

Safeguarding Adults Annual Report

2014/15

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Lead Nurse Adult Safeguarding
July 2015



Adult safeguarding is the term used for protecting adults from abuse or neglect

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Executive summary

The Safeguarding Adult annual report 2014/15 outlines the work undertaken by the Trust during the past year. Adult Safeguarding is the term used for protecting adults from abuse or neglect.

Adult Safeguarding leads within the Trust are the Director of Nursing and Patient Experience, who has executive responsibility, the Deputy Director of Nursing, the Lead Nurse Adult Safeguarding and the lead Consultant Adult Safeguarding. Safeguarding is everyone's business and is therefore the responsibility of all Trust staff and professionals who work with adults and their families or their carers.

Adult Safeguarding is a whole systems approach and the Trust is a partner agency of the Hertfordshire Safeguarding Adult Board (HSAB). The Trust is represented on the board by the Lead Nurse for Adult Safeguarding on behalf of the Director of Nursing and Patient Experience.

All Trust staff receive training for Adult Safeguarding and compliance at the end of March 2015 was 91.8% all staff, and 88.6% for staff requiring level 2 training. Trust staff also receive awareness training in Prevent which is part of the Government counter terrorism strategy.

Between April 2014 and March 2015 the Trust 'Safeguarding adults at risk' database had 164 safeguarding concerns recorded, of which 28 were concerns raised against the Trust.

During 2014/15 there was significantly increased use of Deprivation of Liberty Safeguards in the Trust following the 2014 Supreme court ruling, which reflects the picture across Hertfordshire and nationally.

Notable achievements in this year include:

- Demonstrated assurance in Safeguarding to the Clinical Commissioning Group (CCG) through section 11 visit
- Achieved 90% compliance for all staff mandatory training for Adult Safeguarding by March 2015

- The Treatment centre transferred to using the Trust Patient Administration System (PAS) and Electronic Patient record (BIMS) which has enabled use of the Learning Disability and dementia alerts for this group of patients
- The Information team provided daily datasets to identify patients with a learning disability for future outpatient or elective attendance and the datasets are accessible to the relevant clinical teams to assist them in planning for any reasonable adjustments which are required for patients
- The Trust safely managed the transition of in-patient, emergency department and theatre services in a major reconfiguration programme moving services from QEII Hospital, Welwyn Garden City to Lister Hospital, Stevenage during 2014/15
- Hospital Experiences of Adults with Learning Disability (HEALeD) collaborative research project was launched, between Cambridge University, East and North Hertfordshire NHS Trust and Cambridge University Hospitals
- The role of the Independent Domestic Violence Advisor was established within the Trust
- The newly reconfigured Day Surgery Unit progressed work to achieve the Hertfordshire Purple Star accreditation during 2014/15, demonstrating good practice in care of adults with Learning Disability

1 Introduction

This is the annual report for Adult Safeguarding for East and North Hertfordshire NHS Trust for 2014/15. The report outlines the work undertaken by the Trust since April 2014 to support the frameworks for safeguarding adults.

The 2014 Care Act was implemented in April 2015 and established the legal framework for Safeguarding Adults. The Care and Support statutory guidance (DH 2014) replaced the previous 'No secrets' guidance (DH 2000).

Safeguarding duties apply to an adult, aged 18 years or over, who:

- has needs for care and support (whether or not the local authority is meeting any of those needs) and
- is experiencing, or is at risk of, abuse or neglect; and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse and neglect

Local authorities, the NHS and the Police have statutory responsibilities within safeguarding.

Adult safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard for their views, wishes and beliefs in deciding on any action. It recognises that sometimes adults have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances.

Organisations should always promote the adult's wellbeing in their safeguarding arrangements and professionals should work with the adult to establish what being safe means to them and how that can best be achieved. The guidance also emphasises that safeguarding is not a substitute for:

- providers' responsibilities to provide safe and high quality care and support
- commissioners regularly assuring themselves of the safety and effectiveness of commissioned services
- the CQC ensuring that regulated providers comply with fundamental standards of care or by taking enforcement action; and
- the core duties of the police to prevent and detect crime and protect life and property

The Care Act also requires that each local authority must have a Safeguarding Adults Board.

The Care Act widened the definitions of abuse to include domestic violence, modern slavery, self-neglect and organisational abuse.

2 Adult Safeguarding

2.1 The Trust Adult Safeguarding Structure:

| Role | Name and Job Title |
|---------------------------------|---|
| Executive Director Safeguarding | Angela Thompson, Director of Nursing and Patient Experience |
| Deputy Director Safeguarding | Liz Lees, Deputy Director of Nursing |
| Lead Nurse Adult Safeguarding | Bernadette Herbert, Lead Nurse Adult Safeguarding |
| Lead Doctor Adult Safeguarding | Dr Emma Lines, Consultant Physician |

Within the Clinical and Non-Clinical Divisions the Divisional Director and Divisional Chairs or Senior Managers are responsible for the implementation of and compliance with Trust policies and procedures and maintaining standards of practice and quality of care provision with clinical and non-clinical teams.

2.2 Trust policies and procedures which support the framework for Adult Safeguarding are:

- Safeguarding Adults from Abuse policy
- Hertfordshire procedures for Safeguarding Adults from abuse
- Mental Capacity Act policy
- Deprivation of Liberty policy
- Learning Disability policy
- Domestic Abuse policy
- Employee and workforce policies and procedures
- Disclosure and Barring checks and disclosure of information, Trust policy
- Raising Concerns at Work policy – ‘Whistleblowing’
- Statutory and Mandatory training policy
- Equality, Diversity and Human Rights Strategy

2.3 Lead Nurse Adult Safeguarding

The post of Lead Nurse for Adult Safeguarding was established in April 2012. The post holder has strategic and operational responsibility for Adult Safeguarding across all Trust sites. She works with all teams across the Clinical Divisions and Non-Clinical Services. Responsibility for Adult Safeguarding has been delegated to the Lead Nurse by the Director of Nursing. The post holder is line managed by the Deputy Director of Nursing.

The Lead Nurse receives Safeguarding clinical supervision from the Designated Nurse Adult Safeguarding for Hertfordshire.

2.4 Lead Doctor Adult Safeguarding

The medical director has nominated a Lead Doctor for Adult Safeguarding, who is also the Medical lead learning disability champion. The post holder works collaboratively with the Lead Nurse and provides medical advice when required for adult safeguarding cases. The post holder is the champion for adult safeguarding, and patients with a learning disability, to raise awareness and knowledge with medical colleagues and doctors in training.

2.5 Safeguarding liaison and Hospital Social work teams

Safeguarding referrals raised within the Trust are processed by the Adult Safeguarding Nurse and hospital social work teams. The investigation of a safeguarding referral is led by Hertfordshire Adult Services, as the local authority, following the Hertfordshire Safeguarding Adults from Abuse procedures. On occasions the investigation will be led by a different local authority dependant on the residency of the adult in need of safeguarding or the location of an alleged incident.

2.6 Hertfordshire Safeguarding Adults Board

The Trust is a member of the Hertfordshire Safeguarding Adults Board (HSAB), representation is provided on behalf of the Director of Nursing by the Lead Nurse Safeguarding Adults.

During 2014 the HSAB strategy and business plan was reviewed in line with the pending implementation of the Care Act. The Board structure was amended to include an independent chair and business support manager and substantive appointments for both posts were made in 2014/15. The Board constitution now includes the executive board partners; being the Local Authority, the Clinical Commissioning Groups and the Police and an operational board which includes partner agencies across Hertfordshire from Health and Social Care, County Council, District Councils, Advocacy services, community safety partnerships, probation, and Hertfordshire Children's Safeguarding Board. The work of the board is supported by a number of working sub-groups.

The Trust is an active partner of the board and participates in the working sub-groups and safeguarding adults reviews

Feedback from HSAB to the Trust is given via the Trust Safeguarding Committee and with the Executive Director responsible for Safeguarding.

The Trust participated in two HSAB multi-agency serious incident reviews in 2014/15.

2.7 Trust Safeguarding Committee

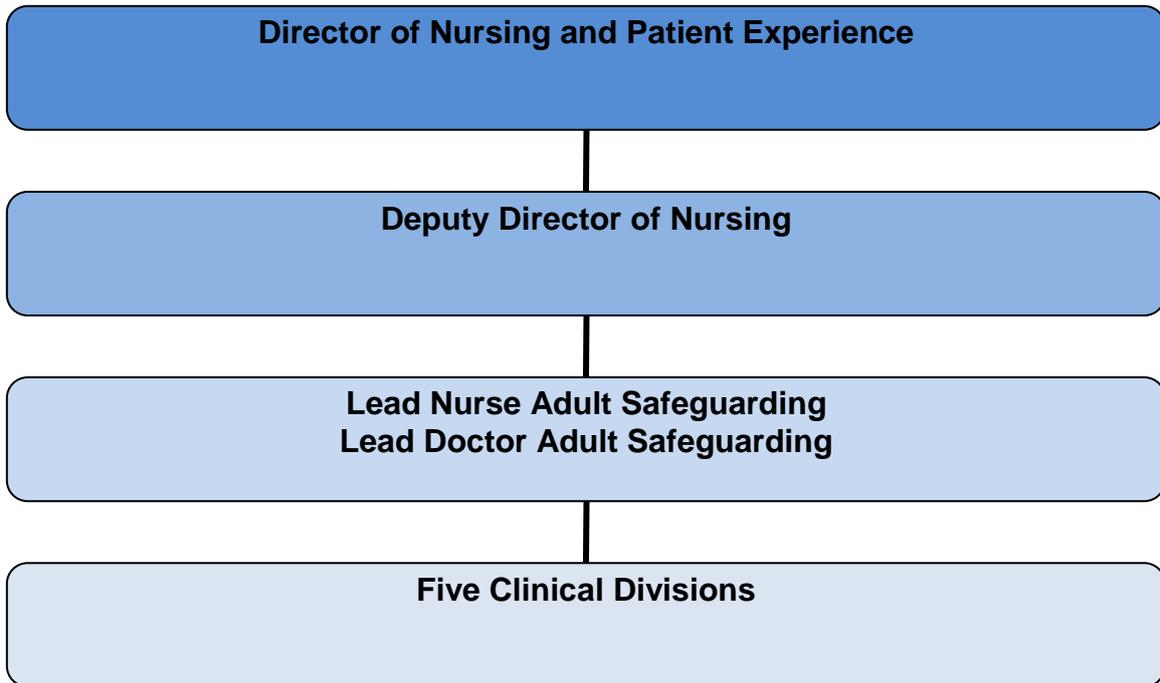
Following evaluation of a trial joint safeguarding committee for children and adults the decision was made to continue with one committee for safeguarding which is chaired by the Director of Nursing. Representation is provided from clinical divisions across the Trust, the Trust Child Safeguarding team, the Trust Adult Safeguarding Nurse and Doctor, Designated Nurses for Child and Adult Safeguarding, Learning Disability Liaison Nurse, Independent Domestic Violence Advisor, Trust Education team, Emergency Department consultant and Dementia nurse leads.

The Safeguarding committee meets 6 weekly and reports to the Risk and Quality Committee via the Director of Nursing.

2.8 Risk and Quality Committee (RAQC)

The Risk and Quality Committee is a sub-group of the Trust Board, chaired by a Non-Executive Director. The Director of Nursing provides a bi-monthly report to RAQC which includes an update on Adult Safeguarding issues and activity.

Adult Safeguarding Structure



Trust Safeguarding Committee Structure

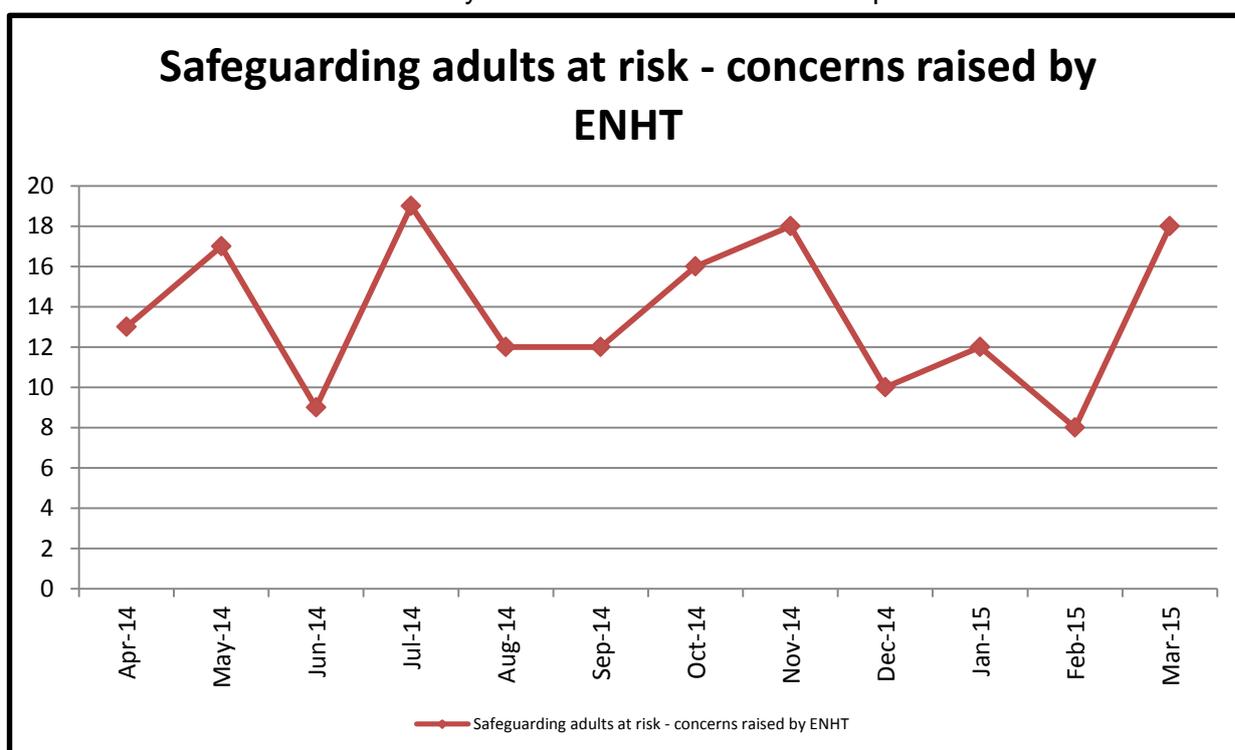


3 2014/15 Safeguarding 'Adults at Risk'

3.1 Safeguarding concern 'alerts'

From April 2014 to March 2015 the Trust recorded 164 Safeguarding Adults at Risk concerns, of which 28 were raised against the Trust. Of the concerns raised against the Trust 5 had been substantiated, 1 partially substantiated, 2 inconclusive and 1 is an ongoing criminal investigation by the police of an agency worker. The substantiated concerns related to 2 poor discharge arrangements, 1 missed fracture and 2 poor practise; the partially substantiated related to poor documentation of wound care management and poor communication in transfer of care, the inconclusive related to an allegation of physical abuse by an agency nurse and an allegation of possible harm made by a patient's family.

The chart below shows the month by month number of concerns reported.



The categories of alleged abuse or concerns raised for safeguarding adults at risk included: neglect, self-harm, financial, physical, sexual and psychological abuse, domestic violence, personal safety concerns or care needs reviews.

The actions taken by the Trust in relation to the concerns raised against the Trust included:

- Referral of practitioners to professional body in relation to concerns about fitness to practice
- Reporting to the police alleged criminal incident
- Review of chaperoning policy and procedures
- Staff training programmes including documentation, wound care management, pressure ulcer prevention, documentation and safer care processes
- Staffing and workforce reviews with investment or recruitment where shortfalls identified
- Implementation of the Nursing safer staffing programme

- Increased compliance with statutory and mandatory training programmes for all Trust staff through the VITAL programme
- Performance management and improvement actions for individuals or wards where expected standards were not maintained

During 2014/15 2 serious incidents were reported in relation to adult safeguarding, one involved the attempted suicide of a person from the Multi-storey car park at Lister Hospital which subsequently became a Multi-agency safeguarding review by the Hertfordshire Adult Safeguarding Board. The other relates to an allegation of sexual abuse made by a patient against an agency worker and is the subject of an ongoing criminal investigation.

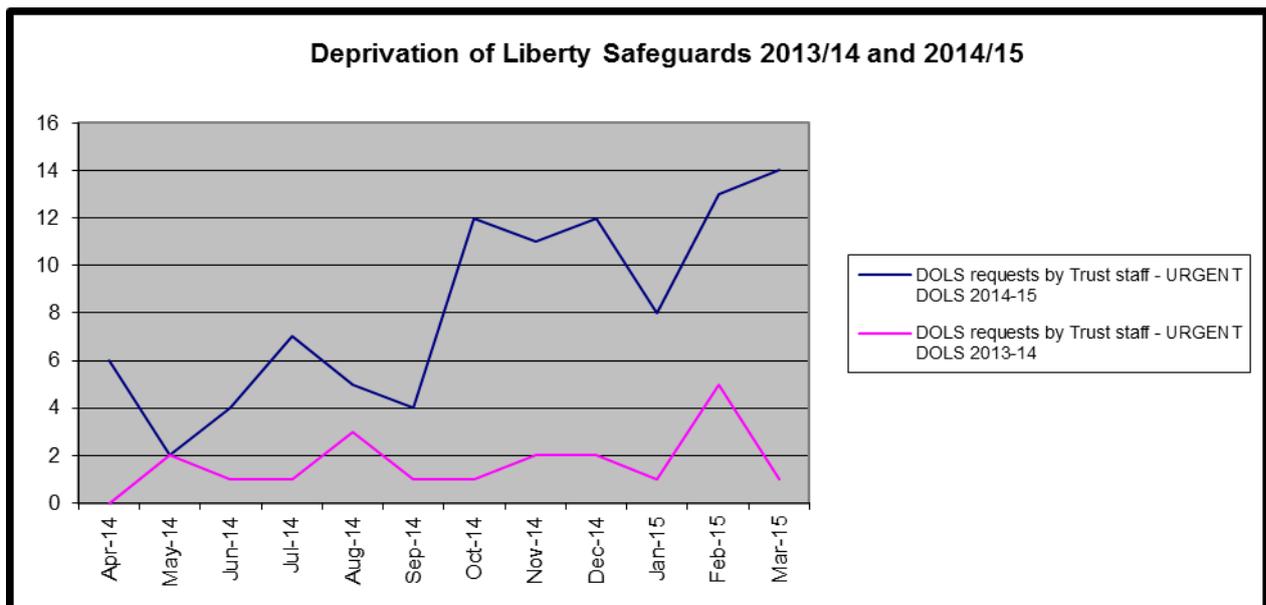
3.2 Deprivation of Liberty Safeguards

Deprivation of Liberty Safeguards (DoLS) were created to provide legal protection for those vulnerable people aged 18 years and over who lack mental capacity to consent to the arrangements for their care, which are deprived of their liberty other than under the Mental Health Act 1983. The safeguards came into effect in April 2009.

In March 2014 the Supreme court ruling in the case of ‘P v Cheshire West and Chester Council and P&Q v Surrey County Council’ added further definition to what would be considered a deprivation of liberty for an adult requiring care and/or treatment who lacks mental capacity to consent to those arrangements. Whilst the DoLS code of practice was still applicable the Supreme Court established the ‘acid test’ against which DoLS should be considered in hospitals or care homes. The acid test established that if the adult lacks mental capacity to consent, is subject to continuous supervision and control and is not free to leave then a Deprivation of Liberty Safeguard would need to be considered.

The impact of the changes in definition for DoLS has had significant impacts nationally and locally.

Within the Trust the number of DoLS urgent authorisations increased from 20 in 2013/14 to 98 in 2014/15, the variation is shown in the chart below.



Of the 98 applications made by the Trust the Supervisory body approved 20 as Standard authorisations. The majority of DoLS standard authorisation not granted was because the

patient had been discharged from hospital or had died before the Supervisory Authority had completed the Standard Authorisation process.

The significant impact of increased DoLS applications across the county has resulted in delays in the authorisation processes within acute hospitals and one of the actions agreed by the CCG and Supervising Authority has been to increase training places and funding to support an increase in Best Interest Assessors from Health. The Trust has supported this initiative and nominated experienced Nurses for training. Once trained Trust staff will participate in a county wide rota for Best Interest Assessors and this will help in addressing the delays in Standard Authorisations.

3.3 Mental Capacity Act and Deprivation of Liberty Safeguards

Support for increasing knowledge and understanding of the use of the Mental Capacity Act and DoLS was provided by the CCG and a number of Trust matrons group received enhanced training in March 2015. Within the Trust the Matrons are a key staff in advising clinical teams about the need for and application of Deprivation of Liberty Safeguards and the aim of the training was to enable the matrons to confidently support clinical staff in decision making, use of MCA and DoLS. The training was evaluated positively by recipients and the training provider.

4 Adult safeguarding training

Adult Safeguarding training is provided for all Trust staff through the statutory training programme and new staff induction programme. All staff receive mandatory updates every 2 years. Compliance with training attendance is recorded on the Electronic Staff Record and monitored through monthly reports to line managers, the statutory-mandatory training committee and the Safeguarding committee.

Level 1 training is provided for non-clinical staff to raise awareness of Adult Safeguarding.

Level 2 training is provided for clinical staff to enable recognition of abuse and to be able to make referrals, requirements of the mental capacity act and deprivation of liberty safeguards.

PALS and the complaints team also receive Level 2 training.

Adult safeguarding training compliance at the end March 2015 was 91.8% for all staff and 88.9% for staff requiring level 2 training. The target compliance for 2014/15 was 90% for all staff.

During 2014/15 the Adult Safeguarding Nurse also attended the Safeguarding Executive Leadership training provided by NHS England.

5 PREVENT awareness training

PREVENT is one part of the four strands of a cross government counter terrorism strategy called CONTEST. PREVENT focuses on the prevention of vulnerable people being drawn into terrorist or extremist activities and safeguarding them from exploitation or radicalisation. The Healthcare contribution is to work collaboratively with other agencies to safeguard people, children and adults, who may be vulnerable. As part of the Government strategy Health services are required to provide awareness training to all their staff.

Three members of Trust staff have been trained to provide HEALTHwrap PREVENT training.

Up to the end of March 2015 313 Trust staff had attended the Prevent HEALTHwrap workshops. Trust wide staff awareness was also promoted using PC screensavers regularly throughout the year.

The Prevent training and awareness raising programmes were updated during 2014/15 in line with the NHS England Prevent competency framework.

Prevent Awareness information has been included for staff at induction and in mandatory safeguarding training updates. The Trust also reviewed the staff group priority to attend the updated 2014/15 WRAP workshops. Priority groups for WRAP workshops include Emergency Department and Urgent Care Centre staff, Children's Services staff, Safeguarding teams and staff working in Trust services based in Luton.

In Hertfordshire referrals for PREVENT are channelled through the County Police Safeguarding unit and the multiagency 'Channel panel' in Hertfordshire meets regularly to manage the support requirements of individuals.

The Trust has not identified any cases to date that require referral through the local PREVENT process.

The Lead Nurse for Adult Safeguarding provides the lead on behalf of the Director of Nursing for PREVENT.

6 Supporting Adults with a Learning Disability

The Acute Liaison Learning Disability Nurses (Hertfordshire Health and Community Services) are involved with supporting patients with LD and their carers when using hospital services. They will assist Trust staff in making reasonable adjustments for patients, advising staff about what reasonable adjustments might be required, using appropriate communication tools for people with LD, enabling appropriate discharge packages of care, end of life care and will provide training for staff around the needs of patients with a learning disability.

The Trust uses PAS alerts (Patient Administration System) to attach an alert to the PAS record of a patient with a Learning Disability where that information has been shared from the Hertfordshire GP disability register or when a patient is identified to have a learning disability and consents to the alert being used. The use of the alert helps to identify when a patient with LD is admitted, attends the Emergency Department or is due to attend for an outpatient clinic or for an elective admission.

During 2014/15 the information team developed reports to enable future attendances to be identified for outpatients and elective admissions. The reports are now available to the outpatient clinical teams, the LD nurses, and elective admissions teams in order to assist them in forward planning for reasonable adjustments, where necessary.

Patient activity 2014/15 using LD PAS alert (Source Acumen reports)

| Activity Type | Attendances |
|----------------------------------|-------------|
| Emergency department attendances | 539 |
| Inpatient admission (emergency) | 266 |
| Inpatient admission (elective) | 26 |
| Day case attendance | 46 |

The Learning Disability Nurses have provided training and briefings for staff across the Trust during 2014/15. This has included awareness sessions on the additional needs of people with a Learning Disability and use of the 'Purple folder' for Clinical Support Workers, Nurses and Midwives and Student Nurses. They have also provided training for clinical staff on the patient safety day.

The Learning Disability Nurses, lead Consultant and Safeguarding Nurse gave a joint presentation to the medical Grand round in November 2014 on the findings of the Confidential Inquiry into the Premature Deaths of Adults with Learning Disability (CIPOLD) report followed by discussion about the risk of premature or unexpected deaths in adults with learning disability and learning from case presentations.

A presentation of the findings and learning from the CIPOLD report was also presented to the Matrons and Sisters meeting by the Adult Safeguarding Nurse.

A number of LD Champions from the Trust also attended the Hertfordshire Learning Disability conference in March 2015 which focused on the health needs of adults with LD.

The joint research project with Cambridge University, Cambridge University Hospitals and East and North Hertfordshire NHS Trust; Hospital Experiences of Adults with Learning Disability (HEALeD), was launched in 2014 and will continue until 2017. Adults with Learning Disability and carers from Hertfordshire have contributed to the public patient involvement group, supporting the project and being consulted on how best to involve adults and their carers. The research involves quantitative and qualitative methods.

During 2014/15 there have been vacancies in the LD team which have been difficult to recruit to, however, successful recruitment was achieved by end 2014/15 and the team returned to full establishment.

6.1 Acute Hospitals Learning Disability Improvement plan

In terms of progressing compliance with the Trust Acute Learning Disability Improvement plan actions taken during 2014/15 have included:

- The involvement of experts by experience in the Trust LD group
- Supporting the involvement of adults with LD as patient assessors in the PLACE (Patient Led Care Assessments of Care environments)
- A choir involving adults with Learning Disability has also participated in the patient experience initiative 'Kissing it Better' and provided entertainment for hospital patients and visitors
- Support for a local volunteer gardening group with a gardening project

- Information team published information datasets using the PAS LD alert which allows staff and the LD nurses to see when patients are due to attend clinic or for elective admissions, and assists to enable planning and making reasonable adjustments
- The newly reconfigured Day Surgery Unit at the Lister Hospital worked to achieve the Purple Star award (Hertfordshire Quality Standard for supporting Adults with LD)
- The Trust People Strategy 2014-2019 was launched and includes commitment to offering employment opportunities to groups within the local community who find it difficult to find employment
- Increased the number of LD champions across the Trust

An area of work which is still to be completed is the ability to produce easy read outpatient letters for patients, the LD nurses and outpatient team continue to work to resolve this issue.

During 2014/15 Trust staff have continued to work to support high quality care for adults with LD and this has included:

- LD nurses supporting Trust clinical teams with decision making in complex clinical cases
- LD nurses supporting patients and carers when patients are admitted to or attend the Trust
- Discussions with CCG and Health Liaison team (HLT) about planning for 7 day cover for the LD nurses
- Participation in the Hertfordshire Health Outcomes group for people with LD

6.2 Learning Disability Champions

During 2014/15 the number of LD champions across the Trust increased and there are now 60 named champions, ranging from front line clinical staff to Senior Managers and Executive Directors. A role description for the champions has been developed in conjunction with the LD nurses and this is accessible to all staff through the Trust knowledge centre (See appendix 1). We continue to recruit LD champions.

6.4 Patient alerts and reasonable adjustments

The Trust uses an LD alert on the Patient Administration System to assist in identifying patients who may need additional support or reasonable adjustments. The information for the alert was shared from the Hertfordshire GP LD register, when the systems changed with the move from PCTs to CCGs the process for sharing information changed and therefore the Trust has not been able to obtain updated registers since 2013. Discussions have continued with CCG and local authorities and information sharing processes will be resolved by the local authority in 2015 and this will enable the Trust to update the Trust information systems. In the meantime new alerts are added as and when patients with LD are identified and notified to the Adult Safeguarding nurse. The Electronic patient record used in the Trust also has an LD flag which can be added to a patient record so that staff can easily identify patients who need additional support or reasonable adjustments.

Reasonable adjustments may need to be made for patients with Learning Disability or Autism to achieve equitable access to services. During 2014/15 examples of reasonable adjustments made included:

- Multi-disciplinary team and carers care planning and best interests decisions for complex clinical case involving care in the Trust and two tertiary centres

- Consultant pre-op home visit to patient who had a hospital phobia in order to reduce anxiety and prepare for hospital admission for surgery
- Organising a pre-planned 'one stop' appointment for investigations, diagnostics and treatment for adult who would refuse to attend hospitals and was in need of urgent treatment
- Learning Disability Nurses attending hospital appointments with patients with LD
- Adjustments made to appointment times or theatre schedules to accommodate the needs of an adult with LD
- Carer support to enable carers to remain with patients in hospital where needed
- Pre-operative arrangements made with a person's care home and carers to enable pre-operative medication and preparation to be given at home to minimise the amount of time the person needed to stay in hospital
- Using the patient's 'Purple Folder' or health passport to understand the needs of an individual
- Using the Trust data sets to identify the future admission or clinic attendance of a patient with LD and to plan for attendance and involve the LD nurses as required
- Discharge planning and involving patient and carers or relevant parties in organising discharges including for complex care requirements

6.5 Audits

During 2014/15 audits of care for patients with a learning disability have been undertaken as part of the Matron and Senior Nurse Quality reviews of ward care, and by the Adult Safeguarding Nurse, LD Nurses, Director of Nursing and Deputy Director of Nursing. Care has also been audited through complaints, Serious Incident and clinical incident reviews and CCG quality visits to the Trust.

2014/15 quality audits showed the need for improvement in the following areas:

- Utilising the expertise of the LD Nurses to support making reasonable adjustments for patients
- Displaying information about the LD nurses in a prominent place on wards
- Ensuring mental capacity assessments completed and best interest decisions clearly documented
- Evidence of communication and with family carers or next of kin documented in patient records
- Involvement of next of kin or 'carer', as appropriate, in discussions about best interest decisions and care, treatment or DNACPR when the patient lacks mental capacity

Actions taken as a result of audits have been:

- Direct feedback to clinical teams about areas for improvement
- Intensive support to wards where concerns about standards of care have been identified
- Training and education needs of staff incorporated into Trust training plans
- Monthly inpatient audits
- Visibility of senior clinical and management staff in clinical areas to provide support to wards and clinical teams
- Back to the floor clinical days for Senior Nurses including Director of Nursing team
- LD nurses providing training to clinical staff

7.0 CCG quality assurance Safeguarding section 11 audit 2014

In December 2014 the CCG undertook a Safeguarding Adult assurance visit which included submission of a self-assessment by the Trust, supporting evidence and was followed up with on site visit by CCG Director of Nursing and Head of Safeguarding. The outcome of the assessment is shown in the table below.

Safeguarding Adults assessment RAG rating outcomes

| | |
|---|-----------|
| Organisation fully meets requirements at an outstanding level | 1 |
| Organisation meets the requirement consistently | 41 |
| Organisation meets requirements in part/improvement needed | 3 |
| Organisation does not meet requirement | 0 |
| Total | 45 |

The 3 areas of amber rating were in relation to:

- Control of risks – The CCG had concerns about the timeliness and availability of GP discharge summaries being sent for vulnerable patients
- Mental Capacity Act – The Trust had not undertaken recent formal audits of staff understanding and practice in using MCA
- Deprivation of Liberty Safeguards – matron update training from the Supervising Authority was not available due to increased DoLS activity as a consequence of the 2014 Supreme court ruling

The formal audit for MCA/DoLS took place in June 2015 and the update training for matrons was provided in March 2015.

The findings from the CCG assurance visit were:

- Trust demonstrated that adult safeguarding was part of the Trust's objectives and values and linked with key strategies and the 'Francis' action plan
- Policies and procedures were in place to support safeguarding adults at risk
- Trust provided evidence of outcomes resulting from safeguarding adults at risk and provided examples of learning
- All new doctors receive safeguarding adult training as part of their induction
- Concern expressed by the CCG regarding resilience of Safeguarding Lead Nurse as a single post, although recognised it is mitigated by matrons and deputy director of nursing supporting the safeguarding agenda
- CCG noted that the Trust experienced a lack of feedback from the local authority regarding outcomes of safeguarding alerts raised by the Trust unless the Trust was directly involved in the investigation (also identified in HCS external review and expected to be resolved as part of the HCS action plan)
- Trust to ensure that GP discharge summaries were provided for all vulnerable patients within the agreed timescales
- DBS employment checks in place
- Audits of the understanding and use of Mental Capacity Act to be undertaken
- Concern about robustness of the support from the LD team to the Trust

The CCG highlighted good practice with:

- The enabling approach by the Safeguarding Lead Nurse to support staff completing Deprivation of Liberty Safeguards

- Debrief and support for staff following a major incident
- Whistleblowing incidents are reported in part 2 of Trust Board meetings
- Mental capacity assessments are used for patients in discharge assessments and planning

The recommendations from the CCG were:

- Appraisal documentation should include specific section on safeguarding to align with competency framework
- Formal audit of MCA to be undertaken
- Improvement in timeliness of discharge summaries sent to GPs
- Trust to identify additional staff to undertake Best Interest Assessors course to increase level of expertise within the Trust

The implementation of the action plan for the quality assurance visit is monitored through the Safeguarding committee.

8.0 Domestic Violence Independent Advocate

During 2014/15 the CCG and Victim Support Hertfordshire provided funding for an Independent Domestic Violence Advocate post to be established in the Acute Hospitals in Hertfordshire. The posts form part of the Hertfordshire strategy for reducing the risks to adults from domestic abuse or violence.

The IDVA post was implemented for the Trust in January 2015 and has established:

- Visibility with clinical teams and contacts with key safeguarding staff and departmental leads
- Process for clinical staff obtaining advice in relation to concerns about DV
- Referral pathways for adults at risk from domestic abuse or violence
- Relationships with the local police
- Engagement with individuals who are at risk of or are experiencing domestic abuse or violence

9.0 Safeguarding Committee

The joint Safeguarding committee met every six weeks during 2014/15.

The work plan of the Safeguarding committee and the Adult Safeguarding Nurse during 2014/15 has included:

- Updating procedures regarding Deprivation of Liberty Safeguards
- Participation in the Hertfordshire Adults Safeguarding Board meetings and activities
- Use of social media to raise awareness of adult safeguarding and the Trust website to publish public and patient information.
- Delivery of Adult Safeguarding and Prevent training
- Updating Adult Safeguarding training to align with 2014 Care act
- Attending update training for Prevent awareness
- Providing advice and support for staff in decision making regarding safeguarding adults at risk, mental capacity, best interest decisions and deprivation of liberty safeguards
- Participation in Multi-agency Safeguarding Incident Review (MASIR) following suicide attempt made from Multi-storey car park
- Involvement in the Hertfordshire Dementia Strategy Group
- Development of the Trust Dementia care strategy led by the Dementia clinical leads
- Establishment of the Dementia Nurse Specialist post in the Trust

- Participation in the County Council Health Scrutiny Café 2015
- Continued improvements in the risk of harm to patients from falls or pressure ulcers
- Providing update training for matrons for Mental Capacity Act and Deprivation of Liberty Safeguards
- Increased number of LD and Dementia champions
- Increasing cohesiveness in the Safeguarding agenda where overlaps between child, adult and family safeguarding
- Learning from Safeguarding concerns shared at Safeguarding committee, Nursing and Midwifery Committee and Matrons and Ward Sisters meetings, and through RAQC reports
- Participate in safeguarding investigations and Serious Incidents

Work plans and priorities for 2015/16 in addition to regular and continuing adult safeguarding work:

- Achieve 95% for staff mandatory training for Adult Safeguarding in 2015/16 Update all policies and guidelines relevant to Adult Safeguarding, MCA and DoLS
- Embed learning from MCA/DoLS scrutiny review in June 2015
- Obtain LD register information from local authority
- Participate in the recruitment of patients for the HEALeD research project
- Continue to network and represent the Trust at regional forums and good practice events
- Continue to implement improvement plans for LD, Dementia care and Adult Safeguarding
- Participate in the work of the Hertfordshire Health Outcomes group and implement actions agreed for the Trust
- Trust services to progress achieving 'Purple Star' quality standards for adults with LD
- Trust services to embed good practice in care of adults with LD, Dementia and safeguarding adults at risk
- Trust to support staff undertaking Best Interest Assessor training to increase expertise within the Trust and support increasing capacity of assessors within Hertfordshire
- Update all expired policies and procedures
- Prepare for CQC inspection in October 2015

10 Notable achievements in Adult Safeguarding in 2014/15

- Demonstrated assurance in Safeguarding to the CCG through section 11 visit
- Achieved 90% compliance for all staff mandatory training for Adult Safeguarding by March 2015
- The Treatment centre transferred to using Trust PAS and BIMS utilising LD and dementia alerts
- Information team provided daily datasets identifying patients with future outpatient and elective attendances and are accessible to the relevant clinical teams
- Safely managed transition of in-patient, emergency department and theatre services in major reconfiguration programme moving services from QEII Hospital, Welwyn Garden City to Lister Hospital, Stevenage during 2014/15
- HEALeD research project launched
- Established role of IDVA in the Trust
- The newly reconfigured Day Surgery Unit progressed work to achieve the Hertfordshire Purple Star accreditation during 2014/15, demonstrating good practice in care of adults with Learning Disability