 <p>Iechyd Cyhoeddus Cymru Public Health Wales</p>	<p><b>Name of Meeting</b> Quality, Safety and Improvement Committee</p> <p><b>Date of Meeting</b> 16 May 2023</p> <p><b>Agenda item:</b> 3</p>
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<b>Safeguarding Annual Report 2022-2023</b>	
<b>Executive lead:</b>	Rhiannon Beaumont-Wood, Executive Director, Quality, Nursing and Allied Health Professionals
<b>Author:</b>	Donna Newell, Named Lead for Safeguarding

<b>Approval/Scrutiny route:</b>	Business Executive Team
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<b>Purpose</b>
The purpose of this report is to provide the Committee with an Annual Safeguarding report summarising the work completed against the Safeguarding workplan for 2022-2023.

<b>Recommendation:</b>				
APPROVE <input type="checkbox"/>	CONSIDER <input type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	Assurance <input checked="" type="checkbox"/>

The Committee is asked to:
<ul style="list-style-type: none"> <li>• <b>Take assurance</b> that there are effective arrangements in place to meet our statutory duties.</li> </ul>

**Link to Public Health Wales [Strategic Plan](#)**

Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities.

**This report contributes to all strategic priorities.**

**Summary impact analysis**

<b>Equality and Health Impact Assessment</b>	An Equality and Health Impact Assessment is not necessary as no decision is required.
<b>Risk and Assurance</b>	N/A
<b>Health and Care Standards</b>	This report supports and/or takes into account the <a href="#">Health and Care Standards for NHS Wales</a> Quality Themes  Theme 4 - Dignified Care Person Centred Care Theme 2 - Safe Care
<b>Financial implications</b>	N/A
<b>People implications</b>	N/A

## **1. Purpose/Situation**

Public Health Wales is committed to ensuring that Safeguarding is everybody's responsibility within the organisation. This supports the delivery of high-quality services and safeguards the health and well-being of both service users and staff.

The purpose of this report is to provide the Committee with an Annual Safeguarding report summarising the work completed against the Safeguarding workplan for 2022-2023 and outlines safeguarding activity, achievements and priorities within the reporting period.

## **2. Background**

Public Health Wales has a responsibility to comply with safeguarding legislation. The aim of this annual report is to provide assurance that the organisation is fulfilling legislative requirements by summarising and reporting key safeguarding activity in line with the organisational Safeguarding Workplan for 2022-2023.

To support ongoing governance arrangements the cross organisational Safeguarding Group supports the Business Executive Team in progressing and monitoring safeguarding improvements and workplan. It meets quarterly as identified in the terms of reference and scheme of delegation and is chaired by the Executive Director for Quality, Nursing and Allied Health Professionals. The Quality, Safety, and Improvement Committee (QSIC) is the main Board Committee (on behalf of the Board) to oversee and monitor and receive assurance on Safeguarding arrangements within Public Health Wales. Both BET and QSIC monitor progress and receive key elements of assurance through the progress identified through the self-assessment process of the Safeguarding Maturity Matrix, the annual work plan, and the Corporate Safeguarding Annual Report. Progress with the. Appendix 1 outlines the overall objective and deliverables. To date all 9 deliverables have been achieved.

## **3. Assessment**

This annual report summarises safeguarding work undertaken across Public Health Wales and demonstrates how it discharges its statutory duties and safeguarding responsibilities under the following pieces of legislation:

- Social Services and Well-Being (Wales) Act (2014) (SSWBA)
- Violence Against Women Domestic Abuse and Sexual Violence Act (2015) (VAWDASV)
- Well-being of Future Generations (Wales) Act 2015
- Children Act 2004
- Mental Capacity Act (Amendment) 2019

The Annual Report is also informed by Health and Care Standard 2.7 Safe Care: Safeguarding Children and Safeguarding Adults at Risk. Health services promote and protect the welfare and safety of children and adults who become vulnerable or at risk at any time (Health and Care Standards Wales 2015).

## **Key Achievements 2022/2023**

### **3.1 Safeguarding Group**

The purpose of the Safeguarding Group is to ensure there is progress, monitoring or improvement plans and the safeguarding workplan, together with sharing learning within the group and to promote and identify mechanisms for wider learning across the organisation with regard to safeguarding and promoting the welfare of children and adults at risk. The Safeguarding group meeting supports the provision of assurance to the Business Executive and the Board/Board Committee in relation to PHW's arrangements for all safeguarding issues in accordance with its stated objectives and the requirements and standards determined by the NHS and Legislation. In addition to this monitoring the group focused on identifying areas for improvement in PHW associated with Safeguarding practice. Areas of focus included, discussing, and agreeing the safeguarding risk register, contributing, and informing the Safeguarding Maturity Matrix which included organisational scoring. Other areas identified for improvement included organisational compliance with Disclosure and Barring checks and reporting of Safeguarding training compliance. The group also reviewed safeguarding policies and procedures.

### **3.2 Safeguarding Dashboard of Key Performance Indicators**

The following Key performance indicators (KPIs) have been agreed by the Safeguarding Group for inclusion in the development of a safeguarding section of the dashboard:

- Disclosure and Barring compliance rates
- Safeguarding Mandatory Training Compliance
- The number of referrals and reporting of Safeguarding Concerns to the Local Authority within designated time frames

However the ability to display these data has been paused at present due to competing pressures of work in the performance team.

### **3.3 Safeguarding Ambassadors**

Safeguarding Ambassadors are a role identified within teams and Divisions to champion and promote Safeguarding positively within PHW, this helps to

increase Safeguarding awareness across Public Health Wales. Quarterly Safeguarding Ambassador Meetings have continued throughout 2022-2023 chaired by the Named Lead for Safeguarding to provide current information and resources to assist the Safeguarding Ambassadors in their role. The internal digital platform within Microsoft Teams has enabled resources to be made available and shared with the Safeguarding Ambassadors which are disseminated by Regional Safeguarding Boards, including Safeguarding Network Bulletins, training opportunities and legislative updates.

### 3.4 Policy Development and Review

There are a number of Policies and procedures to guide staff in understanding and responding appropriately to safeguarding prevention and concerns. In this reporting period the following procedures have been developed and approved:

- Managing Allegations of Abuse by Staff Procedure
- Procedure for gaining (and recording) consent to screening

The Safeguarding policy and procedures published last year are now due to be reviewed

- Violence Against Women, Domestic Abuse and Sexual Violence Procedure
- Children at Risk Procedure
- Adult at Risk Procedure
- Safeguarding Policy
- Prevent policy

### 3.5 Safeguarding Training and Compliance

The Trust's training plan continues to support statutory safeguarding requirements. This is achieved by ensuring that staff are provided with the right level of safeguarding training commensurate with their role. To ensure the correct level of staff proficiency an organisational safeguarding training needs analysis has commenced.

Currently all staff are expected to undertake a level of Safeguarding training as part of their mandatory training programme; nonservice user facing staff are expected to complete the Level 1 module every three years. Staff who have direct contact with the public are expected to undertake the Level 2 module every 3 years, which encompasses the information within the Level 1 module. Staff access training via the NHS e-learning portal ESR. There is a requirement for all staff in PHW to complete Group 1 of the Violence Against Women, Domestic Abuse and Sexual Violence Public Health Wales Act Training as outlined by the National Training Framework. Group 2 of the Violence Against Women, Domestic Abuse and Sexual Violence training has

been delivered virtually to our frontline staff so that they are further supported to identify, support, and take action for victims and their families.

The table below illustrates the number of staff who have completed the various levels and groups of safeguarding training.

The compliance data as at is displayed below:

**Table One: Safeguarding Training Compliance to 31<sup>st</sup> March 2023**

Competence Name	Assignment Count	Required	Achieved	Compliance %
NHS CSTF Safeguarding Adults - Level 1 - 3 Years	2229	2229	2012	90.26%
NHS CSTF Safeguarding Adults - Level 2 - 3 Years	520	520	435	83.65%
NHS CSTF Safeguarding Children - Level 1 - 3 Years	2229	2229	1981	88.87%
NHS CSTF Safeguarding Children - Level 2 - 3 Years	520	520	401	77.12%
NHS MAND Violence Against Women, Domestic Abuse and Sexual Violence - 3 Years Group 1	2229	2229	1929	86.54%
028 LOCAL Violence Against Women, Domestic Abuse and Sexual Violence Group 2 - 3 years  Group 2	502	502	274	54.58%

The Welsh Government target for Statutory mandatory training is 85% and Public Health Wales has set targets of 95 %. All training compliance is captured on the Electronic Staff Record and is reported quarterly at the Safeguarding Group Meeting. There has been an increase in the compliance with Level 1, Level 2 Safeguarding Children and Adult training and Group 1 VAWDASV. All these modules are delivered electronically via ESR. An organisational safeguarding training needs analysis has commenced which identifies how many staff need to be trained to further improve compliance. The training needs analysis will inform a training plan for the next 3 years.

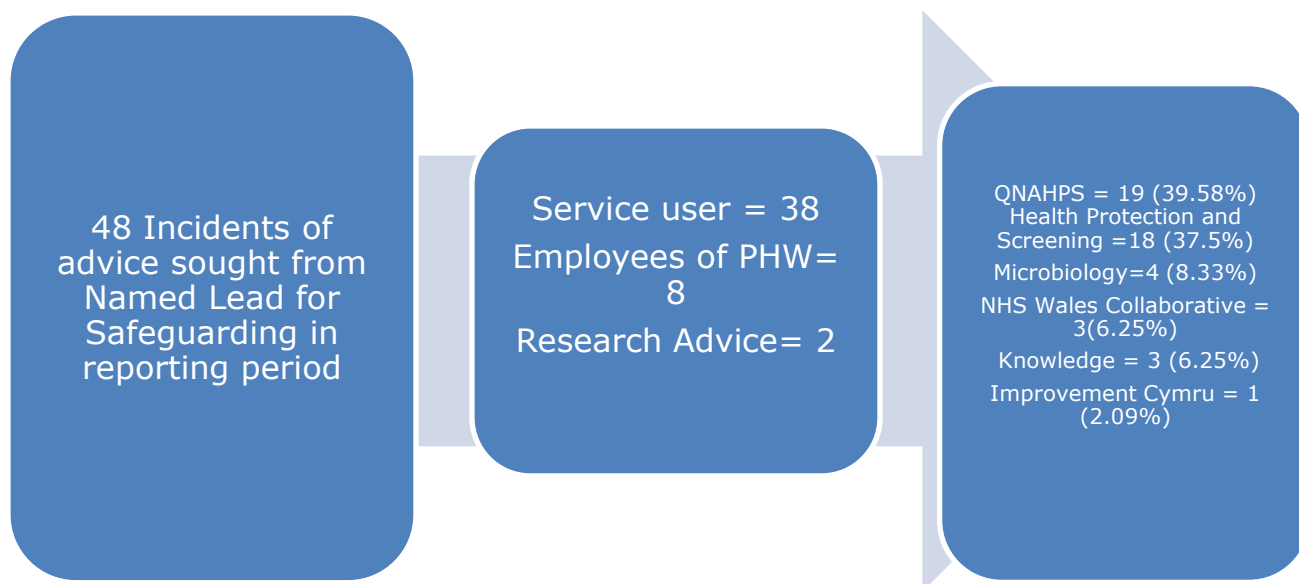
A small increase in the compliance with Group 2 VAWDASV training has been noted, this is because the correct competency was not allocated within ESR. A training needs analysis has identified that a further 235 staff need to be trained in this reporting period 70 staff have been trained. Group 2 VAWDASV is delivered virtually by the named Lead for Safeguarding. Bimonthly training sessions have been implemented from April 2023 to improve the compliance. The Group 6 is a series of short films that are aimed at Public Service Leaders. It has been identified nationally that the reporting of the compliance with this training is a challenge. As a result, WG have developed a platform where the videos can be accessed. A paper outlining this was written and presented at Safeguarding Group Meeting and

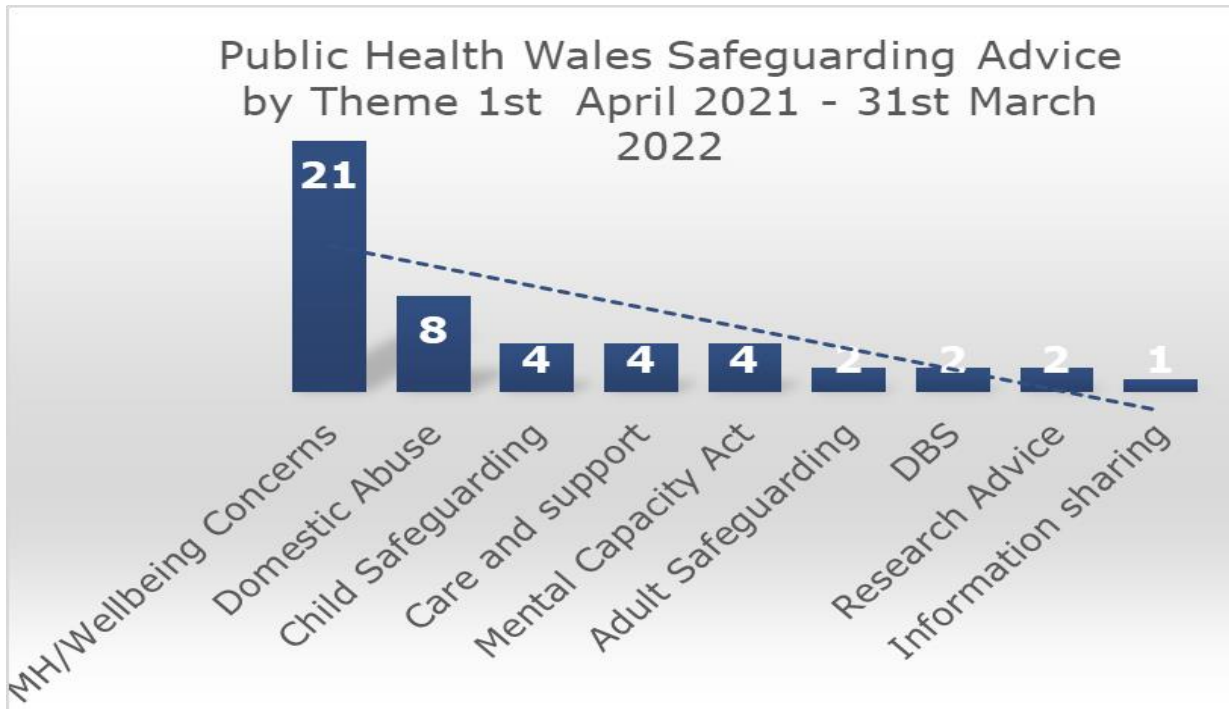
the information disseminated to the Board members by email. The compliance in this area has seen some improvement with 5 out the 18 Board Members completing this training giving an overall compliance rate of 28%. However, it is recognised more needs to be done to improve compliance at this level.

A safeguarding training needs analysis has commenced identifying areas for improvement for all levels of Safeguarding training. A training plan for the next 3 years will identify improvements in compliance which are required and will be monitored and reported quarterly for progress at the Safeguarding Group Meeting.

### 3.6 Safeguarding Incident reporting and Safeguarding advice

The Named Lead for Corporate Safeguarding is notified of all incidents entered onto the Datix incident management system categorised as a Safeguarding concern. This allows for safeguarding specialist oversight of the incident and ongoing support of Safeguarding concerns. The flow diagram below identifies which directorate have reported the safeguarding concerns.



Graph 1: Theme of safeguarding concern

When a child or adult at risk has been identified staff follow the Public Health Wales and multiagency Wales Safeguarding Procedures, making a referral to the relevant Local Authority accordingly. These concerns are captured on the Datix system and categorised as safeguarding by the referring staff. The Named Lead for Safeguarding has continued to progress PHW'S staff skills and understanding of the Safeguarding thresholds met, to ensure that the reports made to Social Services are appropriate and in accordance with the required standard. A total of 6 Safeguarding Reports were made to Local Authorities across Wales between 1<sup>st</sup> April 2022 to March 31<sup>st</sup> 2023. This is a decrease of seven from the previous annual year. Three referrals were made for Child Protection Concerns, two referrals were made to the LA for adult at risk concerns, one report was made for assessment of adult care and support needs. All safeguarding reports progressed to further enquiries with the local authorities.

### 3.7 Learning from Safeguarding Incidents

Following a safeguarding incident within Microbiology a key area for improvement was identified with the need for a Safeguarding Standard Operational Procedure to support Microbiology staff. This has subsequently been developed and will be presented to the Microbiology Methods, Development and Standardisation Group to ensure this develops as an All Wales Safeguarding Operational Procedure for all laboratories in Wales.



## Safeguarding Maturity Matrix Self-assessment

The Safeguarding Maturity Matrix tool was reported for 2020-2021. The improvements are reported retrospectively. The Named Lead for Safeguarding participated in a face-to-face peer review process in November 2022 as part of the arrangements. Together with nine other NHS organisations who, through a facilitated approach, were able to consider and discuss individual self-assessment improvement plans in a collaborative and transparent system of learning. PHW's improvement plan forms part of the Safeguarding priorities set for 2023-2024 and beyond.

Public Health Wales's Maturity Matrix Score for 2022-2023 was **18 out of 25**. The National Safeguarding Service have decided to change the scoring system to a BRAG score for the next reporting period as the scoring can be subjective.

Table 2: PHW SMM assessment scoring

Standards	Maturity Score 2020-2021	Maturity Score 2021-2022	Maturity Score 2022-2023
1) Governance and Rights based approach	4	4	4
2) Safe Care	4	4	4
3) ACE Informed	4	3	3
4) Learning Organisation	3	4	4
5) Multi agency working	4	4	3

### Organisational Safeguarding work plan

There were nine objectives on the 22/23 work plan see appendix 1. All objectives had been met.

### Ongoing Safeguarding Activity

#### Key priorities for 2023-24 will be:

- To continue with The Right Way: A Children's Rights Approach, engaging with The Young Ambassadors to ensure that Children's Rights are embedded within the organisation
- To further strengthen PHW'S safe recruitment practices focusing on Disclosure and Barring Checks

- To continue maintaining the professional relationship with Regional Outreach Advisor for DBS and reporting on the audit findings
- To implement a different model of Safeguarding Supervision that will be accessible to staff across different parts of Public Health Wales
- To improve PHW'S overall safeguarding training compliance by developing a 3-year Safeguarding Training Plan
- To complete the Safeguarding Maturity Matrix with submission to the National Safeguarding Service for an agreed Peer Review with an NHS Wales organisation
- To progress the improvement work with Microbiology, ratifying the Safeguarding Standard operational procedure and advocating an All-Wales approach and adoption.

## Well-being of Future Generations (Wales) Act 2015

The report contributes to Goal 3 "Support the NHS to deliver high quality, equitable and sustainable services". The below information follows the five ways of working, as defined within the sustainable development principle in the Act, in the following ways:



The annual report seeks to provide the Board and relevant Board Committees with assurance that the organisation is meeting its responsibilities in relation to the management of Safeguarding.



Where possible Public Health Wales seeks to prevent the occurrence of concerns by taking a proactive approach to the reporting of Safeguarding concerns to ensure safe services are provided to the users and employees of our services.



The Safeguarding Annual report impacts a number of the wellbeing goals, including "A Resilient Wales" and "A More Equal Wales"



Public Health Wales is committed to dealing with safeguarding events and incidents in an open, accessible and fair manner. The report offers insight into how various teams are working together with Public Health Wales NHS Trust to provide the best outcomes



This annual report is an important aspect of the organisation's governance arrangements, and, as such, helps the organisation to improve the quality and safeguard the high standards of the services provided by Public Health Wales

#### 4. Recommendation

The Committee is asked to:

- **Take assurance** that there are effective arrangements in place to meet our statutory duties.

**Appendix 1****Corporate Safeguarding Annual Workplan:  
Deliverables/Milestones**

1. Public Health Wales Annual Safeguarding Report for 2021-2022 published ✓
2. Submission of the completed Safeguarding Maturity Matrix to the National Safeguarding Service ✓
3. Develop a Safeguarding Maturity Matrix Improvement plan which will be subject to peer review by another NHS Wales body ✓
4. Implement, monitor, and report against the Safeguarding Maturity Matrix improvement plan ✓
5. Work with Integrated Governance Division to ensure that prevention of harm is embedded in the overarching Public Health Wales Integrated Governance Model to support a quality planning system ✓
6. Provide biannual report on safeguarding incidents to the Clinical Governance Group ✓
7. Commence preparations for the 2022/2023 Safeguarding Maturity Matrix assessment ✓
8. Monitoring of the Safeguarding Maturity Matrix Improvement plan with clear milestones for success and ensuring clear reporting for Board assurance ✓
9. Build capacity and resilience within corporate Safeguarding to undertake quality and improvement ✓