

## Safeguarding Work Plan April 2022- March 2023

	Topic	Action	Staff allocation	Target completion date	Evidence/Current update
<b>1. TO PROVIDE OUTSTANDING CARE FOR PATIENTS</b>					
<b>1.1</b>	<b>Annual Report for BTHFT Exec Board</b>	Annual report for Trust to be submitted end of financial year.	JT/JS/EMR	July 2022	Annual Report submitted – End of financial year. Training update for the board of directors.
<b>1.2</b>	<b>CCG reporting</b>	Annual report for CCG as per new ICS Template.	JT/JS/EMR	July 22 and update Dec 22	Copy of annual report sent and accepted
<b>1.3</b>	<b>Organisational Safeguarding Assessment OSA (previously known as section 11) for the TBP</b>	New tool now launched- Expectation to be completed Autumn 2022	JS	Ongoing	PMAE Rep JS– has completed in draft and working with Sarah T SG adults. Return date 21/10/22 21.10.22 - Agreed with Karen D and Jo Hilton and submitted
<b>1.4</b>	<b>Policies and procedures</b>	Safeguarding Children Policy fully revised 2021. Additional revision following new CSC updates and referral system.	ALL	June 2022	Complete July 22
		Finalisation of the distressed agitated and violent under 18's Policy.	JS/LW/KR	July 2022	Working group established and ongoing development of guideline. JS leading. Deadline passed as has required a lot of work and involvement from the legal team. Sept 22 update – ratified by Patient Safety Group and Integrated SG Committee. Presented 12.12.22 – Waiting for CQC review. In use unofficially in the meantime. Feb 23 – CQC approval received and Equality Impact

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					Assessment complete
		Lilac SOP (Termination of Pregnancy update and relaunch.	JS/JT	July 2022	Update done with Multi agency working group signed off by Jo Hilton March 2022. New chain of evidence policy. Needs dry run and relaunch for training. Completed July 22
		Embed the new Thorpe Model and loss of MARF. New training to be provided for all BTHFT staff.	JS/LW/EMR	May 2022	<p>Awaiting launch date from CSC. Slides circulated for how the model will work.</p> <p>Team to consider and support:</p> <ul style="list-style-type: none"> <li>• Training</li> <li>• Newsletters</li> <li>• Mitigation</li> <li>• Record keeping</li> </ul> <p>JS and LW have attended Social Care webinars Sept/Oct 2022 – anticipate soft launch soon and hard launch early 2023</p> <p>Soft launch planned for 15.11.22 1pm</p> <p>12.12.22 – Need to know CSC's definition/plan for success/benchmark before can be completed. To be left yellow until new model embedded.</p> <p>10.1.23 Launched as planned on 15 Dec. Partnership is providing feedback to CSC. Ongoing change is expected as process is "ironed out".</p> <p>Feb 23 – Live portal for mini-MARF out of hours referrals</p>

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					launched
1.5	Challenges and Escalation	<p>Named Professionals to include in regular meetings with Social Care leads</p> <ul style="list-style-type: none"> <li>Concerns regarding case management</li> <li>Education regarding escalation processes</li> <li>Risk issues</li> <li>Common themes</li> </ul> <p>Escalation to be included specifically in training at all levels.</p> <p>Ad hoc escalation for individual cases and use of TBP “Resolving Professional Disagreement” policy</p> <p>Involvement in review of non-engagement pathway via SaPP subgroup of TBP</p>	LWJS/EMR	Ongoing	Health and Social Care meetings restarted with CSC senior managers and other health partners.
			ALL	Ongoing	Discussion at fortnightly cases meetings. Escalation to managers at all levels in social care
1.6	Risk register	<p>Named professionals to review Risk Register bi-monthly with regard to entries relating to safeguarding. This should be prior to the Integrated Safeguarding Committee meetings.</p>	LW/JS/EMR	Ongoing	<p>Corporate Risk Register – Young People and Crisis; being addressed.</p> <p>Additional risk assessment July 22 for CBU/Chief Nurse Team regarding large increase in SG workload and requirement for extra resource.</p> <p>12.12.22 – LW is to have training with DS. RM did ask for staffing levels to be added as a risk upon JT leaving trust. Not sure if this was recorded or</p>

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					not.
1.7	<b>Development work regarding discharge planning</b>	Multi-agency work for children with complex needs/complex safeguarding and well-planned discharge (CQC CLAS recommendation)	ALL	September 2022	<p>Multi-agency review of discharge planning via the SaPP (Safeguarding and Professional practice) subgroup of TBP – Signed off in March 2022. Requires training and embedding</p> <p>Added to SG Children Policy July 22</p> <p>Circulated around paediatric consultants and other relevant medical and nursing staff</p>
		If a child is admitted where a safeguarding concern has been identified it is imperative that the child or young person is discharged to a safe environment and to someone with parental responsibility		September 2022	<p>Audit EPR discharge form for 16-17 year olds – not being used. Needs concentrated work on discharge and safe discharge.</p> <p>12.12.22 – Audit completed. Action plan items to be</p>

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		regardless of age (unless Children's Social Care has directed otherwise). To strengthen policy and promote discharge planning			finalised (i-add to training; ii- look to have added to adult system as auto-gen'd form) iii- TG to share with SG champions to encourage use within own departments). 10.1.23 – Safeguarding Champions meeting is fixed for 19 January 2023. Generic slides including safef discharge and use of EPR form in L2 and L3 training
1.8	<b>Strengthen work with front door services in relation to safeguarding.</b>	<p>Applies to ED, paediatric and adult wards, maternity "front door"</p> <p>New Thorpe Model to be embedded in all areas- New referral system for Children's Social Care.</p> <p>CP-IS refresher for CCDA. Maternity services.</p> <p>Discussions for additional support from ED to screen Paediatric attendances.</p>	ALL	Ongoing	<ol style="list-style-type: none"> <li>1. Develop role of SG champions previously established prior to Covid. Pass to new SG Sp practitioner when in post Spring 2022.</li> <li>2. Ongoing weekly newsletter for ED staff</li> <li>3. Daily CAMHS huddle</li> <li>4. 7 minute briefing for ED for missed (SE completed July22) cases/learning</li> <li>5. Thorpe model to be embedded.</li> <li>6. CP-IS</li> </ol>
1.9	<b>EPR and safeguarding</b>	Provide support, advice and training for staff in relation to safeguarding processes the use of EPR- This include the launch of Cerner for maternity services and to support the	ALL	September 2022	<p>Maternity services switching to Cerner EPR April 2022 – explore re SG documents</p> <p>Additional training and support required for staff.</p>

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		<p>safeguarding aspects of Cerner in Maternity records.</p> <p>Explore safe discharge in EPR for YP on adult wards</p>			
<b>1.10</b>	<b>PREVENT</b>	Provide information about child Prevent referrals to Safeguarding Children Steering Group and Integrated Safeguarding Committee.	ALL	Ongoing	12.12.22 – LW to speak with adult safeguarding to find out about <18 referrals. A tool will be introduced in the new year.
<b>1.11</b>	<b>Royal College of Paediatrics and Child Health National Standards for Safeguarding Medicals</b>	Trust action plan mostly green 2 audits completed in 2021 needs further audits for evidence.	JS	Nov 2022	BTHFT Action plan created Jan 2021, evidence embedded within. Updated March 2022. RCPCH are creating an audit tool – we signed up to be included in the pilot which worked well. Awaiting formal full audit tool April 23
<b>1.12</b>	<b>Addressing complaints in cases where safeguarding is a factor</b>	Supporting the CBU in reviewing records and addressing these complaints.	JS/LW	Ongoing	
<b>1.13</b>	<b>Consideration of changes to LPS and MCA new legislation and how this will affect 16-17</b>	Joint work with SG adults, other health agencies and legal team Still awaiting for national	JS/LW/SG Adults	Dec 2022	Included in new DAV Policy. Awaiting national LPS launch date – no definite date as yet.

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	year olds	launch.			12.12.22 – No updated available. 10.1.23 – Still no updated or expected date available. Move to next Year work plan
<b>1.14</b>	<b>Provide assurance regarding awareness, identification, and actions for children involved in/at risk of exploitation (CCE or CSE) – relates to Thematic Case Review CSE published summer 2021</b>	Establish a Trust child exploitation working group (needs ToR) to focus on <ul style="list-style-type: none"> <li>• Training, staff awareness at front door</li> <li>• Flagging</li> <li>• Referrals</li> <li>• Work with multi-agency partners to deliver the action plan from the Thematic Case Review</li> <li>• Collaborate with the re-instated Exploitation Hub when set up in Bradford (multi-agency as it was prior to Ofsted) – will have health practitioners embedded within</li> </ul>	All	April 2022	TBP exploitation awaiting new modules  CE training in place 2022 for all level 3 training programmes  Promote new CCE/CSE online training modules from TBP when available- Spring 2022  CSE Hub restarted Spring 2022  CE working group was started in Trust last year but needs re-launch ?link/combine with adults (as per All age exploitation group for The Bradford Partnership) – JT to d/w ST  09.01.23 – Working group will be relaunched before March 2023. 22.3.23 Team are holding a stand in the main BRI concourse around exploitation in line with National Child Exploitation Awareness Day.

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					Hope to get photos of this event for Global newsletter. Include on next years workplan.
1.15	To explore reciprocal regional peer review for Paediatric consultants.	Via trust Caldecott guardian and Named and Designated Yorkshire Network.	JS		JS - agreement in principal from Caldicott Guardian Feb 2022. Reciprocal agreement already in place for Airedale. Draft Information Governance form for other units been sent to IG lead July 22 03.10.22 completed and agreed
<b>2. TO DELIVER OUR FINANCIAL PLAN AND KEY PERFORMANCE TARGETS</b>					
2.1	Key performance indicators- Internal	Monitoring of KPIs and reporting at the steering group and the integrated safeguarding committee	LW/JS/EMR	Ongoing	Minutes from meetings
2.2	CP medical statistics provided for the partnership.	Report the figures to the partnership.	JS/RS	Annual	CP medical stats now being monitored by RM in the CBU – 400 medicals over first 6 months of 2022 – double usual numbers and way in excess of our Yorkshire neighbours.
<b>3. TO BE IN THE TOP 20% OF NHS EMPLOYERS</b>					
3.1	Supervision	Strengthening of supervision across the Trust. <ul style="list-style-type: none"> <li>• Ongoing development for practice supervisors.</li> <li>• Relaunch of safeguarding champions.</li> <li>• Supervision training via HSCG.</li> <li>• Royal College of</li> </ul>	All AZ lead	Dec 2022	Work with CCG project to create Best Practice Guidance for Supervision across health agencies and between health agencies. This is being led through HSCG.  Usual SG Supervision training held at Airedale by health partners is on hold – no dates.



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		Paediatrics peer review guidance anticipated late 2021 (for Consultant Peer Review).			<p>Consider delivering own in-house SG supervision training and already holding CPD events for supervisors</p> <p>RCPCH no updated Peer review document as yet Sept 22</p> <p>TG to pick up SG Champion work</p> <p>12.12.22 – No further updated available. Still waiting for training info from CCG.</p> <p>Supervision has now recommenced following Covid hiatus.</p> <p>9.1.23 – TG to attend training on 27 Jan. All but 1 SNPs will then be trained in delivering supervision.</p> <p>Maternity supervision plan yet to be devised e.g. how often/set up etc.</p> <p>Alex to update and on next year work plan – to add about Trust adopting new model of supervision and to look at embedding that.</p>
3.2	<b>Direct individual feedback regarding management of safeguarding cases.</b>	<p>Implemented in the following ways</p> <ul style="list-style-type: none"> <li>Fortnightly cases review</li> </ul>	All	Ongoing	

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		meetings. <ul style="list-style-type: none"> <li>• Face to face</li> <li>• Email</li> <li>• Mention in newsletters and briefings</li> <li>• Examples used in training and supervision (Feedback loop)</li> <li>• Greatrix awards</li> </ul>			
<b>4. TO BE A CONTINUALLY LEARNING ORGANISATION</b>					
<b>4.1</b>	<b>Internal Audit and Review</b>	Named Professionals to produce an audit strategy and this should include arrangements for review of previous audits and learning from Serious Case Reviews, Serious Incidents and Learning Lessons Reviews.	LWJS	April 2022	Completed April 2022.
<b>4.2</b>	<b>Ensuring training levels remain above the desired 85% compliance at each level as per CQC report.</b>	KPI	ALL	Ongoing	Further drop in level 3 early Feb onwards due to roll out of Cerner in maternity services and cancellation SG Training. Improved again following this
<b>4.3</b>	<b>Review the Trust Safeguarding Training Strategy</b>	Review against the Intercollegiate guidance from 2019	All		In progress June/July 22  12.12.22 JS to send 3 <sup>rd</sup> and final email to say we believe document ratified and to contact us if any questions by end Jan.  9.1.23 Ratified by Steering group. JS to chase up final ratification. LO is already giving

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					renewal dates of 3 years for Lvl3 SG. Agreed and commenced 01.04.23
4.4	<b>Bespoke training where areas of concern</b>	In response to DATIX/SI	ALL	Ongoing	Includes POPD, CDC, Community Nursing, ED, AMU
4.5	<b>Safeguarding Week</b>	Contribution to the annual district safeguarding week.	All	June 2022	Plans in place for BTHFT event during SG week 2022 (Kendra all day training exploitation) New scenario for Safeguarding Practice sessions completed which will be launched in SG week - lead is Named Dr for BTHFT. Complete June 22 Both events very well received with good feedback.
4.6	<b>Partnership training</b>	Delivering training for the partnership. <ul style="list-style-type: none"> <li>• JS professionals practice sessions</li> <li>• RS –bespoke training sessions</li> <li>• AZ- Neglect training</li> </ul>	JS/RS/AZ		Professional Practice Sessions June 22 and Sept 22  AZ awaiting session to redesign neglect training. RM also interested. Neglect training meeting arranged with Lindsay Hussain 1:30 24.11.22 for development of package  12.12.22 Session booked to meet with Police/education etc to co-design multi-agency training.
4.7	<b>Contribution to Rapid Reviews,</b>	Standing agenda item for	ALL	Ad hoc	Review of the learning

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	<b>Practice Reviews, Appreciative Enquiries, Learning reviews, Challenge Panels via TBP</b>	Steering Group and HSCG			reviews/CLAS action plan.
<b>4.8</b>	<b>Adopt new 7 minute briefings disseminated from TBP</b>	Consider how best to share widely across the organisation <ul style="list-style-type: none"> <li>• ED newsletters</li> <li>• ED Morning teachings</li> <li>• Virtual video</li> <li>• SG Newsletters</li> <li>• Roadshow</li> </ul>	ALL	Dec 2022	ED weekly E-Mail are sent covering various themes and highlighting good practice. 7 Minute Briefings to commence on 05.07.2022 in ED. The Partnership already have a number of 7MB on the Safer Bradford website which anyone can access. RM and JS to develop a fortnightly Ward/CDC Safeguarding E-Mail  9.1.23 – On hold due to existing staff commitments. Move to next year Work Plan
<b>4.9</b>	<b>Continue to publish regular newsletters</b>	Trust-wide and ED newsletters	ALL	Ongoing	Trust-wide newsletters quarterly – responsive to current themes ED newsletters Weekly email to all ED staff from SG specialist practitioner who also works in ED – very positive feedback and definitely being read as mentioned by staff doing training.  12.12.22 RM and LW to review existing newsletter and updated for dissemination.
<b>4.10</b>	<b>Website development and</b>	Full review of webpages and	All	Dec 2022	Content reviewed April/May 22

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	<b>relaunch</b>	full relaunch			<p>and liaison with IT – on their waiting list to redesign. Update from IT requested Sept 22</p> <p>12.12.22 SE will chase up IT and look to have this made live and provide deadline (due to risk associated with old materials on old page).</p> <p>9.1.23 Website launched.</p> <p>Action complete</p>
<b>5. TO COLLABORATE EFFECTIVELY WITH LOCAL AND REGIONAL PARTNERS</b>					
<b>5.1</b>	<b>Joint work with Adult Safeguarding</b>	Named Professionals sit on the Trust Integrated Safeguarding Committee and a joint strategy has been created. Development of joint safeguarding children and adult work within areas of shared responsibility e.g. DHR's where children involved, MARAC	ALL	Ongoing	
<b>5.2</b>	<b>Attendance at Ofsted Improvement Board for CSC</b>	Representation on the LA's Children's Services Programme Board sub group to the Improvement Board	JH	Ongoing	<ul style="list-style-type: none"> <li>• Minutes from meetings</li> <li>• Feedback from the meeting shared with the Safeguarding Team and steering group.</li> <li>• Discussed at HSCG</li> </ul>
<b>5.3</b>	<b>Multi-agency audit</b>	Contribute to multi-agency audit work through TBP and also the Health Safeguarding Children Group.	ALL	Ongoing	Form PMAE subgroup – likely to be more challenge panels

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<b>6.0 Actions from Audits, Case reviews and learning lesson reviews and challenge panels</b>					
<b>6.1</b>	<b>Ongoing review of case review actions</b>	Safeguarding team to annually re-visit action plans from previous Serious Case Reviews and themes from National Serious Case Reviews to ensure learning is embedded and changes in practice remain effective.	ALL	Ongoing Fed into the safeguarding children's steering group.	Named Professionals reviewed all Case reviews and Challenge Panels Feb 21  Case Reviews of all types discussed at Steering Group and Integrated Safeguarding Committee
<b>6.3</b>	<b>National Panel Review- Star</b>	Support of individual staff members Provide written information to the panel.	JS/JT	May 2022	Complete within National Panel timescale. National panel report published end May 22 and shared with staff.
<b>6.4</b>	<b>Panel Members for future CSPRs</b>	Collaborating with the partnership for multiagency working. Supporting members of the safeguarding team to be panel members for CSPR's.	All	Ongoing	
<b>6.2</b>	<b>Assurance that front-line staff are noting and acting upon safeguarding flags</b>	Audit strategy includes ongoing regular audit of actions from patients who are flagged for a variety of reasons.		Ongoing	<ol style="list-style-type: none"> <li>1. Direct feedback to individual staff</li> <li>2. Collective feedback to Matrons, Managers, Clinical Leads DATIX monthly and individual high risk or complex cases</li> <li>3. Breakfast teaching and use of real cases in ED training and supervision</li> <li>4. ED SG newsletters</li> </ol>