

# Governing Body (Public) Meeting

DATE: 28<sup>th</sup> March 2013

Title	<b>Safeguarding Update</b>	
Recommended action for the Governing Body	That the Governing Body:  <b>Note</b> the attached report	
Executive Summary	<p><b>Savile Allegations</b></p> <p>David Nicholson wrote to all CEO's of provider organisations November 2012 following media coverage of the allegations of abuse involving Jimmy Savile to ask all boards of NHS Trusts and Foundation Trusts to review their arrangements and practices relating to vulnerable people, particularly in relation to safeguarding, access to patients and listening to and acting on patient concerns. This document summarises the response of SLHT and Oxleas.</p> <p><b>Missing Children</b></p> <p>Bexley Safeguarding Children Board has issued a briefing on missing children attached for information.</p>	
Which objective does this paper support?	<b>Patients:</b> Improve the health and wellbeing of people in Bexley in partnership with our key stakeholders	✓
	<b>People:</b> Empower our staff to make BCCG the most successful CCG in (south) London	
	<b>Pounds:</b> Delivering on all of our statutory duties and become an effective, efficient and economical organisation	
	<b>Process:</b> Commission safe, sustainable and equitable services in line with the operating framework and which improves outcomes and patient experience	✓
Organisational implications	Key Risks <small>(corporate and/or clinical)</small>	
	Equality and	Services are provided in a manner which

	Diversity	acknowledge and take account of equality and diversity issues
	Patient impact	Patient safety. The report details the arrangements in provider NHS trusts to ensure mechanisms are in place in relation to safeguarding, access to patients (including that afforded volunteers or celebrities) and listening to and acting on patient concerns.
	Financial	n/a
	Legal Issues	n/a
	NHS constitution	The NHS constitution has been considered in the writing of this report
<b>Consultation</b> (Public, member or other)	n/a	
<b>Audit</b> (Considered / Approved by Other Committees / Groups)	Provider trusts have presented assurance to their Boards. Quality and Safety Working Group	
Communications Plan	n/a	
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Date	18 <sup>th</sup> March 2013	

## **NHS Bexley CCG briefing: Savile allegations**

David Nicholson wrote to all CEO's of provider organisations 12 November following recent media coverage of the allegations of abuse involving Jimmy Savile. The three NHS organisations about whom allegations of abuse have been made – Stoke Mandeville Hospital, Leeds General Infirmary and West London Mental Health Trust – are undertaking reviews to ascertain what happened and whether there are any lessons to learn.

It is acknowledged that the nature of protection for children and young people in the NHS is far in advance of what it was in the 1970s and 1980s, but it is important we are assured as commissioners that existing NHS procedures are robust.

David Nicholson has therefore asked all boards of NHS Trusts and Foundation Trusts to review their arrangements and practices relating to vulnerable people, particularly in relation to safeguarding, access to patients (including that afforded volunteers or celebrities) and listening to and acting on patient concerns.

### **Arrangements**

Bexley health organisations, both commissioning and provider, have structures and arrangements in place to ensure oversight by key board members of safeguarding children requirements. All organisations have identified executive accountable officers.

Bexley NHS Trusts and the CCG have appropriate policies and procedures in place which include safer recruitment, whistleblowing and managing allegations. All GP practices have been issued with a managing allegations flow chart. Safeguarding children training is actively managed through risk management and performance monitoring processes with clear targets established. Provider recruitment and training procedures extend to substantive staff, agency, bank staff and volunteers. Volunteers are not allowed to assist any patient with personal care. A role specification is issued to each volunteer and all have a line manager in their placement. Access to SLHT paediatric areas is limited to those with a valid reason to be there. Anyone without valid authority will be challenged by staff. The majority of parents remain with their children (and are encouraged to do so) thereby contributing to the safety of their child. If a parent is found in an unauthorised paediatric area they will be challenged. As part of Olympics planning preparations, a VIP plan was approved in July 2012. This document details the arrangements for dealing with privacy, security and the associated media interest within Trust sites. Celebrities are accompanied at all times when on trust premises.

Providers Trusts and the CCG have Patient Advice and Liaison services (PALS) and robust complaints procedures which are visible and accessible to patients and visitors.

Compliance is demonstrated through section 11 audits (arrangements to safeguard and promote the welfare of children) and annual reports presented to Provider

Boards and LSCB's. In July 2012 CQC found child safeguarding arrangements in Bexley health agencies to be good.

## Allegations

In addition to the assurance required to be provided to Boards, NHS SE London have asked for information relating to:

1. the number of cases that reached the threshold for referral to the LADO (Local authority designated officer) in provider organisations
2. Assurance that any allegations/ complaints that did not meet the threshold were subject to due process

The procedural framework is implemented in all cases where an allegation is made against an employee, volunteer or contractor where it is alleged that they may have hurt or harmed a child physically, sexually, emotionally or through neglect, committed a criminal offence against a child or has behaved in such a way towards a child that they may be considered as unsuitable to continue in their current employment or in any capacity which involves working with children. This framework would be used in cases where it is alleged that a member of staff has;

- Behaved in a way that has harmed a child, or may have harmed a child;
- Possibly committed a criminal offence against or related to a child; or
- Behaved towards a child or children in a way that indicates s/he is unsuitable to work with children

The CCG has received assurance from NHS providers that cases that meet the threshold have been referred to the LADO (Local Authority Designated Officer) and all cases are subject to advice and discussion with internal safeguarding teams, human resources and the LADO. Providers confirm that all referred cases that fall below the LADO threshold have been managed appropriately. This has included, where appropriate:

- Involvement of senior staff within the Trust
- Incidents being recorded on systems
- Staff being suspended (where appropriate) whilst incidents are investigated (with advice from HR)
- Staff re – training as required
- Review of policies and procedures
- Staff moving clinical placements
- Support and counselling offered to staff
- Individual supervision

### Number of cases reported to LADO 2011-12

Organisation	Reported to LB Bexley LADO	Additional information
SLHT	3	The referrals were not made by SLHT (Police and social care) and related to matters in employees' personal life

		and not the workplace.
OXLEAS	0	During 2012 Oxleas HR team received training from the Bexley LADO in relation to identification and reporting of allegations