

Report to Trust Board

Date: 26 January 2011

Agenda item 9.2

Title:	Safeguarding Vulnerable Adults Report Q3
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Responsible Director	Director of Nursing and Patient Services
Purpose:	Assurance/Information
Action Required:	To note the report
Executive Summary:	<p>This report provides an update on the safeguarding of vulnerable adults in the Trust summarises performance against the action plan:</p> <ul style="list-style-type: none">• Governance arrangements• Recruitment• Training• Audit• External review
Relevant CQC Standard	CQC outcomes 1, 4, 6, 7, 14, 16
Link to strategy/plans	Business strategy to deliver continuous quality improvements Maintenance of CQC registration in relation to safeguarding
Impact assessment	
-quality	Improvement
- finance/business	Establishment of full time post achieved
- equality/diversity	Meeting the needs of the most vulnerable
- risk	Amber
- legal/statutory	Safeguarding partnership working
- sustainability	None
Previous consultation/ discussion/reports	EMG / EDs / Q2 report September Trust Board 2010

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Safeguarding Vulnerable Adult Report Q3 January 2010

1. Governance arrangements

A new county wide policy for Safeguarding Adults was approved by the Adult Safeguarding Board this year and this is demonstrated on the Trust intranet and available to all staff.

There is a Trust wide Executive lead for adult safeguarding and since the last report a substantive lead nurse post was confirmed and filled internally. Since taking up post the post holder has subsequently decided to retire and the post is therefore under recruitment. Interim arrangements have been instigated hence the amber risk rating.

There is also a Trustwide safeguarding Committee that review the arrangements for Safeguarding Vulnerable adults, children and young people. This is chaired by Director of Nursing and Patient Services. This Committee receives reports from the Operational Groups for adults and Children and Young people. The Trust is also represented at the county wide Adult Safeguarding Board.

The Trust wide Safeguarding Vulnerable Adult Operational Group met once earlier this year but this has not met recently. Since the establishment of the full time post, actions have been taken to restart the group and this will roll out further once a new person is recruited. The terms of reference have been reviewed in preparation for this. Interim arrangements are also in place to cover attendance at the partnership operational groups.

As part of the quality review underway by the Director of Nursing and Medical Director, the safeguarding KPIs will be introduced into the divisional / service line quality scorecard reviewed at divisional governance committee (as currently exists in the women and children's division), which will report through the safeguarding committee to Governance Committee and the Board

2. Recruitment

Safer Recruitment is being rolled out across the Trust to ensure that each interview panel has one member who has attended the training. The HR department is tracking all staff who require an enhanced CRB for access to vulnerable adults across the organisation.

Bedford Hospital NHS Trust has followed the guidance from NHS Employers on CRB checking staff employed and has CRB checked all staff members since 2005 as mandatory and can assure the SHA and Trust Board that the Trust meets the statutory requirements; this is also reflected in the Recruitment Policy and CRB Policy. A detailed breakdown in relation to performance in this area will be provided in the next quarterly report.

3. Training

Training for the Safeguarding of Vulnerable Adults is now widespread across the organisation. New trainers have been developed to ensure that there is good availability of training and this will be further developed as part of the E-Learning plans for the Trust under development by the Head of OD.

The training includes:

- Clinical Update days
- Induction for new starters
- Volunteers training
- SOVA for non-clinical staff
- SOVA for maternity staff

The training package in use is based on the Local Authority training package.

4. Audits

Internal audit have recently undertaken a review of the adult safeguarding service. The report is not yet available but is expected in the next week. Feedback and assurance will be presented with any required actions at a future Audit Committee.

5. External Review

Following on from the last quarterly report where information was provided to the Board on the Adult safeguarding Board audit that had been undertaken.

Eight domains were reviewed, namely:

1. Senior management commitment to the importance of safeguarding and promoting vulnerable adults welfare
2. A clear statement of the agency's responsibility towards adults is available to all staff
3. A clear line of accountability within the organisation for work on safeguarding and promoting the welfare of adults
4. Service development takes account of the need to safeguard and promote welfare and is informed, where appropriate, by the views of service users and their families
5. Staff training on safeguarding and promoting the welfare of adults for all staff working with or, depending on the agency's primary functions, in contact with service users and their families
6. Recruitment, vetting procedures and allegations against staff
7. Inter-agency working
8. Information sharing

Under each domain, there were a total of 43 criteria with the following performance:

Less effective 1

Effective 24

Exceeds requirement 18

An action plan will be developed to meet the requirements any improvement areas and work will continue to maintain the areas of good practice.

In summary, good progress has been made against the CQC action plan, however an ongoing risk exists due to the vacant safeguarding lead post which is partly mitigated by the interim arrangements.

There is generally a raised awareness across the Trust and we have received positive feedback from the Local Authority in relation to improved referral and management of safeguarding concerns. This is supported by increased reporting data on Datix and through the SOVA referral process data.