

Safeguarding Annual Report 2023-24



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1. Introduction

Welcome to the Annual Safeguarding Adult and Children report for NHS Gloucestershire Integrated Care Board (GICB) which covers the period from 1st April 2023 to the end of March 2024. The report aims to provide a national and local context to safeguarding developments during this period and outlines how GICB is meeting its statutory safeguarding responsibilities.

GICB is asked to note the contents of this report and accept this report as assurance that as an organisation we are meeting the minimum statutory requirements for safeguarding children and adults.

2. Statutory Requirements

ICBs have a statutory duty to put in place appropriate arrangements to safeguard children and adults at risk. This includes:

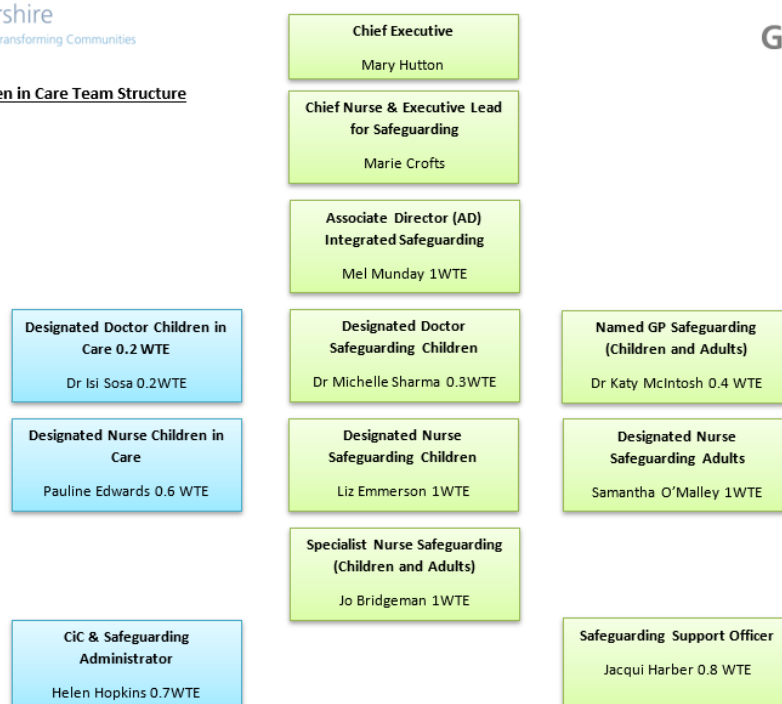
- ensuring that GICB's internal safeguarding arrangements are sufficient, and that safeguarding is embedded in practice.
- being assured that the safeguarding arrangements of all commissioned services are appropriate.
- co-operating with local safeguarding arrangements.
- securing the expertise of statutory Designated and Named Professionals on behalf of the local health system.

3. ICB Safeguarding Governance Arrangements

ICB Safeguarding & Children in Care Team Structure (including WTE)



Safeguarding & Children in Care Team Structure



Overview of Gloucestershire ICB Compliance

As per the “Safeguarding Children, Young People and Adults at Risk in the NHS: Safeguarding Accountability and Assurance Framework” (SAAF) revised August 2022, ICBs are responsible in law for the safeguarding elements of the services they commission.

The table below illustrates our compliance against the SAAF Framework as submitted to NHSE in September 2023 and updated quarterly to reflect any changes.

[NHSE Safeguarding children, young people and adults at risk in the NHS - Safeguarding accountability and assurance framework](#)

AREA	STANDARD	RAG RATING
Leadership and Organisational Accountability	<p>A clear line of accountability for safeguarding, reflected in the ICB governance arrangements, i.e., a named executive lead to take overall leadership responsibility for the organisation’s safeguarding arrangements. In addition, a team made up of Designated Professionals for safeguarding children, looked after children, care leavers and safeguarding adults.</p> <p>Roles in place but Named and Designated capacity is not in line with Intercollegiate guidance for WTE per population – on ICB risk register and business cases completed but not yet able to progress due to financial restraints.</p>	
Training	<p>Training all ICB staff to recognise and report safeguarding issues supported by a training strategy and compliance percentage in line with Intercollegiate Documents and national guidance for Prevent.</p> <p>We have developed a mandatory safeguarding training reporting system and completed a training needs analysis (see training section)</p> <p>*Prevent mandatory training not in place for all ICB staff hence amber but this is being addressed in quarter 1 24-25.</p>	
Safer Recruitment	<p>Clear policies describing the commitment and approach to safeguarding, including safe recruitment practices and arrangements for dealing with allegations against people who work with children and adults, as appropriate.</p> <p>Human Resources are responsible for ensuring the safe recruitment of staff at the ICB, including undertaking DBS and identification checks. All pre-employment checks are undertaken in accordance with NHS Employment Check Standards.</p>	

	<p>The ICB support staff to follow the GCSB Escalation Policy and Allegations Against Staff Policy as appropriate (as outlined in our internal safeguarding children policy). This is explicit in safeguarding training and both formal and informal supervision.</p>	
Inter-agency working	<p>Effective inter-agency working; GICB, Local Authority, Police and key partners, including within the operation of Gloucestershire Safeguarding Children Partnership and Gloucestershire Adult Safeguarding Board</p> <p>The Section 11 audit for GSCP is completed each year and there was evidence of improved interagency working.</p> <p>The GSAB Self- Assessment is completed yearly to evaluate how the ICB is performing.</p> <p>GICB is a key equal partner of our Safeguarding Children Partnership and Adult Board; health leadership is undertaken by the ICB Executive Nurse, Associate Director Safeguarding and Designated Professionals.</p> <p>We endeavour to attend all sub-groups, alongside our provider health safeguarding colleagues as appropriate.</p> <p>GICB Safeguarding team are ongoing strategic health members of the Domestic Abuse Strategic Board, Sexual Violence Partnership Board and Safer Gloucestershire. We have supported the development of the updated multiagency domestic abuse strategy and the sexual violence strategy.</p> <p>During 23-24 we have led the ICB statutory responsibilities for the new Serious Violence Duty as a specified authority. We have worked with partners to develop a needs profile and the subsequent Gloucestershire Serious Violence 5-year Strategy.</p>	
Implementation	<p>Appropriately engaged with all safeguarding investigations, multi-agency case reviews or safeguarding practice reviews and that the evidence of learning has been embedded into practice.</p> <p>As the strategic health partner of GSCP and GSAB we are engaged in all statutory Children Safeguarding Practice Reviews (CSPR) and Safeguarding Adult Reviews (SAR) (including non-statutory learning reviews and Domestic Homicide Reviews (DHR's) and lead the health coordination, oversight and response.</p>	

	<p>We are working on improved oversight for embedding learning as lead across large and complex multiple health organisations which is often a challenge. We have started to improve this by creating combined health action plans, led by the Designated Nurses. These action plans are monitored to ensure learning is embedded across providers as efficiently and effectively as possible.</p> <p>Where actions apply to the ICB wider than safeguarding we work closely with the relevant teams to support implementation i.e., commissioners. This report provides a detailed section on learning from statutory safeguarding reviews.</p>	
Patient Engagement	<p>Ensures appropriate and accessible information is provided for its population in relation to how it discharges its duties for safeguarding.</p> <p>The ICB safeguarding team do not work directly with patients as a commissioning organisation. Our Safeguarding annual report is published on the ICB website (public facing) which outlines how we discharge our duties alongside information and helpful links. As partners of the GSCP and GSAB the publicly available information for our population is jointly owned by the ICB and work with our partners to engage patients in safeguarding reviews and investigations.</p>	
Supervision	<p>Safeguarding supervision is available to staff in line with Intercollegiate Guidance</p> <p>Virtual Safeguarding Supervision is provided regularly (as capacity allows) to Gloucestershire GPs by the ICB Named GP for Safeguarding Adults and Children. This is a popular means of accessing support and guidance and GP's (and internal staff and commissioned other providers) can contact the safeguarding team at other times to obtain ad hoc advice if required.</p> <p>Safeguarding supervision is well established at the ICB for the Continuing Health Care Nurses and for this year includes the Dynamic Keyworker team by the Safeguarding Specialist Nurse, who is also a Professional Nurse Advocate (PNA) and Freedom to Speak Up Guardian and is available to all staff on an ad hoc basis. The team have rolled out a more expansive supervision offer this year which is outlined in the supervision section below.</p> <p>The Designated Nurses provide supervision to the Named Nurses/Professionals and Named Midwife for Safeguarding Children and the Designated Dr Safeguarding Children provides supervision to the Named Doctors for Safeguarding Children in both Trusts.</p>	

Assurance	<p>As a commissioner of local health services, the ICB must be assured that there are effective safeguarding arrangements in place in the services and gain assurance throughout the year to ensure continuous improvement.</p> <p>GICB safeguarding team during 23/24 have recommenced a rolling programme of supportive safeguarding assurance visits to GP practices requiring support with safeguarding practice. This is benchmarked against the annual safeguarding self-assessment audit element within the local Primary Care Offer that is required to be completed by all practices.</p> <p>Amber as this is not yet complete: 4 practices have yet to submit the self-assessment audit for 23/24. There are also several practices to visit and team capacity is key.</p>	
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We submit a quarterly report to NHSE and these are the highlights for 23/24:

Q1: Key achievements/ celebrations

1. Designated Nurse Safeguarding Children stand-alone post recruited to. This post supports the ICB to meet its statutory requirements for WTE posts for safeguarding children as was held by the Associate Director Safeguarding as a dual role.
2. The Safeguarding Team are representing the ICB at the newly developed Serious Violence Duty strategic working group and working closely with the Office Police Crime Commissioner Serious Violence lead. The ICB as a specified authority have a legal obligation to work together to prevent and reduce serious violence under the Duty. We are working collaboratively in the planning stages to develop a multiagency strategy and delivery plan.
3. A 3 week unannounced JTAI (Joint Targeted Area Inspection) has been completed in June 23 for the theme of 'initial identification of risk/front door services'. Health services engagement was responsive despite demand challenges and short timescales for information sharing. Initial feedback was positive for health services with some recommendations. Formal feedback received and published July 23.

Key risks/ areas of concerns

1. Further work to be undertaken to understand how safeguarding standards and assurance (including assurance visits) are incorporated into the wider commissioning process as part of the existing NHS standard contract Safeguarding Schedules.
2. ICB increasing responsibilities for the Serious Violence Duty (and to explore how to access 'health labour cost' funding as this is unclear). Primary care (Pharmacy, Optometry, Dental) safeguarding delegation- more work required to fully understand implications of this.

Q2 Key achievements/ celebrations

1. Positive feedback on multi agency response to children at risk of harm (front door services inspection) following JTAI in June . Formal letter received and published here: [50225172 \(ofsted.gov.uk\)](https://www.ofsted.gov.uk/50225172)

2. Recruitment to Designated Dr Children In Care (vacant post since Feb 23 and starts in Oct 23- limited capacity on 2 sessions).
3. Launched GSCP 'Bruising in non-mobile children' policy led by Designated Dr and redeveloped our integrated safeguarding health data set.

Key risks/ areas of concerns

1. Capacity of ICB Safeguarding and CiC team
2. GCSP CP medicals process and Implementation plan to improve current service for children, in final draft to be published in Oct, led by Designated Dr
3. Statutory Designated Dr Child Death post remains vacant despite recruitment attempts- backlog of Child Death Overview Panel cases. Safeguarding team providing support for any cases with a health specific safeguarding element as required.

Q3 Key achievements/ celebrations

1. Designated Nurse Safeguarding Children (WTE) joined team Oct 23 and Designated Dr CiC joined September 23 (2 sessions). Designated Doctor for CDOP appointed (two GHFT consultant paediatricians in joint post 1 session per week to start Jan 24).
2. ICS Integrated Safeguarding supervisors' wellbeing day held November 23 utilising NHSE CPD funding. A reflective day with supportive colleagues concentrating on how to build resilience with lots of ideas on how to support our physical and mental wellbeing. It was well received with positive feedback.
3. Bid submitted for Serious Violence Duty funding to employ a Band 7 safeguarding project post leading on health information sharing for high-risk domestic abuse. Decision due Jan 24 (was unfortunately unsuccessful but work ongoing to think creatively to avoid health MARAC information sharing duplication)

Key risks/ areas of concerns

1. Capacity of Safeguarding team in line with population and guidance. Despite new posts in team we remain under resourced.
2. Safeguarding self-assessment sent to all GP practices in November, awaiting responses and to date a low response rate. Challenge from Local Medical Committee has led to a delay in this important assurance work.
3. Child Protection Medical Assessments Protocol work ongoing. The GSCP CP Medical Assessment protocol was published in December 2023 which should result in agreed standards across the system.

Q4 Key achievements/ celebrations

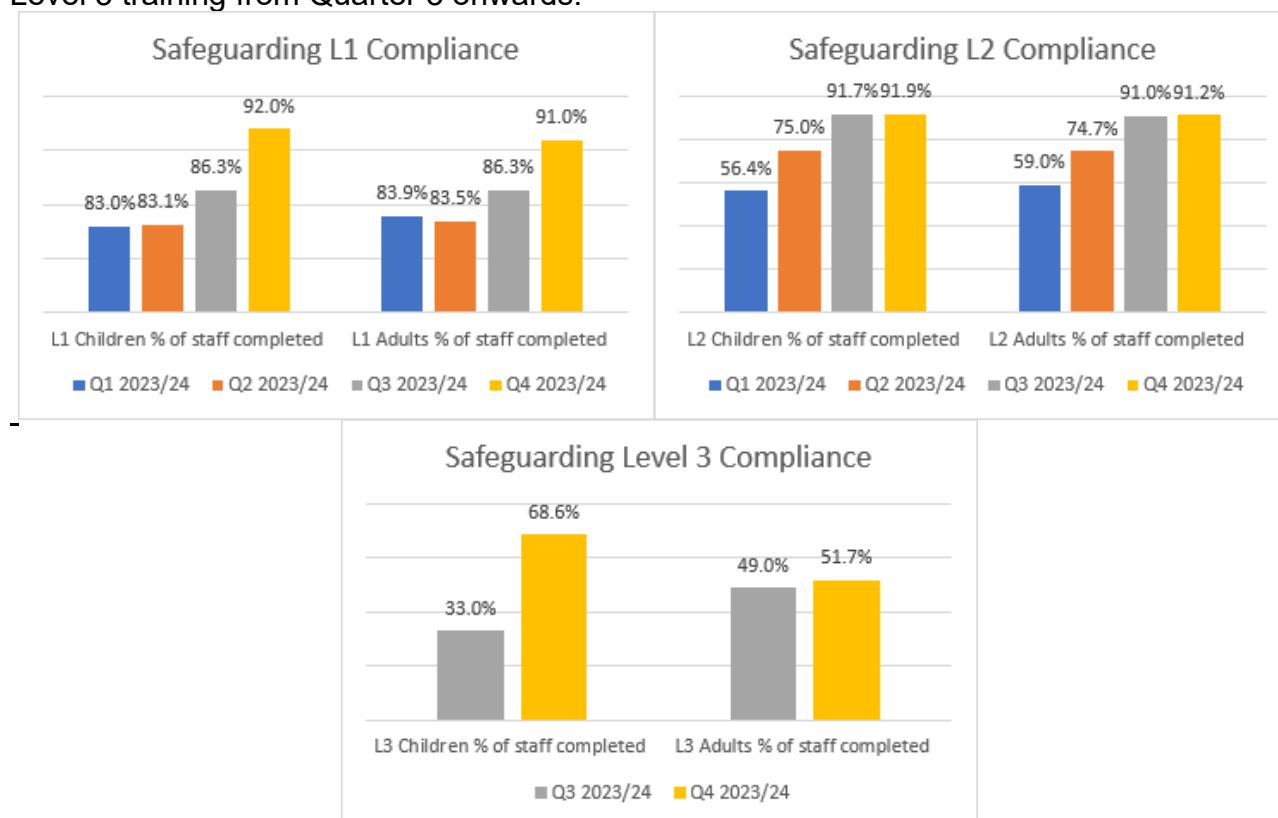
1. ICS Integrated Safeguarding 'team building' programme commissioned utilising NHSE CPD funding. 3 days over 3 weeks with themes of social styles and how we work together and time management tools. It was well received with positive feedback to enhance our integration work.
2. New quarterly Safeguarding and CiC report developed for internal reporting to the ICB System Quality Committee following development at an ICB safeguarding team away day and approval by new Chief Nurse
3. Safeguarding self-assessment sent to all GP practices in November, results collated, and our team have commenced a programme of visits to the practices requiring further support or who have not responded.

Key risks/ areas of concerns

1. Capacity of Safeguarding team in line with population and intercollegiate guidance. Despite new posts in team we remain under resourced.
2. Child Protection Medical Assessments assurance ongoing since last report. The GSCP CP Medical Assessment policy was published late 2023 and we are engaged in ongoing discussion with the CEO/CMO and Chief Nurses from both the Trust and ICB to ensure children who need an assessment receive one, with mitigation being explored at executive level until resolved.
3. Understanding the complexity of commissioning arrangements of multiple providers and how safeguarding standards are embedded and assurance sought- GSCP/GSAB leading on this in response to a recommendation from Child X Child Safeguarding Practice Review (CSPR) published March 2024.

Safeguarding Training Compliance

In 2023-24 we saw an increase in mandatory training compliance in Level 1 and Level 2, this was due to the training needs analysis completed the previous year and the new process for monitoring compliance implemented, We were also able to start monitoring compliance of Level 3 training from Quarter 3 onwards:



The team focus for 2024-25 will be to complete another training needs analysis and to understand how compliance will be reported following the Mandatory Training being moved from Consult OD to ESR.

4. Safeguarding Assurance for services we commission

Safeguarding Assurance of Providers

Our main NHS Trust health providers across Gloucestershire are:



Strategic leadership and partnership working are key elements to proactively support the effectiveness of Gloucestershire's Safeguarding System. We work with health providers and partners to ensure the ICB and our commissioned services comply with the NHSE Safeguarding Assurance and Accountability Framework and have regard for our duty to protect and safeguard against abuse.

GICB as commissioners of these services have sought assurance in the following ways:

- Associate Director attends Trust Safeguarding Governance Committee/Group and receives quarterly assurance reports via this membership.
- Updates provided at the GICB Health Strategic Safeguarding Groups led by the ICB Safeguarding Team
- Supervision and support to Named Professionals in each Trust by GICB team.
- Regular Named and Designated Drop-in support session offered by GICB.
- Safeguarding Quality Support visits – to be re commenced in 2024-2025 when team capacity allows using a standardised audit template.

5. The Safeguarding Integration Group

There is a commitment to continue with the integration of core functions within the current three safeguarding services of the Integrated Care Board (ICB), Gloucestershire Hospitals Foundation Trust (GHFT) and Gloucestershire Health and Care Trust (GHC). Oversight and governance are now within the Safeguarding Strategic Health group led by the ICB Associate Director Safeguarding.

During 2023 we have developed a Safeguarding Integration Strategy agreed by all three organisations that outlines clear objectives going forwards. (Appendix 1)

6. Primary Care – GP

GICB facilitate virtual GP Safeguarding Lead Forums that are well attended throughout the year. These meetings are recorded and uploaded to G-Care within the education section for future access and learning [G-Care-Education&Training-SGChildren](#) and [G-Care-Education&Training-SGAdults](#). This forum provides an opportunity to disseminate learning, sharing good practice and facilitating discussion on pertinent safeguarding issues with guest speakers. We have also continued with safeguarding forums for Practice Managers and are planning regular 'lunch and learn' safeguarding and children in care update sessions.

Additional support activity as required includes:

- Monthly Safeguarding supervision “drop in” virtual sessions for GPs.
- Free Safeguarding level 3 multiagency training opportunities signposting
- Multi-agency adult and children safeguarding training accessible through accredited Gloucestershire Safeguarding Adult Board and Gloucestershire Safeguarding Children Partnership platforms and trainers.

Our Named GP is an active member of the Regional SW Named GP Network, with connections to Named GPs across the country, ensuring that safeguarding GP related information is shared both regionally and locally.

The Primary Care Offer is a block contract which is in place with all GP surgeries and includes all safeguarding information sharing requirements, quality assurance visits, completion of an annual safeguarding assurance audit, attendance at safeguarding adult and children training and other safeguarding statutory duties.

The ICB continues to explore additional responsibilities set out in NHS England’s Quality Functions: Responsibilities of providers, Integrated Care Boards and NHS England (2023) **including** safeguarding for Pharmacy, Dental and Optometry services with the NHS Central Commissioning Hub following delegation in April 2023.

7. Safeguarding Children

GICB has a duty to ensure that all statutory requirements as defined in the Safeguarding Children, Young People and Adults at Risk in the NHS; Accountability and Assurance Framework (2024), Working Together to Safeguard Children (2023) and Children’s Act (2004) are in place. This section provides a brief overview of activity throughout the reporting period.

Assurance and Inspection

- Joint Targeted Area Inspection (JTAI) June 2023 – As a statutory safeguarding partner, the ICB Safeguarding Team were heavily involved in Gloucestershire’s first joint Safeguarding JATI. The inspections looked at the multi-agency response to identification of initial need and risk in Gloucestershire. The letter to the partnership can be found here - [50225172 \(ofsted.gov.uk\)](https://www.ofsted.gov.uk/50225172)- and summarises the findings of the inspection. The recommendations and on-going actions following the JTAI are held under the governance of the Gloucestershire Safeguarding Children Partnership (GSCP) Quality Improvement in Practice (QIIP) subgroup.
- 2023/24 saw the conclusion of the multi-agency scrutiny project into the effectiveness of Strategy Discussions. The project led to the submission of a successful ICB Business Case to extend the function and capacity of Multi-agency Safeguarding Hub (MASH) Health Team. The third of three audits undertaken during the project evidenced considerable and sustained improvements in this area.
- Children Act 2004 Annual Section 11 Audit - Led by the Gloucestershire Safeguarding Children Partnership (GSCP), this audit (using the four areas below) is designed to quality assure compliance with the Section 11 standards. The key lines of enquiry are

adjusted annually to overlap with key recommendations arising from Rapid Reviews and Local Children's Safeguarding Practice Reviews.

1-Leadership & accountability	2- Safe recruitment, induction, training & development	Safeguarding policies & procedures	3-Listening to children
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The GICB submission was completed in January 2024. We await the Independent Scrutineers overall report.

Multi-agency Working & the Gloucestershire Safeguarding Children Partnership (GSCP)

Gloucestershire local partnership safeguarding arrangements are Working Together 2023 compliant.

The Designated Professionals represent the ICB at the following GSCP subgroups:

- Quality & improvement in Practice (QIIP)- Designated Nurse is Chair
- Multiagency Safeguarding Hub
- Child Exploitation & Missing (CEM)
- Education
- Policies and Procedures
- Child Death Overview Panel (CDOP)
- Management Group
- GSCP Exec (attended by Associated Director of Safeguarding and Chief Nurse)
- Serious Incident Notification Group - statutory review decision-making group

Rapid Reviews – During the reporting period the Partnership considered 5 Serious Incident Notifications, undertaking three Rapid Reviews. Rapid Reviews undertaken in the period represented 10 children in total – 4 children Neglect was the presenting issue, in 1 case leading to the death of a child under one following a safe sleep incident. For 6 children Intra-Familial Child Sexual Abuse was the presenting issue. Of note, 2 of the 3 Rapid Reviews that were undertaken featured Domestic Abuse, impacting a total of 7 out of the 10 children.

Local Child Safeguarding Practice Reviews (LCSPR) – 1 LCSPR was undertaken and published during the period - Child X - A review into the circumstances surrounding a child in care sexually abused whilst accommodated in a complex needs bespoke placement within the County. Published March 2024.

1 briefing document relating to a historic Serious Case Review (SCR) was published - Operation ACORNE briefing relating to a complex intra-familial child sexual abuse case reviewed 2018. Published March 2024.

Policy Development

Throughout the reporting period the Team have been involved in the revision, development, and publication of several internal and multi-agency policies and procedures. These include:

ICB Internal

- Safeguarding Children Policy (update 2024)
- Safeguarding Supervision Offer (new 2024)

Multi Agency

- Child Protection Medical Protocol (revision 2023)
- Bruising and Suspected Injury in Non-Mobile Child Policy (Revision 2023)
- Hospitalisation of Sole Carers Guidance (new and on-going)
- Harmful Sexual Behaviour Professional Guidance (new and on-going)
- Adults and children Gloucestershire Protocol establishing Safeguarding Duties for Commissioning & Procurement (consultation and development)

Safeguarding Children Supervision

In Q4 a new ICB Safeguarding Children Supervision offer was launched. Safeguarding children supervision, advice and support is available to all GICB staff upon request. Regular, structured supervision is provided to:

- Named Professionals in provider Trusts.
- Band 7/8 Safeguarding Specialist Professionals in provider Trusts (ambulance service, midwives, nurses, allied health professionals)
- ICB Dynamic Keyworker Service
- ICB Children's Continuing Healthcare Team

Supervision sessions are well attended, and anecdotal feedback has been overwhelmingly positive.

8. Safeguarding Adults

Gloucestershire Safeguarding Adult Board (GSAB) and Partnership Working

Gloucestershire Safeguarding Adult Board (GSAB) is a partnership of statutory and non-statutory organisations.

The aim of the Board is to “safeguard and promote the welfare of adults at risk to enable them to retain independence, wellbeing and choice and choice to access their human right to live a life that is free from abuse and harm”. The Care Act 2014 Statutory Guidance confirms that “the main objective of a SAB is to assure itself that local safeguarding arrangements and partners act to help and protect adults in its area” who meet the safeguarding criteria.

GSAB must lead adult safeguarding arrangements across the locality and oversee and coordinate the effectiveness of the safeguarding work of its member and partner agencies.

SABs have three overarching priorities.

- Increase awareness and understanding of Adult Safeguarding amongst professionals and the public in Gloucestershire.
- Prevention and responding to reports of abuse and neglect.
- Learning and continuous Improvement

GSAB sub-groups

The ICB is predominantly represented by the Designated Nurse for Safeguarding Adults, facilitating good participation and contribution to the subgroups.

The sub-groups are:

- SAR (Safeguarding Adults Review)
- Audit
- Policy and Procedures
- Workforce Development
- Comms and Engagement
- Fire Safety Development

The GSAB Board is supported in fulfilling its responsibilities through the work undertaken by multi-agency sub-groups. All the work of the sub-groups informs the strategic direction of the GSAB Board and enables priorities to be identified and to have multi-agency oversight.

The GSAB main priorities are:

- Transitions (child to adult)
- Severe and multiple disadvantage/Complex Needs
- Hearing the voice of individuals who have been safeguarded (to better understand what difference it made and how to improve for the future)

The GSAB Strategic Plan 2022-25

- To increase awareness and understanding of Adult Safeguarding among professionals and the public in Gloucestershire
- Prevention and responding to reports of abuse and neglect.
- Learning and continuous improvement.
- Transitions (child to adult)
- Complex Needs/Multiple Disadvantage
- Hearing the voice of individuals who have been safeguarded (to better understand what difference it made and how to improve for the future)
- Ensuring a robust and sustainable quality assurance regime (including multi-agency data)
- Working more closely with the voluntary, community and social enterprise sector within Gloucestershire

Safeguarding Adult reviews (SAR)

During the reporting period, there have been 2 SAR's completed;

- Mr. A- regarding a person with a neurodegenerative condition; involved the themes of Mental Capacity Assessment, being a fire risk, risk assessments in adult safeguarding; 'safe uncertainty', self-neglect. Following this review GICB have worked closely with agencies to develop a pathway and service for those diagnosed with neuro degenerative conditions so that they can get the specialist expertise needed, in the timeframe that their condition degenerates.

- JK SAR was completed but not published due to confidentiality.
- There was 1 further SAR in process to be published summer/autumn 24.
- 2 cases did not meet the criteria for a SAR and one case was referred for a DHR.

Domestic Homicide Reviews (DHR) (to be known as Domestic Abuse Related Death Reviews (DARDR))

- During the reporting period there have been 2 new DHR's with 10 brought forward from the previous year
- There were 2 published within the reporting period (Patrick, Linda & Richard).
- GICB have developed an action log of all health actions from DHRs and SARs and meet bi-annually to review and seek assurance that actions have been completed or in progress. There are currently no outstanding actions for health across Gloucestershire system.

Anti-Social Case (ASB) Reviews:

The Anti-social Behaviour, Crime and Policing Act 2014 introduced specific measures designed to give victims and communities a say in the way that complaints of antisocial behavior are dealt with.

This includes the anti-social behavior case review, which gives victims of persistent antisocial behavior the right to request a multi-agency case review where a local threshold is met.

Agencies, including local authorities, the police, local health teams and registered providers of social housing have a duty to carry out a case review when someone requests one and their case meets a locally defined threshold.

During the reporting period GICB Safeguarding team have attended 16 ASB case reviews. All cases have involved multi-agency discussion and problem-solving interventions. 3 cases have involved large scale systems approach to addressing antisocial behavior regarding 'street drinking' within Gloucestershire. 12 out of 16 cases have enduring mental health conditions that have contributed to their anti-social behavior.

Self-Assurance Assessment (Feb 24).

- From June 2023 the Safeguarding Adult Nurse Lead became the Designated Nurse for Safeguarding Adults and is supported in this role by the Named GP and Specialist Nurse. These roles ensure that Adult Safeguarding is continually on the agenda and promotion of ICB responsibilities and service are promoted across the wider ICB and health system.
- During this year, the team have worked hard in promoting the safeguarding team's responsibilities and being visible in the organisation through disseminating the expertise, advice and knowledge of Safeguarding Adults to ICB teams, Primary Care and Commissioning and through planned lunch and learn sessions on specific safeguarding topics.
- During 2023, the Designated Nurse Safeguarding Adults has seen an extension of the role by taking on the strategic ICB lead for Serious Violence Duty, Anti-social behavior pathway and continues as Domestic abuse lead. These responsibilities ensure that

Safeguarding and Adult safeguarding is considered within the ICB and organisations that the ICB work closely with.

- The Designated Nurse for Safeguarding Adults is continuing to bring a focus on safeguarding considerations when children transition to adult's services and trauma informed practice.

ICB Safeguarding Priorities

- There is a fundamental need as lead for Anti-Social Behaviour, Serious Violence Duty and Domestic Abuse to continue to ensure that there is strategic direction and collaboration to determine the safety of those affected.
- Progressing conversations and assurance around safeguarding standards within contracts. This will be further supported by the recent publication of the updated NHSE Safeguarding Accountability and Assurance Framework (SAAF).
- To support and monitor safeguarding training compliance, including Prevent training for all ICB staff.
- To embed and co-ordinate the learning from DHR's and SAR across the health system and review the current process of health 'system' actions.
- To support the role out of safeguarding supervision for CHC, ICB staff and system adult lead safeguarding practitioners.
- To provide 1:1 support for safeguarding leads within provider trusts and Local Authority, to enable closer working relationships and awareness of system pressures and concerns.

Policy development

During this reporting period the Safeguarding team have been involved and developed internal and multi-agency policy and procedures;

- GICB Domestic Abuse Policy was updated.
- Positions of Trust (allegations management) Framework- this work is ongoing.

9. Domestic Abuse and Sexual Violence (DA/SV)

The Domestic Abuse Act became law in 2021 therefore widening the legal definition beyond physical violence to include emotional, coercive, and controlling behavior and economic abuse. The Act also recognises, for the first time, children witnessing domestic abuse or living within the home with Domestic Abuse as victims themselves. The DA Act also helpfully builds upon the legal statute to share health information.

GICB recognises domestic abuse as a safeguarding priority, alongside the detrimental impact on health and wellbeing for all ages. The safeguarding team are members of the Sexual Violence Strategic Board and are signed up to the overarching Delivery Plan and Strategy. The Gloucestershire Sexual Violence Strategy 2022-2025 aims to ensure that the reduction in experienced sexual violence and sexual harassment and increased support for those who experience it, continues to be a priority within Gloucestershire. This Strategy builds on the work of the Sexual Violence Partnership and works in conjunction with the Domestic Abuse Local Partnership Board and Domestic Abuse Strategy (2021-2024- currently being updated).

During 24/25 GICB will sign up to the NHSE Sexual Safety Charter, 'a commitment to taking and enforcing a zero-tolerance approach to any unwanted, inappropriate and/or harmful sexual behaviors within the workplace'. Associate Director to work with HR and corporate colleagues on addressing how GICB meets the standards.

GICB Domestic Abuse Policy has been updated, this outlines how to support and manage staff disclosures in the workplace. A 'lunch and learn session' was successfully held to promote this policy.

National and local domestic abuse figures suggest an increase in health staff seeking support for domestic abuse, as employers we need to be aware of this increase and the duty to support those who are victims and perpetrators of domestic abuse in seeking the appropriate support and guidance. Additional 'lunch and learn' training regarding domestic abuse are planned for 24/25.

GICB recognise the increase in requests for MARAC (multi agency risk assessment conference) information and the impact that this is having on system partners to meet these deadlines. During 24/25 it is a priority for GICB to address this concern for our system and look at alternative ways that MARAC information can be obtained, to enable the system to focus on other safeguarding priorities, whilst maintaining high standards of MARAC information sharing.

Serious Violence Duty

The Serious Violence Duty places a duty on specified authorities to work together to prevent and reduce serious violence (set out in the Police, Crime, Sentencing and Courts Act 2022 and accompanying statutory guidance [Serious Violence Duty - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/serious-violence-duty)). ICBs are one of the specified authorities; the Duty came into force on 31 January. The definition of 'serious violence' now includes domestic abuse and sexual offences.

The Duty requires the specified authorities; Police, Local authority, **ICB**, Criminal Justice system and Fire and Rescue Services to work collaboratively together to develop a Strategic Needs Plan which will inform the locality delivery of the SVD "Duty" and to work together to share information, analyse the situation locally and come up with solutions, to prevent and reduce serious violence on a local basis.

The ICB has considered the Serious Violence Duty and Domestic Abuse within its [Joint Forward Plan 2023](#)

10. Learning from Statutory Safeguarding Reviews – ICB actions

Local Child Safeguarding Practice Review (LCSPR)		Domestic Homicide Review (DHR)		Safeguarding Adult Review (SAR)	
Child X – Theme: sexual abuse of a child in a residential care setting Child X Action Plan Child X Full Report		Patrick- Theme: Suicide, mental health and domestic abuse Patrick - Executive Summary Linda and Richard – Theme: Mental health, Familial Abuse Linda and Richard - Executive Summary		Mr A- Theme: self neglect and mental capacity in a person with a neurodegenerative condition Mr A - 7 Minute Learning Brief	
Recommendations: Flexible and responsive therapeutic response to children in care with complex needs - Develop the CAMHS commissioning arrangements to enable a more flexible and responsive therapeutic response to children in care with complex needs and extreme behaviours that is underpinned by a trauma informed approach.	Action: A project has begun to integrate the physical and mental health Child in Care Health Services based in Gloucestershire. Phase 1 (up to March 2024) has focussed on the alignment of the services and clarifying their governance structure. Phase 2 (from 1st April 2024) will review the service delivery across Child in Care Health Services and all CAMHS provision. Complex needs Board established, chaired by DCS. Multi-agency review of child A undertaken with NHS Trusts, ICB, GCC	Recommendations: Consider frequent address changes as a marker of vulnerability. Recommendation for this to be addressed as part of the Medical Centre's Significant Event review. Agencies must be capable of extracting the required data to ensure compliance with Domestic Abuse training requirement.	Action: The Practice Significant Event review has taken place. A DHR update has been undertaken at the ICB Adult Safeguarding GP forum and these recommendations have been highlighted for consideration. A DHR update has been undertaken at the ICB Adult Safeguarding GP forum and Practice Manger forum these recommendations have been highlighted for consideration.	Recommendations: Gloucestershire ICB is recommended to use the SAR learning to develop a service for people with neurodegenerative conditions. Adult Social Care, the ICB research group, the Carers Hub and the Huntington's Disease Association to work together to: <ul style="list-style-type: none"> • increase understanding of the support needs of carers of people with HD • identify areas for consideration when offering or undertaking carers assessments and • identify available resources for carers. 	Action: ICB commissioners are developing this service in response to the SAR.

	<p>– to inform refreshed MoU and working processes. A task and finish group has been running, led by the GCC Project Lead to develop a model of health support as part of the sufficiency strategy.</p>	<p>The NICE Quality Standard (QS116) is included in health service policies and procedures.</p> <p>For agencies to ensure they have an easily accessible information for practitioners to refer domestic abuse victims to.</p> <p>Agencies must ensure that the Caldicott Guardian Decision-Making Template is included in their information-sharing protocols.</p> <p>Agencies should review their present training on information governance and ensure that all staff are required to attend.</p>	<p>NICE Guidance no longer relevant but ICB DA policy updated 2023</p> <p>Resources are readily available on the ICB intranet and G-Care regarding domestic abuse.</p> <p>DPO state that the basis of information sharing is to understand the issue, consider relevant legislation including data protection such as UK GPDR, Data Protection Act. As such, the Caldicott guardian decision making template (2016) is only one aspect of information sharing</p> <p>Presented at PM Forum in May 2024.</p>
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11. Focus work areas for 2023/24 as set out in the ICB Joint Forward Plan

The safeguarding team have developed a refreshed work plan/quarterly report launching in 24-25 to reflect our local, regional, and national safeguarding priorities as outlined throughout this report and in the Joint Forward Plan.

We have contributed to the ICB Joint Forward Plan and outlined our areas of focus:

- Continued commitment to the integration of core functions within the current three safeguarding services of the Integrated Care Board (ICB), Gloucestershire Hospitals Foundation Trust (GHFT) and Gloucestershire Health and Care Trust (GHC). This will include continued implementation of the common function pathways, identified via the Gloucestershire ICS Integrated Health Safeguarding Strategy.
- We will further progress our integrated safeguarding supervision offer across the ICS and monitor compliancy of mandatory safeguarding and children in care training at all levels across the ICB.
- In 5 years, we will have in place a well embedded rolling programme of safeguarding assurance visits to all commissioned providers.
- Effectively embedding learning from adult and children's statutory safeguarding reviews to ensure we prevent further harm to our most at risk of abuse and neglect.
- Establish a local safeguarding webspace/interactive forum for health professionals interested in safeguarding- this will be progressed when team capacity allows.
- A review of the previously named 'Unscheduled Care Dataset' for safeguarding children to ensure it is focused, not onerous to collect by busy provider services and meets our collective needs. The Designated Dr Safeguarding Children is leading this to ensure we capture more selective safeguarding focused key metrics to inform our work going forwards across all health services. The aim is to utilise wider health safeguarding children and adults' safeguarding data with more focus.
- Effective succession planning to ensure the ICB meets the statutory requirements for key safeguarding and children in care roles now and in the future. *(Business cases have been developed but due to wider ICB financial constraints not able to be progressed at the current time, will be revisited later in 2024).*
- The continued commitment of the ICB and its Safeguarding team as members of our Partnerships and Boards will support the people of Gloucestershire who use our health services, to live in safety and prevent harm experienced through abuse and neglect. We endeavour to work towards a health system that provides trauma informed person-centered care.

12. Conclusion

Commissioners of health services have a duty to ensure that all NHS Trusts recognise the importance of having robust and effective arrangements in place to safeguard adults and children and to provide assurance that they are fulfilling their statutory responsibilities for Safeguarding.

During 2023-24 the ICB Safeguarding Team have continued to deliver our statutory duties and developed as a growing team despite an increased demand on safeguarding services and an increase in wider statutory responsibilities described in this report. This annual report outlines how we have sustained, and enhanced partnership working and strengthened safeguarding collaboration within health.

13. Appendices

Appendix 1 - Gloucestershire ICS Safeguarding Integration Strategy 2023-2025

GLoucestershire ICS Safeguarding Integration Strategy 2023-2025

STRATEGY CONTEXT

There is a commitment to continue with the integration of core functions within the current three safeguarding services of the Integrated Care Board (ICB), Gloucestershire Hospitals Foundation Trust (GHFT) and Gloucestershire Health and Care Trust (GHC), in line with the national mandate set by NHS England as part of the NHS Long Term Plan development of Integrated Care Systems. This will include continued implementation of the common function pathways, identified via the Gloucestershire ICS Integrated Safeguarding Group

During 2021-2022 the Gloucestershire Integrated Safeguarding Project initially sought to create an integrated service, improving the current provision through reducing duplication in service provision, providing increased levels of robustness and resilience, ensuring a greater ability to succession plan, and ensuring more efficient use of available resources. In recognition of current inequities in service provision, it also sought to achieve parity across adults and children, and acute and community settings. During 2022 the collective decision was made for this project to become a service improvement initiative, focused upon implementing those elements of service integration which are possible without full integration. This was partly due to the challenges of each organisation having statutory requirements for specialist roles that can't be delegated (e.g., strategic Designated Nurse and Dr roles and operational Named Nurse and Dr functions). This includes Children in Care (CiC) functions.

PURPOSE OF STRATEGY

This strategy seeks to provide clarity and direction to Gloucestershire ICS as it continues to develop integration of core safeguarding functions.

We aim to:

Work as a safeguarding system, to ensure that appropriate health-related safeguarding functions in Gloucestershire are integrated, innovative, high quality and responsive. This will provide health professionals with robust and effective systems for health-related safeguarding linked to the needs of our local population.

KEY PRINCIPLES

The following key principles aim to shape and underpin development of the Safeguarding Integration Group:

- Support organisations and individuals to fulfil their defined statutory safeguarding requirements and roles.
- Demonstrate equal commitment and parity to both adult and children's safeguarding, maintaining a 'Think Family' ethos and with the local population needs at its core.
- Work effectively and efficiently together with external partners and partnerships, offering, when appropriate a collective voice across health-related safeguarding in Gloucestershire
- Work towards inter-connected processes and systems, including IT where possible, which facilitate effective communication and information flow between health organisations and with safeguarding partners
- Investment in safeguarding specialist staff across the ICS*, demonstrating commitment to their Continuing Professional Development and supervision, with clear succession plans in place to enable them to effectively fulfil these distinct individual roles.
- Have a continuous service improvement ethos, promptly sharing lessons learned and embedding learning within the NHS organisations and with all relevant partners.

**Designated, Named and specialist safeguarding roles (safeguarding and CiC)*

INTEGRATED FUNCTIONS FOR ONGOING DEVELOPMENT

Safeguarding Policies and Procedures

What:

We aim to work towards an integrated suite of ICS policies and procedures for health safeguarding.

Why:

To reduce duplication, utilise our collective expertise and best practice to safeguard our population

How

We will begin by producing a list of key policies across the 3 organisations – defining renewal dates and start with a policy that needs renewal first as a trial including navigating the ratification process.

Safeguarding Supervision

What:

We aim to work towards an integrated safeguarding supervision offer across the ICS safeguarding teams utilising a shared methodology.

This has 2 components:

Safeguarding Specialist Supervision offer- ensuring we are supported effectively.

Working together to support our wider clinical staff supervision offer across our 3 organisations.

Why:

To reduce duplication and meet our individual requirements to receive safeguarding supervision, support learning and reflective practice across the system, utilise best practice and expertise to safeguard our population. There are currently gaps in access to safeguarding supervision for some key professionals who require it.

How

Scoping of current supervision offer for safeguarding specialist roles and across the ICB/GHFT/GHC- *ICB Safeguarding Specialist Nurse to lead this work.*

Exploring the value and feasibility of utilising external supervisors/supervision training providers- utilise the NHSE supervision funding for ICS Safeguarding Professionals for 2023-2024.

Continue with fortnightly ICB led Safeguarding Named and Designated drop-in meetings to provide peer support and informal supervision.

Safeguarding Communications

What:

To develop and share safeguarding communications that give a collective message across the ICS. This includes newsletters currently produced by individual safeguarding teams, learning summaries and briefings for statutory safeguarding reviews and on-going updates for dissemination.

Why:

Reduce duplication and time spent on producing individual organisational safeguarding newsletters and summaries to communicate a collective message across the system. To share learning from reviews more effectively in junction with the Gloucestershire Safeguarding Children Partnership, Safeguarding Adult Board and the Safer Gloucestershire Partnership.

How

The ICB Safeguarding team have set up a specific group on Microsoft Teams initially to save any existing communications in a collective file. All items are shared with permission to use regardless of which organisation has produced them. This is reviewed regularly by the ICB Safeguarding Support Officer and at the Safeguarding Integration Group. Launch a closed Microsoft SharePoint space for Safeguarding in Health.

Safeguarding Training

What:

To develop and deliver collective ICS health safeguarding mandatory training in line with the Intercollegiate Guidance Frameworks for Safeguarding Adults, Children and Children in Care.

Why:

Reduce duplication and time spent on developing individual organisational safeguarding training to communicate a collective message across the system.

To share learning more effectively and support reflective practice across the system, utilise best practice and our shared expertise to safeguard our population

How:

Task and Finish Group commencing initial work on scoping shared Level 1 Safeguarding Training across the 3 organisations. Executive level training (as defined in the Intercollegiate Guidance) to be delivered by ICB Safeguarding team to Board level members in all 3 organisations during 2023 and evaluation of effectiveness. This will act as a pilot for future integrated safeguarding training delivery.

Partnership Working:

What:

Explore specialist roles in safeguarding that work across the health system. This includes domestic abuse health specialist functions (including Domestic Abuse Act 2021 and Serious Violence Duty NHS responsibilities), health representation at multiagency case panels such as high-risk domestic abuse Multiagency Risk Assessment Conferences (MARAC), Child Exploitation and Missing workstreams), high-risk offender management Multi Agency Public Protection Arrangements (MAPPA) and Prevent related case management panels (e.g. Channel).

Partnership groups and workstreams are currently attended by a representative from each organisation. This is due to specific strategic or operational responsibilities we each hold but there is scope to represent each other (as appropriate).

Why:

Facilitate information sharing and avoid the duplication of multiple health representatives attending the same meetings/panels. We believe there is value in exploring specialist roles that work across the ICS such as a Domestic Abuse lead who would be responsible for the coordination of the above. These types of roles have been found to work well in other areas.

How:

A health representative from one organisation (GHC) currently attends all the case specific panels mentioned although not specifically commissioned to do so.

This a function that could be shared and integrated more effectively across the system. We will scope the feasibility of one health 'rep' attending partnership meetings (as appropriate to role and purpose of meeting) and prioritise how information flow is maintained effectively.

The challenges of how information is shared is an issue to work though as we progress.

The Safeguarding Integration Group will continue to meet regularly, with leadership from the ICB Executive Chief Nurse and Associate Director for Integrated Safeguarding, to review and progress this Strategy.

Mel Munday
Associate Director Integrated Safeguarding
NHS Gloucestershire ICB

On behalf of the Safeguarding Integration Group