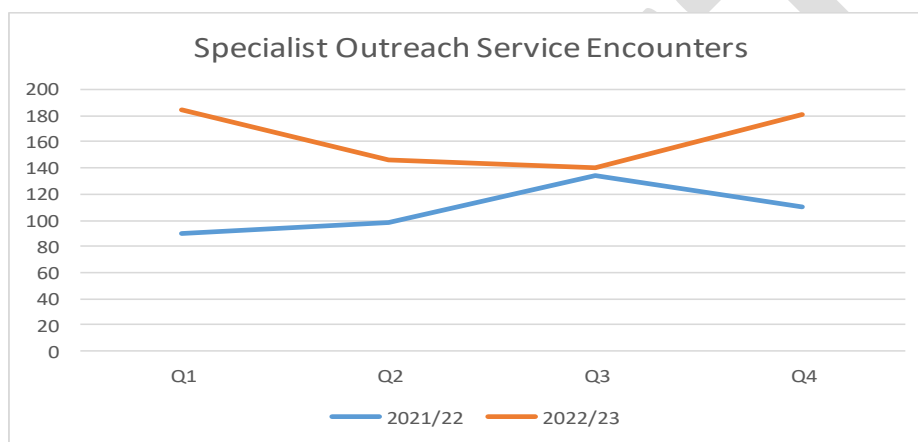
- Pan-Berkshire – Attendance at Pan-Berkshire Exploitation Sub group
- Local Authority – Participation at 3 Local Authority Child Sexual and Criminal Exploitation Risk Assessment Committees
- Local Authority – Participation at 3 Local Authority Strategic Exploitation/Serious Violence Committees
- Local Authority – Participation at exploitation workshops, reflective reviews, audit and challenge and Task and Finish Groups
- BHFT – Joint clinics held with BHFT colleagues for vulnerable cohorts of patients
- RBH – attendance at various committees to ensure appropriate information is shared across RBH main services and sexual health for patients in common
- RBH – participant in various events held externally for vulnerable members of the local community (eg Seeking Sanctuary for asylum seekers)
- Voluntary Sector – participation with Community Outreach services coordinated by charities to reach vulnerable cohorts of patients (eg RAHAB for sex workers)

Activity:

Attendances to all Sexual Health Services 2021/22 vs 2022/23



Specialist Outreach Service Encounters – All ages (13-55)



Ongoing sexual health challenges / risks:

- Current and prolonged staff shortage continues to provide challenges with demand and capacity
- Increasing complexity of safeguarding encounters
- Changes to Local Authority safeguarding processes providing additional/changing workload

Key Areas of Work for 2023/24:

- Change in Service Delivery hours commencing July 2023
 - Some early/late/weekend and walk-in clinics reintroduced
- Review of transition pathways for patients entering adulthood who are known to sexual health
 - Including inter-speciality pathways from RBH
- Review of safeguarding assessments to ensure they are in line with national, local and best practice guidance
- Review of safeguarding MDTs (currently on hold due to capacity challenges) to ensure they are effective
- Specialist Outreach Service to resume regular clinics with partners (eg substance misuse organisations) when staffing allows

10. SAFEGUARDING ADULTS

Key Achievements:

The safeguarding adults' clinical governance meets quarterly. SAR action plans are monitored by this group.

Adult safeguarding, mental capacity and domestic abuse policies are under review.

NCG and UCG safeguarding medical leads attend adult clinical Governance alongside the Matrons from the three care groups.

The Trust Domestic Abuse working group continues, see DVA report.

Both virtual and face to face training has continued throughout 2022/23 this has included level 2 adult safeguarding and Enhanced mental capacity, DoLS training and level 3 sessions held monthly.

Learning from SARs continue to be included in face to face and virtual training.

Level 3 Adult Safeguarding training continues and compliance is monitored on a weekly basis.

Prevent awareness training continues via e-learning and compliance is monitored on a weekly basis.

Adult safeguarding concerns raised against the Trust are triaged and a fact-finding investigation completed by the Lead Nurse or Safeguarding Practitioner for Safeguarding Adults. Common themes continue to be around pressure damage and discharge. There have been a small number which have highlighted that district nurses referrals have not been made where the patient required assistance with insulin administration. This has been investigated via the patient safety route.

No prevent concerns have been raised.

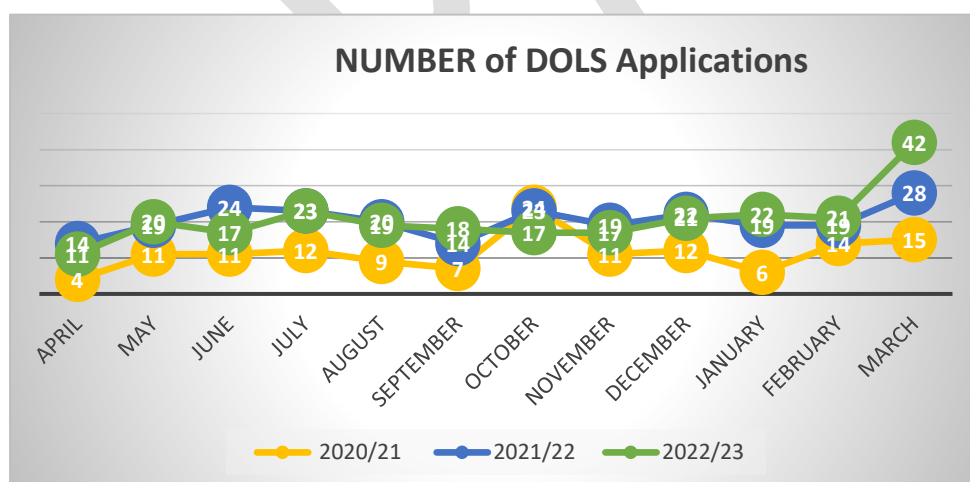
Partnership Working:

The table below outlines all the external meetings members of the Adult Safeguarding Team attend:

MEETING	FREQUENCY	LENGTH	WHO ATTENDS
West of Berkshire safeguarding adults board	Bi-monthly	2 hours	Head of safeguarding
West of Berkshire Safeguarding Adult Board Subgroup Learning and development	4 times a year	2 hours	Lead Nurse Adult Safeguarding
West of Berkshire Safeguarding Adult Board Subgroup Communications	3-4 times a year	2 hours	Lead Nurse Adult Safeguarding
West of Berkshire Safeguarding Adult Board Subgroup Performance and quality	4 times a year	2 hours	Lead Nurse Adult Safeguarding
Pan Berkshire Policy and Procedures	2 times a year plus task and finish groups as required	2 hours	Lead Nurse Adult Safeguarding
West of Berkshire Safeguarding Adult Board Subgroup Safeguarding Adult Review	Monthly	2 hours	Lead Nurse Adult Safeguarding
MARAC (3 local authorities)	X 3 monthly one for each local authority	Variable, up to 6 hours	Lead Nurse Adult Safeguarding OR Safeguarding Practitioner (Adults) OR Maternity Safeguarding Practitioner

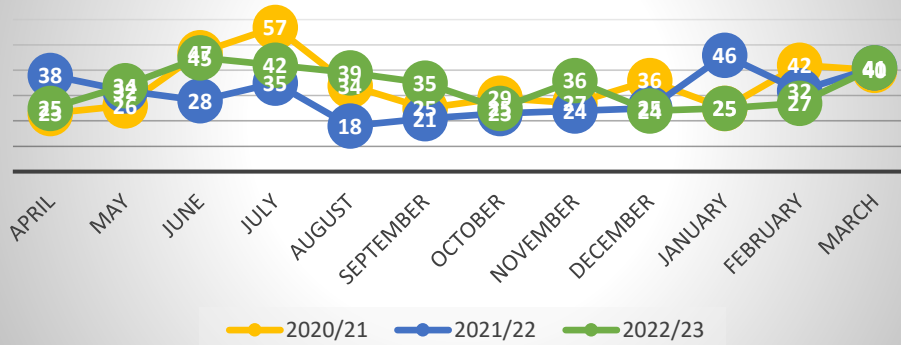
MEETING	FREQUENCY	LENGTH	WHO ATTENDS
DVA local authority groups (3 local authorities)	Monthly	2 hours	Lead Nurse Adult Safeguarding OR Safeguarding Practitioner (Adults)
Local and regional Liberty Protection/ Mental capacity /DOLS groups	Monthly (approx.)	Variable, up to 2 hours	Lead Nurse Adult Safeguarding
Adult Safeguarding Strategy Meeting	As required	Variable	Lead Nurse Adult Safeguarding OR Safeguarding Practitioner (Adults)
Domestic Homicide reviews	As required, 2 DHR this year	Variable	Lead Nurse Adult Safeguarding
Alana House Project	Variable	Variable	Lead Nurse Adult Safeguarding and Head of Safeguarding
West Berks PREVENT Board	4 times a year	2 hours	Lead Nurse Adult Safeguarding
Named and Designated safeguarding professionals meeting	X2 yearly	2 hours	Lead Nurse Adult Safeguarding
			Lead Nurse Adult Safeguarding and Head of Safeguarding

Activity:



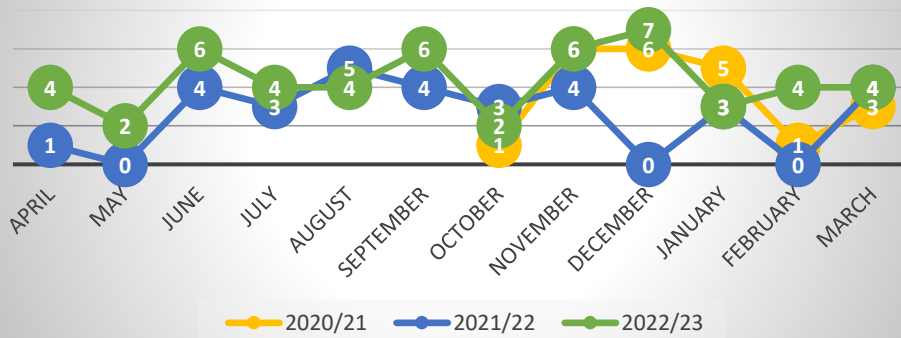
Year	Total	%↑↓
2020/21	136	33% ↑
2021/22	244	79% ↑
2011/23	248	2% ↑

Adults Safeguarding Referrals raised by the Trust (where harm occurred outside the Trust)



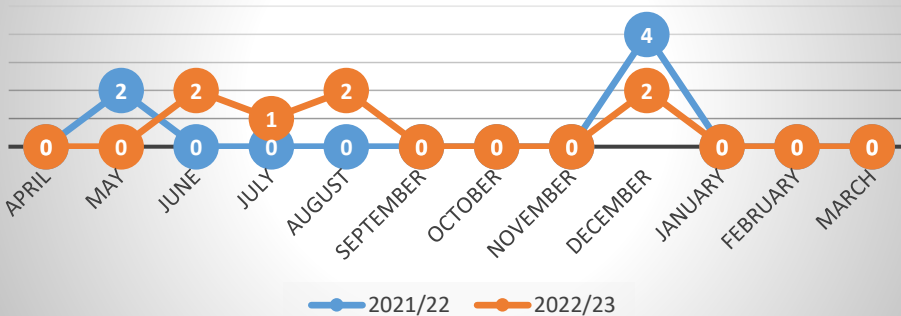
Year	Total	%↑↓
2020/21	411	9% ↑
2021/22	363	12% ↓
2022/23	398	10% ↑

Adults Safeguarding Referrals raised against the Trust



Year	Total	%↑↓
2021/22	31	41% ↑
2022/23	52	68% ↑

Concerns reported by RBFT where Harm Alleged Occurred whilst in the Trust



Year	Total	%↑↓
2021/22	6	
2022/23	7	17% ↑

Ongoing safeguarding adults' challenges / risks:

- Mental capacity audits have shown some improvement in documentation of Mental Capacity Assessments (MCA) but the implementation of the MCA continues to be monitored and work is ongoing to improve the quality of documentation.
- Routine questioning to be introduced (June 2023) via an EPR question for the identification of Domestic abuse. This will be promoted throughout the trust and the use of this question will be monitored and reported to adult clinical governance.
- There has been a slight increase in the number of Deprivation of Liberty Safeguard (DoLS) applications made during 2022-2023 from the previous year. Work continues with ward areas to identify those patients require a Dols.

Key Areas of Work for 2023/24

To continue working with ward and department areas to embed the MCA Audit and promote good practice around assessment and documentation.

Continue to promote the project within the Trust and monitor the effectiveness of the Alana House/RBH DVA Project.

Continue work via the domestic abuse working group to embed enquiry into EPR as well as development of training and documentation to improve knowledge and best practice.

11. DOMESTIC ABUSE

Key Achievements:

- DVA Working Group meetings held every month.
- DVA Audit March 2023.
- DVA back to basics training developed and delivered on wards.
- Alana House working partnership ready to launch April 2023.
- Adoption of Health Referral Form developed by BHFT.
- DVA champions recruitment ongoing.
- Conferences/updates – One in October 2022 and one planned for May 2023.
- Domestic Abuse staff guidance leaflet updated and disseminated.

Partnership Working:

The table below outlines all the DVA external meetings attended by the Safeguarding Team:

MEETING	FREQUENCY	LENGTH	WHO ATTENDS
MARAC (3 local authorities)	X3 monthly one for each local authority	Variable, up to 6 hours	Lead Nurse Adult Safeguarding OR Safeguarding Practitioner (Adults) OR Maternity Safeguarding Practitioner
DVA local authority groups (3 local authorities)	Monthly	2 hours	Lead Nurse Adult Safeguarding OR Safeguarding Practitioner (Adults)
Domestic Homicide reviews	As required, 2 DHR this year	Variable	Lead Nurse Adult Safeguarding
Alana House Project	Variable	Variable	Lead Nurse Adult Safeguarding and Head of Safeguarding

Ongoing DVA challenges / risks:

- Routine questioning to be introduced (June 2023) via an EPR question for the identification of Domestic abuse. This will be promoted throughout the trust and the use of this question will be monitored and reported to adult clinical governance.
- Supporting staff to feel confident in asking about and responding to DVA through training to ensure they know how to assess and refer or signpost appropriately.
- Attendance at DVA working group can be variable. To work with clinicians to ensure quorate attendance at the meetings and that if a specific champion from an area cannot attend, to ensure a delegate is sent in their place.

Key Areas of Work for 2023/24

- To continue working with ward and department areas to develop and delivery DVA training around asking about, assessing and referring/signpost to supportive services.
- Implementation of DVA EPR question.
- Roll-out the Alana House/RBH DVA Project within the Trust and monitor the effectiveness of this.
- Continue to work with the domestic abuse working group to embed enquiry into EPR and support staff to document appropriate and improve practice.
- Implementation of Management of DVA at Royal Berkshire Hospital Guide and Management Pathway.
- Working towards extracting figures from EPR when staff ask the embedded question related to domestic abuse as part of their routine enquiry when assessing patients in their care.

12. MENTAL HEALTH

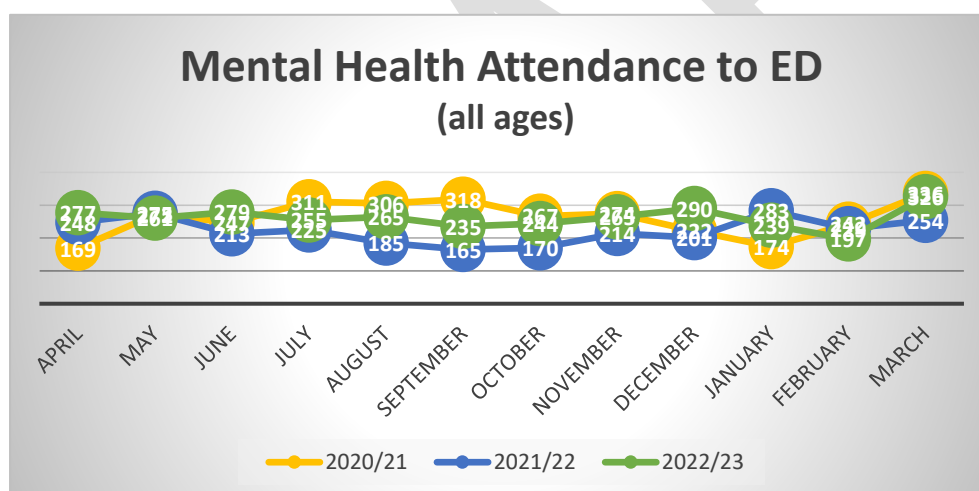
Key Achievements:

- Working group with BHFT re-established around improving transfers of patients between the mental health hospitals and the acute hospitals revisiting previous ideas of a “red bag” scheme, patient passport type documents, sharing of safety plans and include thematic learning from incidents or complaints.
- Breathing Space (Crisis Café for over 18's) (BHFT and Together UK) in reach service into the RBH Emergency Department started in February 2023.
- Band 8a CAMHS Liaison and Clinical Interface Lead agreed by BHFT to support patient flow through acute hospital. Due to start in post May 2023.
- Working group established to review current practice and develop new guidance on Enhanced Observations for vulnerable patients. Pilot planned for May and June 2023.

Partnership Working:

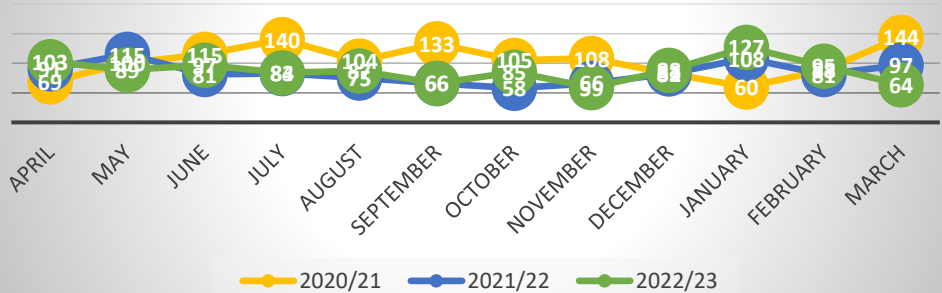
- Frequent attenders – Have asked for summary from PMS.
- Berkshire West Suicide Prevention group.
- Provision of training by BHFT for purpose of refeeding in acute wards.

Activity:



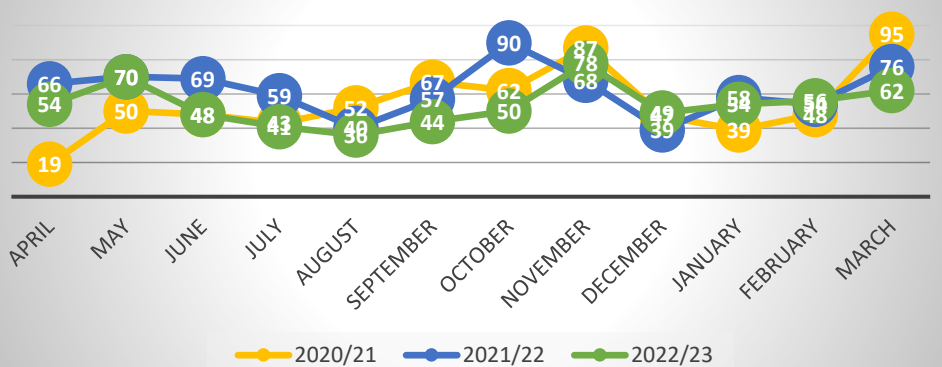
Year	Total	%↑↓
2020/21	3138	12% ↓
2021/22	2662	15% ↓
2022/23	3133	17% ↑

Mental Health Patients Admitted to RBH (all ages)



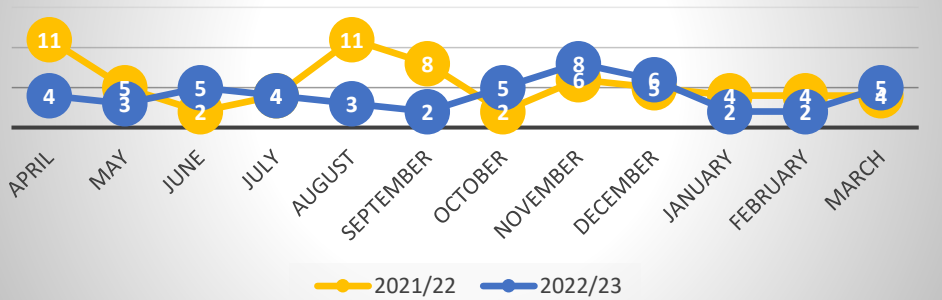
Year	Total	%↑↓
2020/21	1249	22% ↓
2021/22	1003	19% ↓
2022/23	1044	4% ↑

CYP Mental Health Totals



Year	Total	%↑↓
2020/21	657	4% ↑
2021/22	746	13% ↑
2022/23	642	13% ↓

Number of Detentions under the Mental Health Act (all ages)



Year	Total	%↑↓
2021/22	66	
2022/23	48	24% ↓

Ongoing mental health services challenges / risks:

- Delays in discharge from the RBH to mental health beds across all ages.
- 2022/3 saw young people facing additional challenges around autism and other neurodiversity with or without mental health illnesses presenting to the RBH. Increase in young people with SEND – with a diagnosis of Learning Disability or who are neuro-divergent with complex neuro-disability and challenging behaviour/mental health problems.
- Feedback from PPH and RBH staff about communications when transferring patients between hospitals.
- Redevelopment of ED mental health space in early 2023/4. Currently risk for ED due to impact on department and mental health patient experience and safety.

Key Areas of Work for 2023/24:

- Establishing role, monitoring and evaluation of Band 8a CAMHS Liaison and clinical interface post.
- Approval of Enhanced Observation guidelines at PAG and development of audit.
- Ongoing Working group for transition of MH patients between hospital services (PPH and RBH).
- Review and update of all mental health policies/protocols/guidance:
 - Self-harm and suicide Incl. ligature reduction audit
 - Illicit substances on hospital premises
 - Mental Health Act

13. LEARNING & COMPLEX DISABILITIES – ADULTS

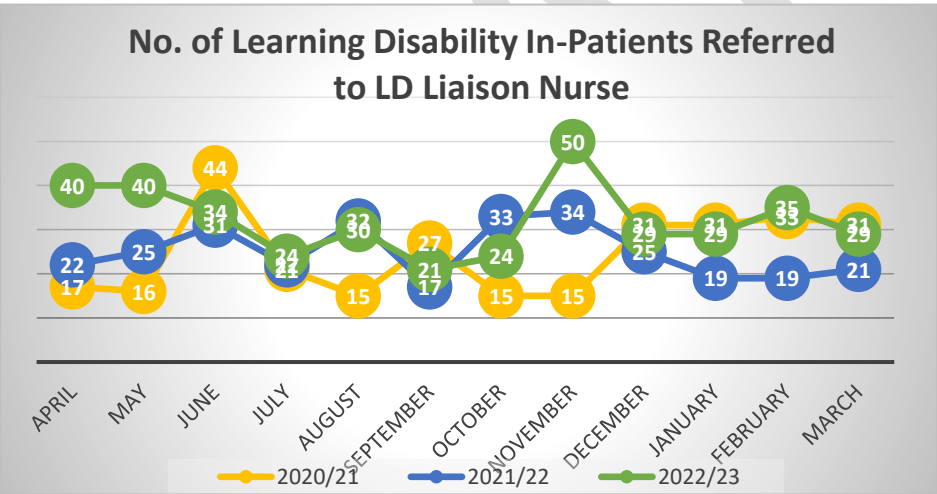
Key Achievements:

- Learning disability and autism steering group set up.
- Roll out of sunflower scheme.
- Pilot of Oliver McGowan training.
- Treat Me Well training rollout for wards - back to basics.

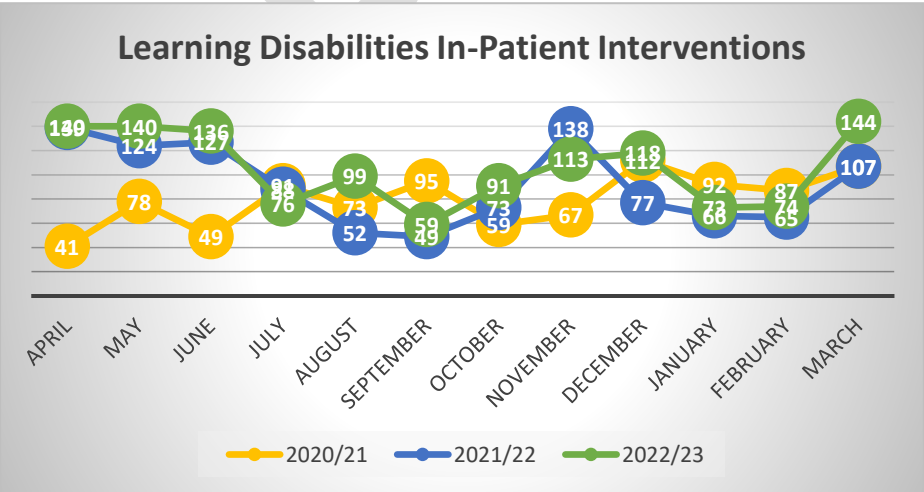
Partnership Working:

- Learning disability and Autism steering group.
- Attendance at CTPLD meetings in Berkshire West- cross team working with other CTPLDs in other areas.
- Learning disability liaison nurse networks- BOB and Southern.
- LeDer
- LD Partners - BOB lead these meetings.
- Partnership Groups- Advocacy People.
- Working relationships with local advocacy groups including Advocacy People, Reading Mencap, West Berkshire Mencap, CLASP.

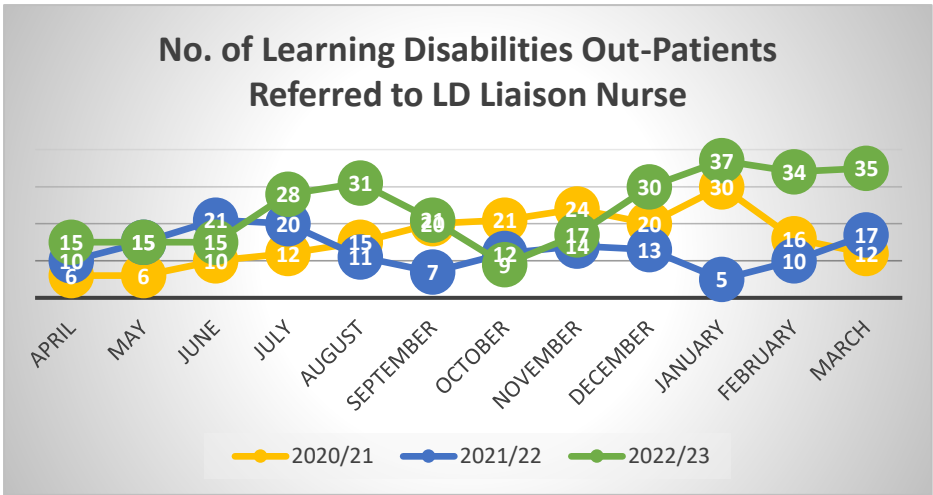
Activity:



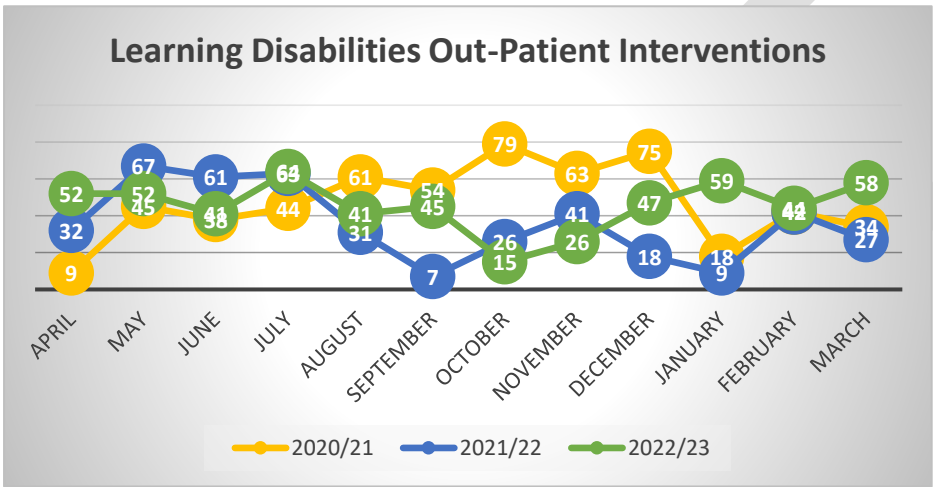
Year	Total	%↑↓
2020/21	296	19% ↑
2021/22	300	1% ↑
2022/23	385	28% ↑



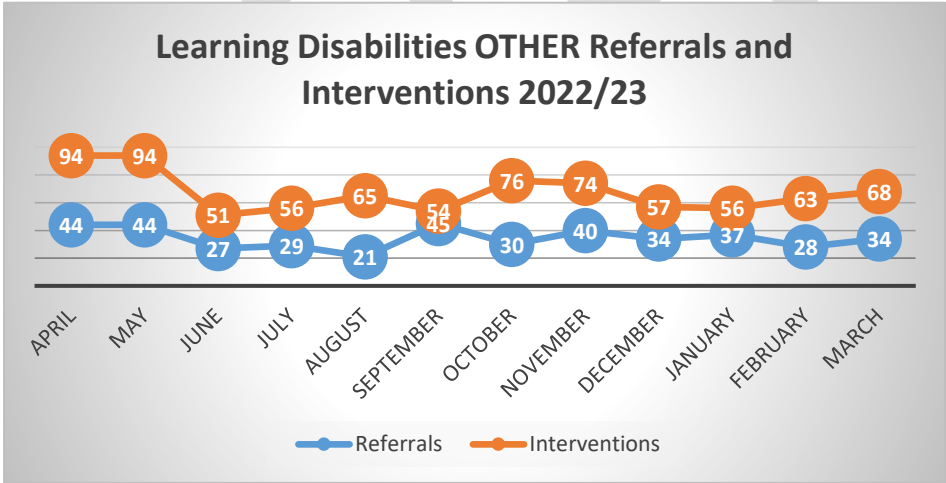
Year	Total	%↑↓
2020/21	951	181% ↑
2021/22	1105	16% ↑
2022/23	1263	15% ↑



Year	Total	%↑↓
2020/21	192	29% ↑
2021/22	155	19% ↓
2022/23	287	85% ↑



Year	Total	%↑↓
2020/21	562	66% ↑
2021/22	424	25% ↓
2022/23	544	28% ↑



Year	Total	%↑↓
Referrals	413	
Interventions	808	

Ongoing issues for patients who are neuro diverse.

- There are a growing number of patients referred to the Learning Disability Liaison Nurses who don't have learning disabilities but have additional needs such as autism or other types of neurodiversity. These patients need support to access hospital services and are not always receiving the support they request / require. The LDLNs are able to facilitate reasonable adjustments but the service does not have the capacity to support fully the needs of these patients safely and effectively.

Key Areas of Work for 2023/24:

- The appointment of a support worker to the LDLNs team to enable more patient facing engagement for patients with a learning disability.
- To continue to provide back to basics style training to the ward.
- Oliver McGowan mandatory training roll-out.
- Changes to the process of invoices for familiar carers and tightening the governance around familiar carers.

DRAFT

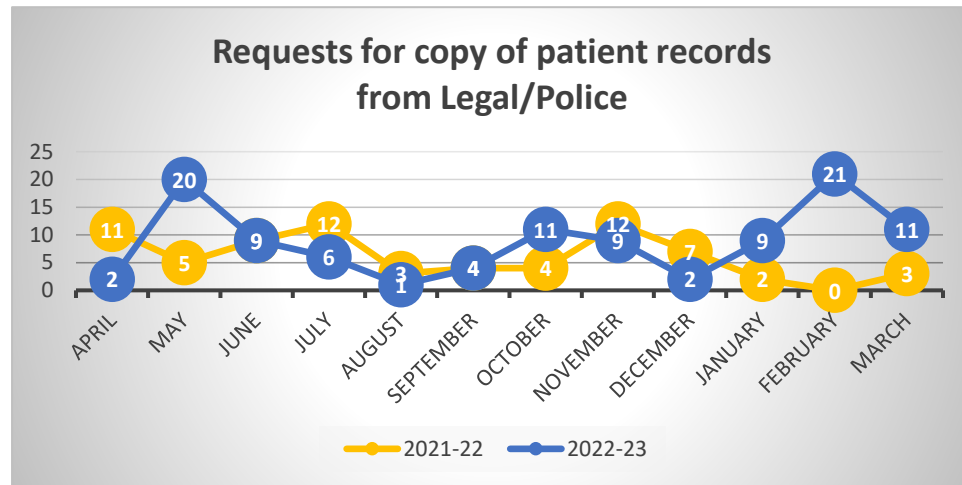
14. ADMINISTRATION

Key Achievements:

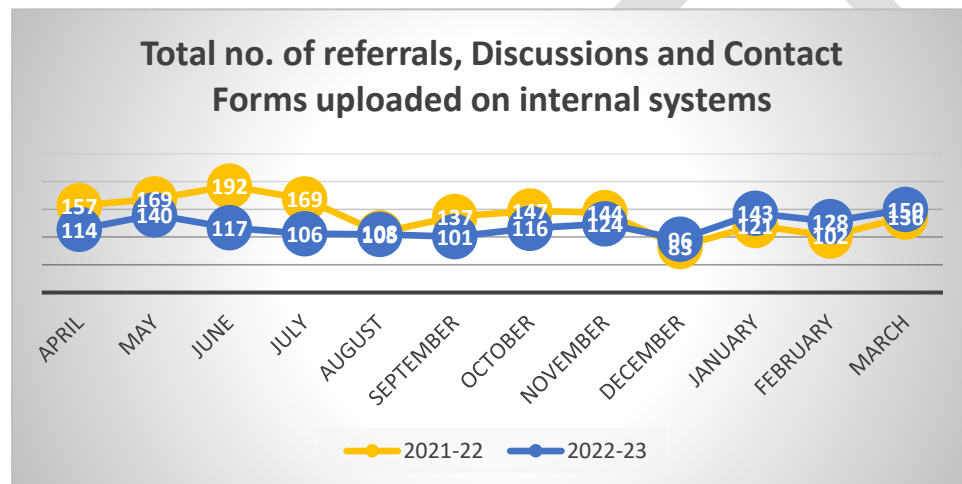
- The admin services which are provided to the Team are regularly reviewed by the Safeguarding Administration & Pathway Manager which includes the administration of meetings, reporting, data collection and flagging processes and procedures to ensure robust systems are in place to support the Safeguarding clinical team and Trust governance.
- Administration & Pathway Manager developing role as IT/IG/EPR champion.
- Meeting Governance:
 - Reviewed Safeguarding Committee and Working Group Governance in line with Trust standards
 - Review of Agenda and Minute templates
 - Set up a meeting schedule for the year
 - Reviewed, set up and maintained an attendees register
- Regular IG audits and priority actions are completed to ensure that the right people have access to highly confidential information and those that no longer require access were removed:
 - Individual emails
 - Group emails
 - Safeguarding, mental health, learning disability, mortality, allegations shared drive
- Informatics:
 - Reviewed and standardised safeguarding speciality reporting templates
 - Reviewed methodology for gathering and reporting data template to allow for reporting by local authority
- Recruitment process and induction:
 - Standardised approach to induction process to ensure IT equipment, email, ID card etc. are available

Key Challenges, Risks & Concerns:

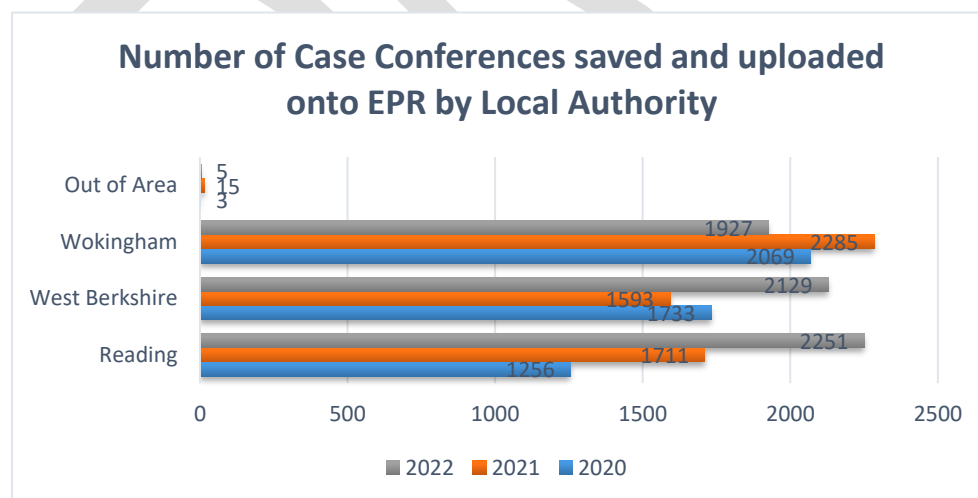
- 10.38% increase in documentation concerning child protection conferences and plans emailed from local authorities.
- The workload and capacity of the administration team to:
 - Undertake Level 3 Adults training in order to ensure compliancy of all Trust staff.
 - Scanning of all CP documentation to EPR, the risk to children if that information is not available to our frontline practitioners.
- 12.63% increase in referrals, discussions and reports uploaded to EPR compared to same period in 2022.
- 45% increase in requests for patient notice from Legal and Police compared to 2021/22.
- 20% increase in number of Joint Agency Review Meetings for child death and other child death related meetings.
- The significant increase in ad hoc tasks i.e legal notes and child death can cause backlog of day to day workload.

Activity:

Year	Total	%↑↓
2020/21	92	53% ↑
2021/22	72	21% ↓
2022/23	105	45% ↑

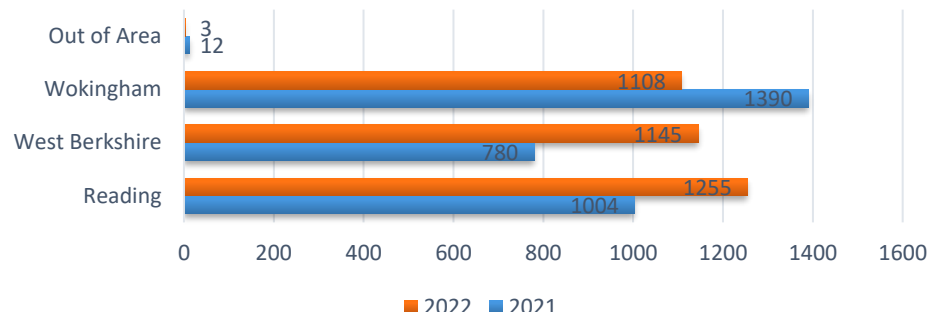


Year	Total	%↑↓
2020/21	1727	3% ↓
2021/22	1665	3% ↓
2022/23	1440	13% ↓



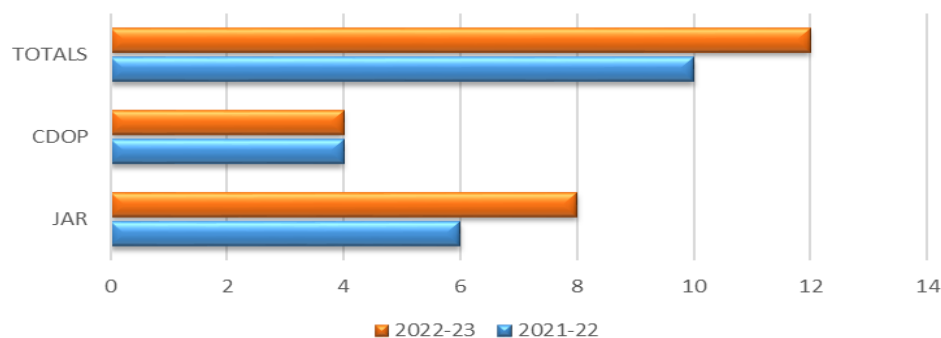
Year	Total	%↑↓
2020	5061	7% ↑
2021	5604	10% ↑
2022	6312	12% ↑

Number of E-Mails received from Locality Authorities



Year	Total	%↑↓
2021	3186	
2022	3511	10.20% ↑

Joint Agency Review & Child Death Review Meetings



Year	Total	%↑↓
2021/22	10	
2022/23	12	20% ↑

Ongoing risk based priorities challenges / risks:

- The admin team continues to struggle with capacity to deal with the current work load and require addition admin support of a Band 2 to assist with the uploading of conference papers etc.
- Capacity within the administration team to manage the significant rise in child safeguarding activity.
- Capacity within the administration team to manage the significant rise in number of Joint Agency Review Meetings for Child Death.
- Safeguarding office capacity and environment to support increased team.

Key Areas of Work for 2023/24

- Recruitment of additional staff within the Administration Team to manage significant rise in activities within the Safeguarding Team.
- Production of an instruction manual of all administrative tasks undertaken with the Admin Team.

15. APPENDICES

15.1. Appendix 1 – Summary of Training Activity 2022/23 and Plans for 2023/24

(A) Safeguarding Adults Training

All staff are required to undertake safeguarding adults training to the level that their job requires. Adult safeguarding training has been reviewed following the publication of the Intercollegiate Document: Adult Safeguarding: Roles and Competencies for Health Care Staff, 2018.

Level 3 safeguarding adults. Training plan is in progress this has been a complex piece of work due to the limitations of the systems used to record staff training. The plan for 2023/24 is to develop an improved platform for the monitoring and reporting of this specific training.

Level 2 training has continued to be offered via E-learning, virtual and face to face sessions.

For those staff requiring level 1 training, who do not have access to computers in order to undertake e-learning and are unable attend face to face sessions due to their working patterns. The safeguarding workbook continues to be used by managers in specific areas to go through with their staff.

Safeguarding training has been removed from induction training, work has been ongoing to re-establish this.

(B) Safeguarding Children Training

All staff are required to undertake child protection training to the level that their job role requires. Our child protection training is compliant with 'Intercollegiate Document: Child Protection Roles and Competencies for Health Staff, 2019'. The Trust offers a comprehensive training plan for all staff from level 1 through to level 3 plus offers bespoke training to certain areas like Intensive Care Unit and the Route to recruit practitioners.

Child protection training is offered in a variety of ways, so that staff can access their training. The level 1 and 2 training is offered, Face to Face monthly on the mandatory training days and twice a month virtually. Staff can also access E-Learning for both level 1 and 2.

Level 3 child protection training is a full day face to face and is offered 3 times a year, with monthly updates virtually which cover all themes of child protection to meet the current local and national needs of safeguarding and continue to enhance staff's knowledge and skills.

A gap analysis was conducted in 2021 against the 'Intercollegiate Document Competencies' which identified gaps in knowledge and skills within the certain areas of urgent care. A 'Back to Basic' training was formulated and rolled out to Paediatrics, Maternity, and Emergency Department. In 2023/24 this training will continue in these areas and extend into Intensive care unit and Acute Medical Unit.

(C) Domestic Abuse

Domestic abuse is raised in face to face adult and all levels of child safeguarding training; specific domestic abuse training is available for maternity staff. Domestic abuses sessions were held as part of level 3 adults training. The Level 3 days for the children's workforce include clear guidance for staff who are working closely with children and families on how to support and refer to other agencies where there are parental risk indicators. We remind staff of the importance of routine questioning in relation to domestic abuse. The Domestic Abuse Working Group continues and the prompts for routine questioning is now on EPR. Back to basic domestic abuse training has been offered to wards and departments.

(D) Prevent (Anti-Terrorism Training)

Prevent awareness forms part of the level one training for all staff and is included in adult and child safeguarding training. The competency for awareness training has been applied to all staff on the MAST system. If staff are unable to participate in face to face training they are required to undertake e learning at the appropriate level. WRAP training has been delivered in 22-23 as part of level 3 updates.

(E) Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS)

MCA and DoLS awareness was delivered as part of the part of Trust induction safeguarding adults training and core mandatory training day. With the suspension of face to face training due to covid-19 this has not happened in 2021-22. Enhanced MCA and Dols training continued virtually during 2022-23 and was delivered to a key staff but was open to all staff who wished to attend, this took the form of a scenario-based discussion. This session will form part of the mandatory portion of the level 3 adult safeguarding requirement. Mental capacity training has also formed part of the 1-1 study day. Basic Mental Capacity training has recommenced face-to-face on Core Mandatory Training Day, uptake has been poor so far.

(F) Mental Health Training

The Lead Nurse Mental Health provides training to staff on the Mental Health Act (MHA), mental health disorders, stigma, and the processes in place within the hospital to support good patient care. This is delivered through the induction training programme for Registered Nurses (RNs), Midwives, Allied Healthcare Professionals (AHPs) and Clinical Support Workers (CSWs). A Mental Health study day runs four times a year. It is available to ED, Acute Medical Unit and Short Stay Unit nursing staff and includes situational discussions, suicide and self-harm awareness and risk assessment. Topics include mental health disorders, a basic understanding of the Mental Health Act, Mental Capacity Act, and has input from speakers from BHFT and addictions services. In 2022/23 all days were face to face, numbers of staff attending were limited due to Covid-19 restrictions. A Mental Health Act Quick Guide is available on the intranet as part of the Safeguarding Tool Kit. A mental health session features in the Effective Management of Enhanced Care training day for RNs and CSWs and includes the need for 1:1 mental health observations and how staff respond to, interact with and assess risk in patients. BHFT have provided bespoke training in therapeutic holding with updates for paediatrics and gastroenterology in 2022/23. In collaboration with BHFT BEAT training on working with children with eating disorders was provided May June and July 2022. This has also been made available to the staff on the Gastroenterology ward who often work with Young people with eating disorders. The Psychological Medicine Service contribute to the induction programme of new Emergency Department junior doctors on provision of liaison services at the RBH. In 2023/24 mental health awareness training continues to be provided at the Induction programme for AHP, RN, MW and CSW and on the Enhanced Observations training. Collaboration between BHFT and the RBFT for specialist training will continue to be discussed as needed with clinical teams at the RBH.

(G) Allegations and concerns Training

Safeguarding concerns and allegations awareness is delivered as part of child and adult safeguarding core mandatory training.

(H) Learning Disabilities (LD) and Autism (ASD)

The Learning Disability Liaison nurses (LDLN) provide introduction to learning disabilities training to new clinical starters including nurses, HCAs, and allied health professionals on a rolling monthly programme. It includes information about learning disability, identification, communication, resources available and where to get support for a patient with learning disabilities.

LDLN's also arrange and work with individual teams across the hospital ad hoc and as

workload allows to support following complex admissions or need for additional training.

A communication session is delivered on a training day for care crew teams and others who are providing 1:1 support. The Learning Disability Liaison Nurses work with clinical teams to improve understanding of the cognitively disabled patient in an acute health setting.

The Oliver McGowan mandatory autism and learning disability eLearning is due to be rolled out Summer 2023.

DRAFT