



Annual Safeguarding Report

SAFEGUARDING ANNUAL REPORT

1 April 2023 to 31st March 2024

Purpose:

The purpose of this report is to provide assurance to the Here Board that the services for which it is accountable are operating and responding appropriately and within best practice guidelines with regards to the safeguarding of adults, young people and children. This report will also demonstrate Here's compliance with CQC Regulation 13: Safeguarding service users from abuse and improper treatment.

Audience:

Here Board August 2024

Author:

Pippa Halley - Here Safeguarding Lead.

Note change in Safeguarding Lead from previous role holder, Helen Baker.

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1 Purpose

The following report and action plan for Here has been compiled by the Here Safeguarding Lead and Service Safeguarding Leads and provides an overview of activity and progress in

relation to our responsibilities towards the safeguarding of vulnerable children and adults during 2023/2024.

Previous safeguarding reports for Here have been produced using the calendar year. We have made the decision to modify our reporting to reflect the fiscal year instead, for consistency with our other reporting systems. This will enable increased accuracy and ease of future reporting cycles. Within this report, it means we are comparing calendar years 2022 to financial year 23/24.

It should be noted that the previous Here Safeguarding lead, Helen Baker, has now left the organisation and this role has been taken over by Pippa Halley.

2 Introduction

2023 has seen significant changes across our healthcare system with the imbedding of integrated care systems, integrated care partnerships, provider collaboratives, primary care networks, and local maternity and neonatal systems, and new legislation which will impact how we all safeguard people and populations.

In June 2024, NHS England published Safeguarding Children, Young People and Adults at risk in the NHS – Safeguarding Accountability and Assurance Framework (SAAF) which incorporates and implements the Children’s Social Care Reforms and the Working Together to Safeguard Children 2023 revised legislation for multi-agency safeguarding arrangements. [NHS England » Safeguarding children, young people and adults at risk in the NHS](#)

The SAAF set outs the safeguarding roles and responsibilities of all individuals working in providers of NHS-funded care settings and NHS commissioning organisations.

The framework provides guidance and minimum standards to:

- Identify and clarify how relationships between health and other systems work at both strategic and operational levels to safeguard children, young people and adults under the care of the NHS at risk of abuse or neglect.
- Clearly set out the legal framework for safeguarding children and adults as it relates to the various NHS organisations, to support them in discharging their statutory duties and requirements to safeguard children and adults.
- Outline principles, attitudes, expectations, and ways of working that recognise safeguarding is everybody’s responsibility, and that the safety and wellbeing of those in vulnerable circumstances are at the forefront of our business.
- Outline the ways in which NHS England Regional and National teams support integrated care boards (ICBs) accountability and leadership at local level, fostering effective place-based partnerships.
- Identify clear arrangements and processes to be used to support evidence-based practice and provide assurance at all levels, including NHS England Board, that safeguarding arrangements are in place and are effective.
- Promote equality by ensuring that health inequalities are addressed and are at the heart of NHS England, ICB and provider values.

The responsibilities for safeguarding identified in the SAAF form part of the statutory functions for each organisation and its executive board must therefore ensure effective discharge within agreed baseline funding.

The Here approach towards safeguarding children (individuals under the age of 18 years), young people (aged 16-18yrs) and adults (individuals over the age of 18 years) is defined in the Here Safeguarding Children and Adults Policy and aligns to Here's purpose of delivering ***exceptional care, for everyone.***

Key Legislative Framework

Legislative Framework for All:

- [Crime and Disorder Act 1998 \(legislation.gov.uk\)](https://legislation.gov.uk)
- [Female Genital Mutilation Act 2003 \(legislation.gov.uk\)](https://legislation.gov.uk)
- [Sexual Offences Act 2003 \(legislation.gov.uk\)](https://legislation.gov.uk)
- [Mental Capacity Act 2005 \(legislation.gov.uk\)](https://legislation.gov.uk)
- [Convention on the Rights of Persons with Disabilities - Articles | Division for Inclusive Social Development \(DISD\) \(un.org\)](https://www.un.org)
- [Mental Health Act 2007 \(legislation.gov.uk\)](https://legislation.gov.uk)
- [Children and Families Act 2014 \(legislation.gov.uk\)](https://legislation.gov.uk)
- [Modern Slavery Act 2015 \(legislation.gov.uk\)](https://legislation.gov.uk)
- [Serious Crime Act 2015 \(legislation.gov.uk\)](https://legislation.gov.uk)
- [Mental Capacity \(Amendment\) Act 2019 \(legislation.gov.uk\)](https://legislation.gov.uk)
- [The NHS Constitution for England - GOV.UK \(www.gov.uk\)](https://www.gov.uk)
- [Domestic Abuse Act 2021 \(legislation.gov.uk\)](https://legislation.gov.uk)
- [Serious Violence Duty: draft guidance for responsible authorities \(accessible version\) - GOV.UK \(www.gov.uk\)](https://www.gov.uk)
- [Prevent duty guidance: England and Wales \(2023\) - GOV.UK \(www.gov.uk\)](https://www.gov.uk)
- [NHS England » Safeguarding children, young people and adults at risk in the NHS](#)

Legislative Framework for Adults

- [European Convention on Human Rights \(coe.int\) 1998](https://www.coe.int)
- [Care Act 2014 \(legislation.gov.uk\)](https://legislation.gov.uk)
- Care and Support Statutory Guidance- Section 14 Safeguarding [40573_2902364_DH Care Guidance accessible pdf \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk)
- [Adult Safeguarding: Roles and Competencies for Health Care Staff | Royal College of Nursing \(rcn.org.uk\)](https://www.rcn.org)

- [Deprivation of Liberty Safeguards 2007](#)
- [Equality Act 2010](#)

Legislative Framework for Children

- [UN Convention on Rights of a Child \(UNCRC\) - UNICEF UK](#)
- [Children Act 1989 \(legislation.gov.uk\)](#)
- [Children Act 2004 \(legislation.gov.uk\)](#)
- [Promoting the health and wellbeing of looked-after children - GOV.UK \(www.gov.uk\)](#)
- [Children and Social Work Act 2017 \(legislation.gov.uk\)](#)
- [Working together to safeguard children 2023: statutory guidance \(publishing.service.gov.uk\)](#)
- [Children's social care: reform statement - GOV.UK \(www.gov.uk\)](#)
- [Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff | Royal College of Nursing \(rcn.org.uk\)](#)
- [Looked After Children: Roles and Competencies of Healthcare Staff | Royal College of Nursing \(rcn.org.uk\)](#)
- CQC Registration Standards, Health and Social Care 2008 (Regulated Activities) Regulations 2014: Regulation 13: Safeguarding Service users from abuse and improper treatment.

Here also seeks to demonstrate that the CQC registered services are safe, effective, caring, responsive and well-led by providing evidence that:

- We give sufficient priority to safeguarding adults, young people and children.
- Staff take a proactive approach to safeguarding and focus on prevention and early identification.
- Staff take steps to protect adults and children where there are known risks, respond appropriately to any signs or allegations of abuse, and work effectively with other organisations to implement protection plans.
- There is active and appropriate engagement in local safeguarding procedures, and effective work with other relevant organisations.

[Regulation 13: Safeguarding service users from abuse and improper treatment - Care Quality Commission \(cqc.org.uk\)](#)

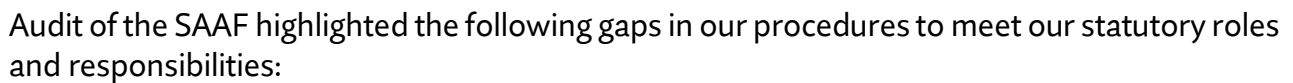
Here CQC Quality Statement on Safeguarding

QUALITY STATEMENT (“We” Statement – provider lens)	QUALITY STATEMENT (“I” Statement – user lens) What matters to them	Associated Guidance	CQC Evidence Required/Questions to Consider
SAFEGUARDING: <i>We work with people to understand what being safe means to them as well as with our partners on the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect. We make sure we share concerns quickly and appropriately.</i>	<i>I feel safe and am supported to understand and manage any risks.</i>	Regulation 9: Person-centred care	Evidence of collaborative working with partners to review and maintain assurance around management of quality issues relating to the patient pathway
		Regulation 11: Need for consent	Evidence that staff appropriately trained in safeguarding according to role
		Regulation 12: Safe care and treatment	Safeguarding annual report & Safeguarding examples in quality reports
		Regulation 13: Safeguarding service users from abuse and improper treatment	Evidence of knowledge of Mental Capacity/DoLs/Human Rights
			Named safeguarding Lead in place
			Evidence of open, transparent and safe culture
		Regulation 20: Duty of candour	Evidence that staff understand SG and know how to recognise abuse
			Examples of how we have adapted our approach to children and young people
			Evidence that safeguarding concerns are logged appropriately

3 Current Approach to Safeguarding

Safeguarding is everyone’s responsibility to both recognise and report concerns and we have the following mechanisms in place to support staff to manage this, following appropriate procedures and always taking consideration of what is in the best interests of the individual or individuals identified.

Following the introduction of the Safeguarding Accountability and Assurance Framework (SAAF), Here has audited its processes to provide assurance that we, as a provider organisation of NHS services, are fulfilling our statutory roles, responsibilities and functions (appendix i). The following Here Organisational Safeguarding Model (appendix ii) was developed to demonstrate how our safeguarding policies and procedures feed into the Here Quality Policy and our culture of safety, wellbeing, and collaborative learning. The model shows processes for reporting and escalating safeguarding concerns, a resilient structure in



- Providing effective safeguarding supervision arrangements for staff, commensurate to their role and function (including for named professionals).
- Comply with the principles contained in the Government Prevent Strategy and the Prevent Guidance; and include in relevant policies and procedures a comprehensive programme to raise awareness of the Government Prevent Strategy among Staff and volunteers in line with the NHS England Prevent Training and Competencies Framework. It should be noted that this largely lies with Sussex ICB but Here need to ensure that we are robustly linked to this programme.

Recommendations to ensure that Here is compliant with the SAAF are detailed at the end of this report.

3.1 Policies and Procedures

The Here Safeguarding Children and Adults Policy was updated in July 2024 in line with new legislation and is now due for renewal July 2026.

Summary of changes:

- Language and terminology updated to align with current documents and Sussex ICB feedback.

- Here Organisational Safeguarding Model drawn up to demonstrate how safeguarding processes fit within quality, learning and safety structure at Here.
- Legislative framework updated
- Definition of safeguarding children updated (Working Together to Safeguard Children, 2023)
- Requirement for safeguarding processes to be explicitly included in induction programmes.
- Requirement for all safeguarding concerns/referrals to be reported on datix.
- Addition of section on allegations against colleagues and role of Local Authority Designated Officer.
- Updated flowcharts and contact sheets.
- All links, referral procedures and contact information checked and updated.

All colleagues are made aware of the policy during their induction to the organisation. All organisational policies are held by HR on a central platform which all staff have access to and alerts them as policies are updated.

3.2 Specialist advice

All clinicians have access to specialist advice from a named safeguarding lead within their service, in addition to the organisation safeguarding lead, who is connected to the Sussex safeguarding network for wider support where required.

In addition, we work closely with our partner organisations to ensure our safeguarding approach is aligned to support partnership working and wider learning.

4 Training

Here Safeguarding training is provided by e-LfH (Health Education England) an e-learning programme in partnership with the NHS and Professional bodies providing high quality training of the NHS workforce across the UK and Sussex ICB Safeguarding training resources found at [Safeguarding training - NHS Sussex \(ics.nhs.uk\)](https://ics.nhs.uk/safeguarding-training)

All individuals, both clinicians and non-clinicians, employed or on a sessional contract must complete Safeguarding Adults and Children training every three years in line with the Intercollegiate competency frameworks:

[Adult Safeguarding: Roles and Competencies for Health Care Staff | Royal College of Nursing \(rcn.org.uk\)](https://rcn.org.uk/adult-safeguarding-roles-and-competencies)

[Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff | Royal College of Nursing \(rcn.org.uk\)](https://rcn.org.uk/safeguarding-children-and-young-people-roles-and-competencies)

Safeguarding training is provided through the following Statutory Mandatory Training:

- Safeguarding adults 1,2,3 and 4
- Safeguarding children 1,2 3 and 4
- Preventing radicalisation - Basic Prevent Awareness
- Identifying and supporting victims of modern slavery
- Oliver McGowan - learning disabilities and autism

The Here Statutory and Mandatory Training matrix details appropriate safeguarding training levels for specific roles and is clarified in the Here Safeguarding Children and Adults Policy.

4.1 Training Compliance

2023/24 saw the People Team at Here focussing on Statutory and Mandatory Training compliance throughout the organisation including Safeguarding training and has seen overall Training compliance improve significantly with the oversight of HR and Quasar and there are now clear, organisation-wide standards regarding compliance and monitoring of training. See relevant HR policies for details.

On a service level, training is monitored by the service leads.

Current training coverage is for Here's clinical service provision only (MSK, MAS and APC) which is shown below.

Non-Clinical staff working within clinical services are expected to complete safeguarding training Level 1 and 2. Clinical staff are expected to complete safeguarding levels 1 to 3 although completion of level 3 negates the need to undertake refresher training at levels 1 and 2 as this is covered. Here Safeguarding Lead is required to complete Level 4 training and access external safeguarding supervision.

Staff training rates are visible on Power BI and monitored weekly by HR. Training rates for this report are current at the time of writing. Training rates throughout the reporting period were captured by HR on a weekly basis and monitored regularly.

Cross-organisational training compliance data as of July 2024 is outlined below against a compliance threshold rate of 85%. This data shows a significant improvement in compliance across all services. In previous years, whilst compliance data for Safeguarding Levels 1 and 2 met the threshold of above 85%, compliance data for Safeguarding Level 3 ranged between 4% and 69%. There was no compliance data available for Basic Prevent Awareness, Identifying and supporting victims of modern slavery and Oliver McGowan training in previous years.

Safeguarding Level 4 and Prevent Level 3 are new requirements for safeguarding leads/executive set out in Here Safeguarding Children and Adults Policy so are marked in amber as training is in progress.

Statutory and Mandatory Training	Organisational Compliance
Safeguarding adults – Level 1:	95%
Safeguarding adults – Level 2	95%
Safeguarding adults – Level 3	86%
Safeguarding adults – Level 4 (New requirement for Here Safeguarding Lead)	0%
Safeguarding children - Level 1	93%
Safeguarding children – Level 2	94%
Safeguarding children - Level 3	88%
Safeguarding children – Level 4 (New requirement for Here Safeguarding Lead)	0%
Preventing radicalisation - basic prevent awareness	92%
Preventing radicalisation – Level 3 (New requirement for Here Safeguarding Lead and Executive Safeguarding Lead)	0%
Identifying and supporting victims of modern slavery	95%
Oliver McGowan - learning disabilities and autism	96%

Mechanisms are in place and identified in the Here Statutory and Mandatory Training Policy to ensure that these compliance rates are maintained.

5 Annual Safeguarding Audit

5.1 Incidents and Complaints

During the reporting period, there were no safeguarding complaints or serious safeguarding incidents or complaints recorded across the organisation's clinical services.

5.2 Safeguarding Concerns Raised

Safeguarding concerns were managed differently according to service needs:

The Memory Assessment Service keeps an accurate log of safeguarding concerns and referrals including dates, patients and staff involved, safeguarding leads, categories of abuse, actions,

referrals, communications with the MDT and Local authority and outcomes/follow-up enabling them to meet the specific needs of the people they see and incorporate actions into their personalised care plans.

Additional Primary Care log all safeguarding concerns and referrals on APC Safeguarding Log managed by the Governance Co-Ordinator and on Datix and use this to follow-up actions, outcomes of referrals and share learning.

Sussex MSK Partnership report all safeguarding referrals and concerns in Datix. As a high-volume service, MSK do not routinely follow up once a referral has been made and accepted, but in those instances where feedback is received from the safeguarding team, this information is disseminated and recorded appropriately. It should be noted that safeguarding referrals are also managed by MSK partner organisation SCFT through aligned safeguarding procedures. In their CQC Gap Analysis, MSK identified a need for additional support with raising safeguarding concerns. The actions and recommendations resulting from this report are detailed below and provide additional support as highlighted.

The Vaccination Service (VAX) reported all safeguarding concerns on Datix. This service ended in November 2023.

The updated 2024 safeguarding policy clarifies an organisational approach to safeguarding concerns and adds a requirement for all safeguarding concerns to be reported on Datix to ensure that all services follow-up and action concerns; to provide a record of safeguarding advice/support given by safeguarding leads; and to enable accurate cross-organisational audit and oversight of safeguarding concerns which feeds into the wider Here quality and learning structure.

It has previously been difficult to report and audit safeguarding incidents on Datix as there were no options for categories of abuse and mandatory options were misleading/inaccurate e.g. aggression, harassment. The following categories have now been added to Datix in line with Pan-Sussex Adult and Child Safeguarding Policies and Procedures:

Datix Categories for Reporting Safeguarding Concerns	
Adult	Child
<ul style="list-style-type: none"> • Physical • Sexual harm and exploitation • Neglect • Self-Neglect • Organisational Neglect • Financial • Psychological or emotional • Discrimination • Modern Slavery 	<ul style="list-style-type: none"> • Physical • Sexual • Neglect • Emotional and psychological • Female Genital Mutilation (FGM)

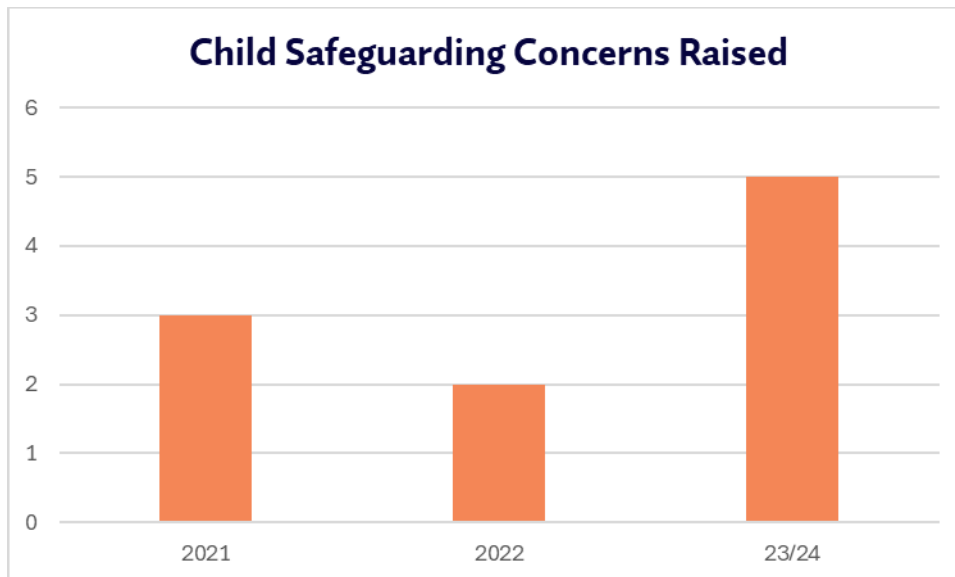
<ul style="list-style-type: none"> Preventing Radicalisation 	
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Safeguarding Concerns Raised between 1st April 2023 and 31st March 2024

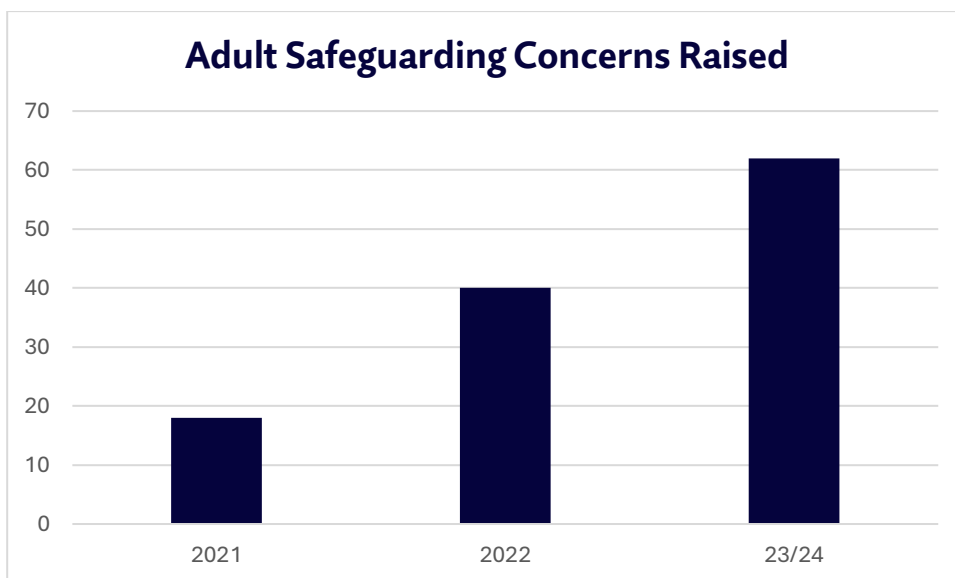
The total number of safeguarding referrals made remained steady for MSK whose partner organisation, SCFT, also manage safeguarding referrals within their own policies and procedures. The vast majority of all safeguarding referrals were made by MAS.

Service	Concerns - ADULT	Concerns - CHILD
MSK	3	0
MAS	62	0
APC	0	5
VAX	2	0
TOTAL	67	5

Child safeguarding concerns were raised solely by APC and saw an increase on previous years. This is likely because APC are the only service who see children 0-16 and have focussed on sharing learning and identifying and reporting safeguarding concerns for every patient episode with a clear documentation and escalation process.



Most adult safeguarding concerns were raised by MAS who showed a 35% increase in referrals from 2022, when the service introduced lifelong support with annual care plan reviews. Instead of discharging patients 12 months after their diagnosis, MAS delivered ongoing support to patients as their conditions progressed, resulting in increased identification of safeguarding needs.

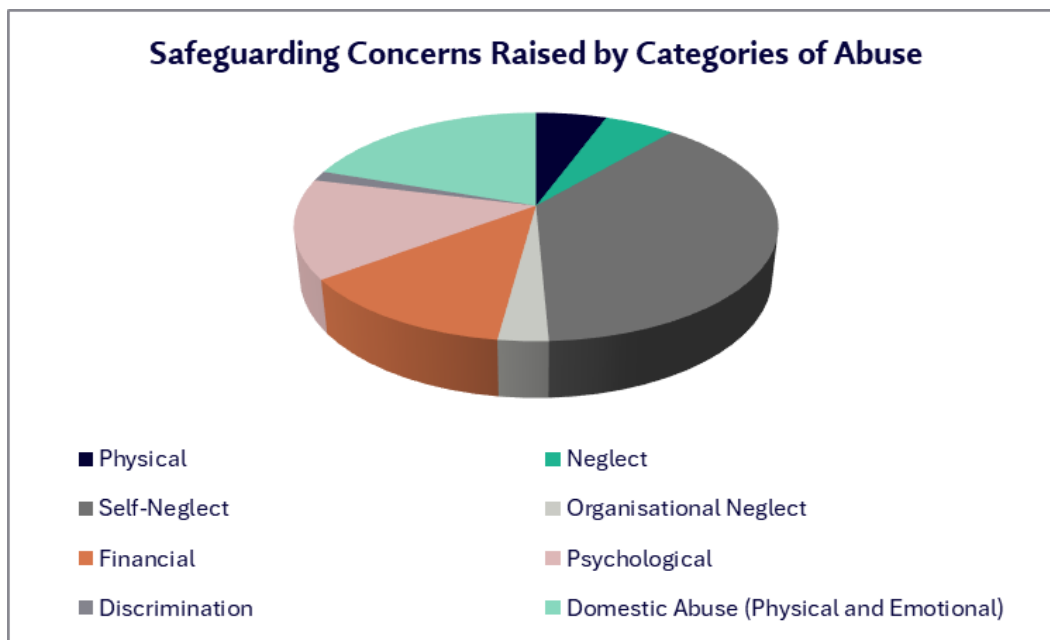


Annual adult of safeguarding alerts April 2023 - March 2024:

Service	Alerts Raised	Type of Alert	
MAS	X 0 Child		
	X 62 Adults	3	Physical
		4	Neglect
		27	Self-Neglect
		1	Organisational Neglect
		8	Financial
		10	Psychological
		13	Psychological and emotional (domestic abuse)
MSK	X 0 Child		
	X 3 Adults	1	Physical
		1	Discrimination
		1	Psychological and emotional (domestic abuse)
APC	X 5 Child	4	Neglect
		1	Physical
	X 0 Adults		
Vaccination	X 0 Child		
	X2 Adults	1	Organisational Neglect
		1	Financial

The chart below shows safeguarding concerns raised by categories of abuse and illustrates that nearly half of all referrals (44%) were made for Self-Neglect; nearly a quarter (23%) were made for harm and potential harm from domestic abuse (physical and emotional); 16% were

for psychological abuse; and 14% for financial abuse. This reflects the nature of personalised care and support provided for people with dementia and their families by MAS.



6 Recommendations

The 2024 report, annual audit of safeguarding concerns, review of the new NHS England Safeguarding Accountability and Assurance Framework (SAAF), review of all services CQC gap analysis and update of the Here Safeguarding Adults and Children Policy identified the following recommendations:

- Offer of learning sessions on specific safeguarding themes. Suggested priority themes: Self-Neglect, Domestic Abuse, Financial Abuse and Safeguarding Young People (16-18yrs).
- Add Safeguarding Supervision to safeguarding adults and children policy.
- Safeguarding supervision for safeguarding leads via quarterly peer supervision meetings (this will fulfil additional safeguarding level 3 requirements as outlined in the intercollegiate standards documents).
- Trial a Here Safeguarding Community of Practice Teams Channel (managed by Here Safeguarding Leads) providing real-time peer support, shared learning and ad-hoc safeguarding supervision for service managers, clinical leads, safeguarding leads and governance co-ordinators. This will also provide resilience for safeguarding leadership during annual leave/sickness/training leave. We will monitor utilisation and impact for 6 months.
- National Child Protection-Information Sharing system access and reporting to be implemented in Additional Primary Care (and other services when rolled out nationally).
- Explore accessing local comprehensive programmes to raise awareness of Government Prevent Strategy and Prevent Guidance with support from Prevent Lead at Sussex ICB.

- Cascade organisational safeguarding model raising a concern flowchart widely across services and sites (appendices iii and iv).

7 Review of Actions from Previous Report

Objective	Update	Status
2022 report: Training compliance figures particularly for level 3 require a focus to ensure that all services are meeting the threshold of 85%. Each service lead needs to take ownership for their service to devise a plan to meet this requirement.	Extensive work completed by the People Team, Quasar and Service Leads has seen training compliance figures reach above 85% across all services and roles and mechanisms are now in place to ensure that these levels are maintained	Complete
2022 report: A staff handbook to support training for those in roles where it is not pragmatic for them or the service to complete a full training programme to begin work. This includes those who are employed on a very temporary basis and/or those who will remain supervised throughout their work time. The handbook may also serve as a useful resource for those who are in between training courses and require a refresher.	The Vaccination Service has now ended. As the remaining clinical services are now MSK, APC, and MAS who all work within Here Organisational Policies and Procedures, a handbook is no longer needed, and this is now superseded by the Here Safeguarding Children and Adults Policy	Complete
2022 report: Creating visibility of the safeguarding app to support staff who may prefer a digital/smart phone option to access information on the go.	Included in policy and training updates	Complete
2022 report:		

Review of the safeguarding policy to take in to account new guidance/legislation in relation to the Domestic Abuse Act 2021.	Here Safeguarding Children and Adults Policy updated with all new legislation July 2024	Complete
2022 report: Services to benchmark where possible against other similar services to understand whether there is under or over reporting of safeguarding concerns within our organisation.	Variations in logging and reporting safeguarding concerns across services and difficulties recording accurately on Datix have made it difficult to audit safeguarding concerns to provide data with which to benchmark. This will now be possible with modifications made to Datix and uniform safeguarding processes across all services.	Ongoing
2022 report: Develop further partnership working with Sussex safeguarding teams to enhance our network and presence within B&H.	Included in Here Safeguarding Children and Adults Policy.	Ongoing
2020/2021/2022 reports: The creation of SystemOne templates for the purpose of recording safeguarding alerts within the patient / carer record. This would support visibility, reporting at both a service and organisational level.	<p>MAS have S1 risk template that included safeguarding concerns and as part of the covid response were integrated into Power Bi reporting to support the services covid response.</p> <p>MSK in 2021, commenced with the creation of S1 templates taking the learning from MAS while also recognising that they partner with SCFT. MSK remain in the testing stage.</p> <p>MSK may find it helpful to review the MAS Power Bi reports, particularly the services use of risk and safeguarding integration from S1 aiding visibility and reporting.</p> <p>MSK piloting was to be completed prior to other service such as IAS consider if integration into S1 would be helpful.</p> <p>UPDATE: 2024 Review the priority for implementing a safeguarding S1 template which will provide automated information</p>	On hold pending review of priority

	relating to safeguarding activity via Power BI. This would be particularly useful to APC as well as MAS.	
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The Board was asked to approve this report in August 2024 and agreed on the actions proposed. Here Safeguarding Team are now in the process of implementing an action plan with an anticipated completion date of all actions by 1st December 2024.

Appendix i - Safeguarding accountability and assurance framework audit July 2024

[NHS England » Safeguarding children, young people and adults at risk in the NHS](#)

All health providers, including provider collaboratives, are required under statute and regulation to have effective arrangements in place to safeguard and promote the welfare of children and adults at risk of harm and abuse in every service that they deliver.

Providers must demonstrate that safeguarding is embedded at every level in their organisation, with effective governance processes evident. Providers must assure themselves, the regulators, and their commissioners that safeguarding arrangements are robust and are working.

	Standard	Compliance	Actions	Progress	Comments/Updates
1.	The contractual requirements as laid out in Schedule 32 of the NHS Standard Contract		See below		See NHS Standard Contract: SC32 Safeguarding Children and Adults Checklist for details. (see below)
2.	Identification of a named nurse, named doctor and named midwife (if the organisation provides maternity services) for safeguarding children		Identification of named doctor		ICB Named GPs and Nurses
			Identification of named nurse		
3.	Identification of a named nurse and named doctor for children in care		Identification of named doctor		ICB Named GPs and Nurses
			Identification of named nurse		
4.	Identification of a named lead for adult safeguarding and a Mental Capacity Act (MCA) lead – this role should include the management of adult safeguarding allegations against staff. This could be a named professional from any relevant professional background		Identification of named lead for adult safeguarding (including the management of adult safeguarding allegations against staff)		Included in safeguarding lead role at Here.
			Identification of Mental Capacity Act (MCA) Lead		
6.	Safe recruitment practices and arrangements for dealing with allegations against staff		Safe recruitment practices		Included in policy
			Clarify/write process/policy for arrangements for dealing with allegations against staff.		
7.	Provision of an executive lead for safeguarding children, adults at risk and Prevent		Identification of executive lead for safeguarding children, adults at risk and Prevent		Kristin or Lesley?
8.	An annual report for safeguarding children, adults and children in care to be submitted to the trust board		Annual report for safeguarding children, <u>adults</u> and children in care to be submitted to the Here Board.		
9.	A suite of safeguarding policies and procedures that support local multi-agency safeguarding procedures		Here Safeguarding Children and Adults Policy		
			Welcome to your Pan Sussex Child Protection and Safeguarding Procedures		

			Manual Sussex Child Protection and Safeguarding Procedures Manual		
			Home Sussex Safeguarding Adults Policy and Procedures		
			Service-specific Guidance		
			Here Safeguarding Learning and Escalation Structure		
10.	Effective training of all staff commensurate with their role and in accordance with the intercollegiate safeguarding competencies		Safeguarding adults and children training mandatory for all non-clinical staff at Levels 1 and 2		
			Safeguarding adults and children training mandatory for all clinical staff at Level 3		
			Safeguarding adults and children training mandatory for Here Safeguarding Lead at Level 4		
			Here is Learning sessions on specific safeguarding themes.		
11.	Safeguarding must be included in induction programmes for all staff and volunteers		MSK – confirm inclusion in induction programme		
			MAS – confirm inclusion in induction programme		
			APC – confirm inclusion in induction programme		
12.	Providing effective safeguarding supervision arrangements for staff, commensurate to their role and function (including for named professionals)		Safeguarding supervision policy		
			Ad-hoc supervision for admin via service managers and clinical leads.		
			Ad-hoc supervision for clinicians via clinical leads and safeguarding leads.		
			Supervision for safeguarding leads via quarterly peer supervision meetings		
			Safeguarding Community of Practice Teams Channel providing peer support, shared learning and ad-hoc safeguarding supervision for service managers, clinical leads and safeguarding leads. This will also provide resilience for safeguarding leadership during annual leave/sickness/training leave.		
			Supervision for Here Safeguarding Lead via external Sussex ICB/SCFT		
13.	Developing an organisational culture where all staff are aware of their personal responsibilities for		Here Organisational Safeguarding Model		

	safeguarding and information sharing			
14.	Developing and promoting a learning culture to ensure continuous <u>improvement</u>		Here Organisational Safeguarding Model	
15.	Policies, arrangements and records, to ensure consent to care and treatment is obtained in line with legislation and <u>guidance</u>		Safeguarding children and <u>adults</u> policy	
			Consent policy	
			EDI Policy	
16.	APC only: The Provider must co-operate fully and liaise appropriately with third party providers of social care services as necessary for the effective operation of the Child Protection Information Sharing Project.		CP-IS implemented in Additional Primary Care	Currently in process of being added to smartcards. Training to follow.
17.	Comply with the principles contained in the Government Prevent Strategy and the Prevent Guidance; and include in relevant policies and procedures a comprehensive programme to raise awareness of the Government		Identify Prevent lead	Prevent Lead for ICB = Fiona Crimmins
			Comprehensive programme to raise awareness of Government Prevent Strategy and Prevent Guidance	?Here is Learning sessions
	Prevent Strategy among Staff and volunteers in line with the NHS England Prevent Training and Competencies Framework.		Prevent training included in STAM	

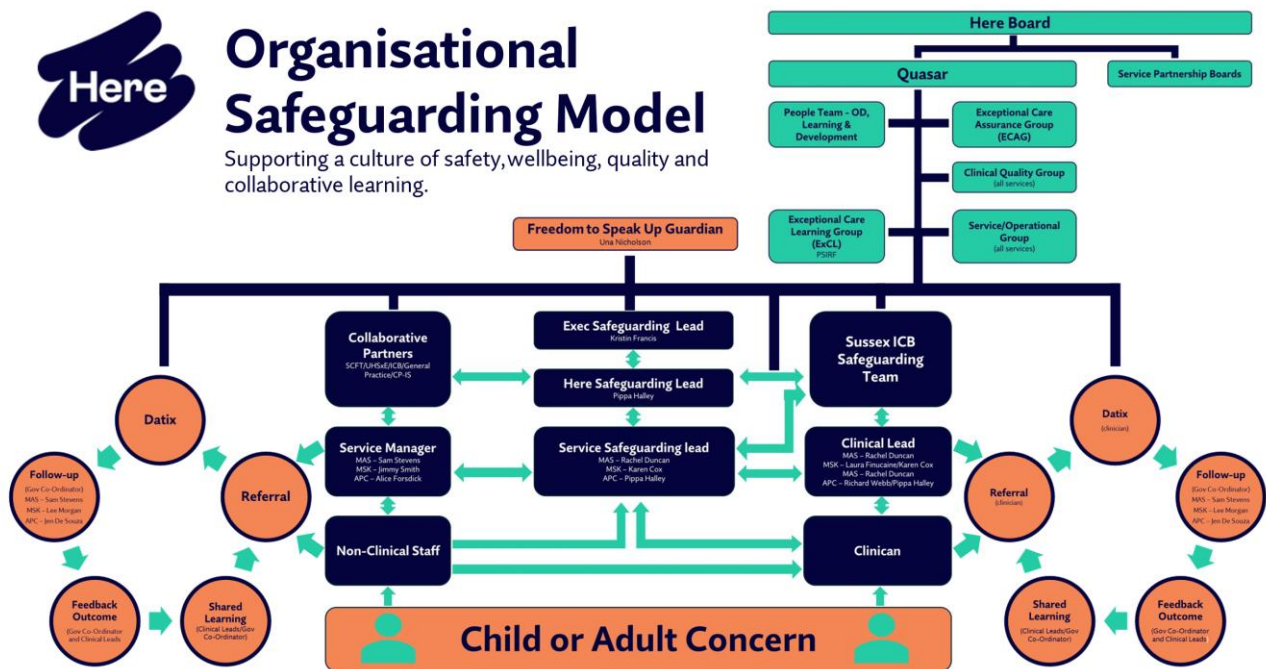
NHS Standard Contract: SC32 Safeguarding Children and Adults

[03-nhs-standard-contract-fl-scs-2324.pdf \(england.nhs.uk\)](#)

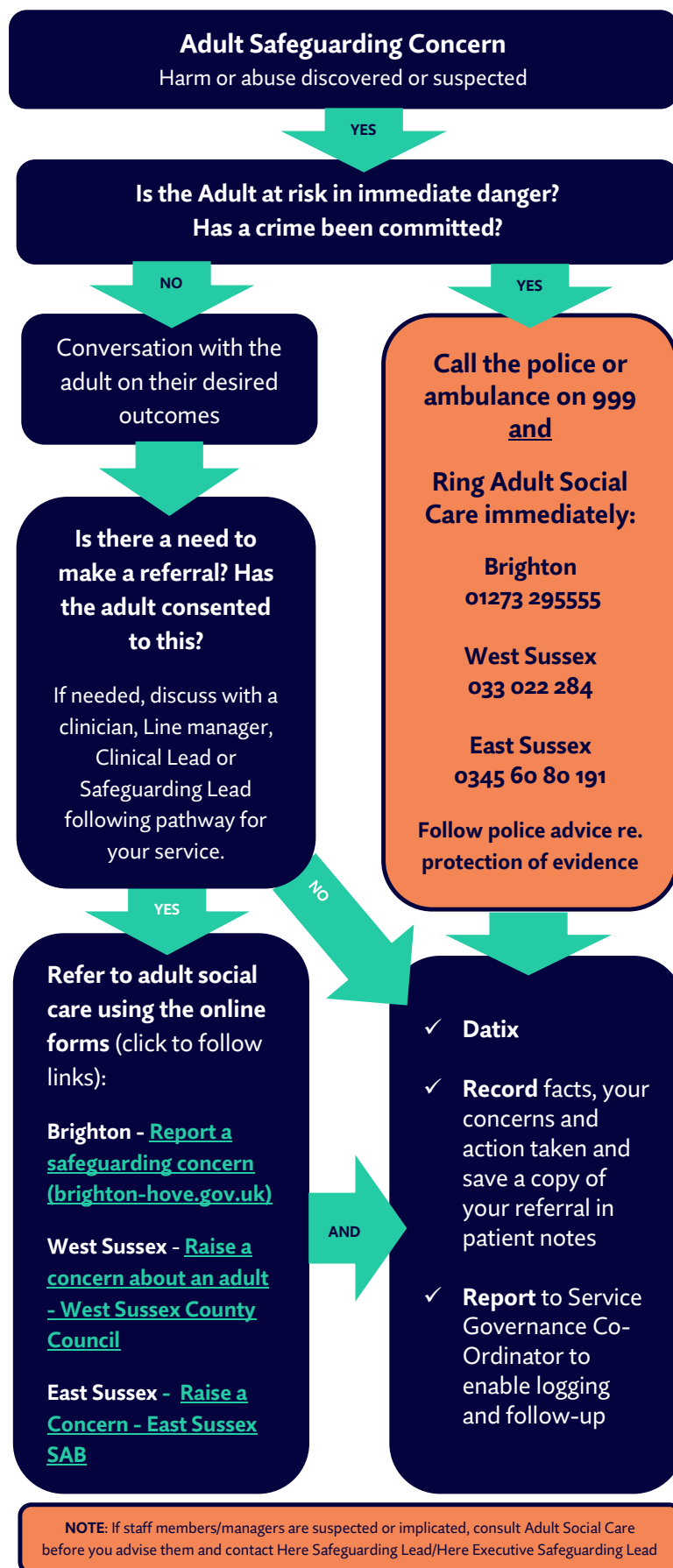
Schedule	Standard	Compliance	Comments
32.1	The Provider must ensure that Service Users are protected from abuse, exploitation, radicalisation, serious violence, grooming, neglect and improper or degrading treatment, and must take appropriate action to respond to any allegation or disclosure of any such behaviours in accordance with the Law.		
32.2	The Provider must nominate: 32.2.1 Safeguarding Leads and/or named professionals for safeguarding children (including looked after children) and for safeguarding adults, in accordance with Safeguarding <u>Guidance</u> ; 32.2.2 a Child Sexual Abuse and Exploitation <u>Lead</u> ; 32.2.3 a Mental Capacity and Liberty Protection Safeguards Lead; and 32.2.4 a Prevent Lead,		

	and must ensure that the Co-ordinating Commissioner is kept informed at all times of the identity of the persons holding those positions.		
32.3	<p>The Provider must comply with the requirements and principles in relation to the safeguarding of children, young people and adults, including in relation to deprivation of liberty safeguards, child sexual abuse and exploitation, domestic abuse, radicalisation and female genital mutilation (as relevant to the Services) set out or referred to in: 32.3.1 the 2014 Act and associated Guidance;</p> <p>32.3.2 the 2014 Regulations;</p> <p>32.3.3 the Children Act 1989 and the Children Act 2004 and associated Guidance;</p> <p>32.3.4 the 2005 Act and associated Guidance;</p> <p>32.3.5 the Modern Slavery Act 2015 and associated Guidance;</p> <p>32.3.6 Safeguarding Guidance;</p> <p>32.3.7 Child Sexual Abuse and Exploitation Guidance;</p> <p>32.3.8 Prevent Guidance; and</p> <p>32.3.9 the Domestic Abuse Act 2021 and associated Guidance.</p>		
32.4	The Provider has adopted and must comply with the Safeguarding Policies and MCA Policies. The Provider has ensured and must at all times ensure that the Safeguarding Policies and MCA Policies reflect and comply with:		
	32.4.1 the Law and Guidance referred to in SC32.3; and		
	32.4.2 the local multi-agency policies and any Commissioner safeguarding and MCA requirements.		
32.5	The Provider must implement comprehensive programmes for safeguarding (including in relation to child sexual abuse and exploitation) and MCA training for all relevant Staff and must have regard to Intercollegiate Guidance in Relation to Safeguarding Training. The Provider must undertake an annual audit of its conduct and completion of those training programmes and of its compliance with the requirements of SC32.1 to 32.4.		Safeguarding Lead needs to train to L4
32.6	At the reasonable written request of the Co-ordinating Commissioner, and by no later than 10 Operational Days following receipt of that request, the Provider must provide evidence to the Co-ordinating Commissioner that it is addressing any safeguarding concerns raised through the relevant multi-agency reporting systems		
32.7	If requested by the Co-ordinating Commissioner, the Provider must participate in the development of any local multi-agency safeguarding quality indicators and/or plan.		Connected to JTAI working group
32.8	The Provider must co-operate fully and liaise appropriately with third party providers of social care services as necessary for the effective operation of the Child Protection Information Sharing Project.		In progress with APC
32.9	The Provider must:		? Here is learning
	32.9.1 include in its policies and procedures, and comply with, the principles contained in the Government Prevent Strategy and the Prevent Guidance; and		
	32.9.2 include in relevant policies and procedures a comprehensive programme to raise awareness of the Government Prevent Strategy among Staff and volunteers in line with the NHS England Prevent Training and Competencies Framework and Intercollegiate Guidance in Relation to Safeguarding Training.		

Appendix ii – Organisational Safeguarding Model



Appendix iii - Flowchart for Raising a Safeguarding Concern - Adult



Appendix iv – Flowchart for Raising a Safeguarding Concern - Child

