



Safeguarding Newsletter

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Our Intranet Page

Please don't forget to access the safeguarding section of the intranet to find out more information about key safeguarding topics and processes:

http://intranet/Corporate-Directorates/Nursing-Quality/Safeguarding_Homepage.aspx

We are undertaking work to make resources easier to access so please let us know if you have any ideas for improvement.

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Keep up to date: Safeguarding Advice

DEPRIVATION OF LIBERTY SAFEGUARDS PLEASE NOTE:

Following an amendment to the Coroners and Justice Act, from Monday 3rd April it will no longer be a requirement to refer deceased patients to the Coroner, simply because they are subject to a DoLS authorisation

However, referrals should still be made to the Coroner if there are other reasons to do so.

Please contact the Safeguarding Team on 01302 642437 if you require any further information.

Nottinghamshire Healthy Families Programme

Please [click here](#) to see the new Nottinghamshire Healthy Families Programme leaflet which explains the new model of community services for children across Nottinghamshire which includes Bassetlaw. The traditional service of health visiting and school nursing is now integrated into a 0-19 service.

NSCB

Please [click here](#) to view the new pathway to provision handbook from NSCB for your reference.



Adult Safeguarding Referral Prompt Sheet

When making a safeguarding referral you will be asked to provide the following information:

- Name, address and date of birth of the adult at risk;
- Gender and ethnic origin of the adult at risk;
- Care and Support need of the adult at risk;
- Details of the concern, consent to refer if possible
- Desired outcomes of the adult at risk (what they want to happen);
- Other agencies or independent service providers that the adult at risk is known to;
- Details of the authority/district the adult at risk is from if different to the one being reported to;
- Details of any funding arrangements;
- Person who raised the concern – e.g. friend, other service user, carer;
- Person who alerted;
- Location of abuse – e.g. residential care setting, adult at risk's own home, general hospital;
- Type of abuse and details of events;
- Any details you may have about historical abuse involving the adult at risk.

In addition, you will be asked for the following details about the alleged person posing a risk:

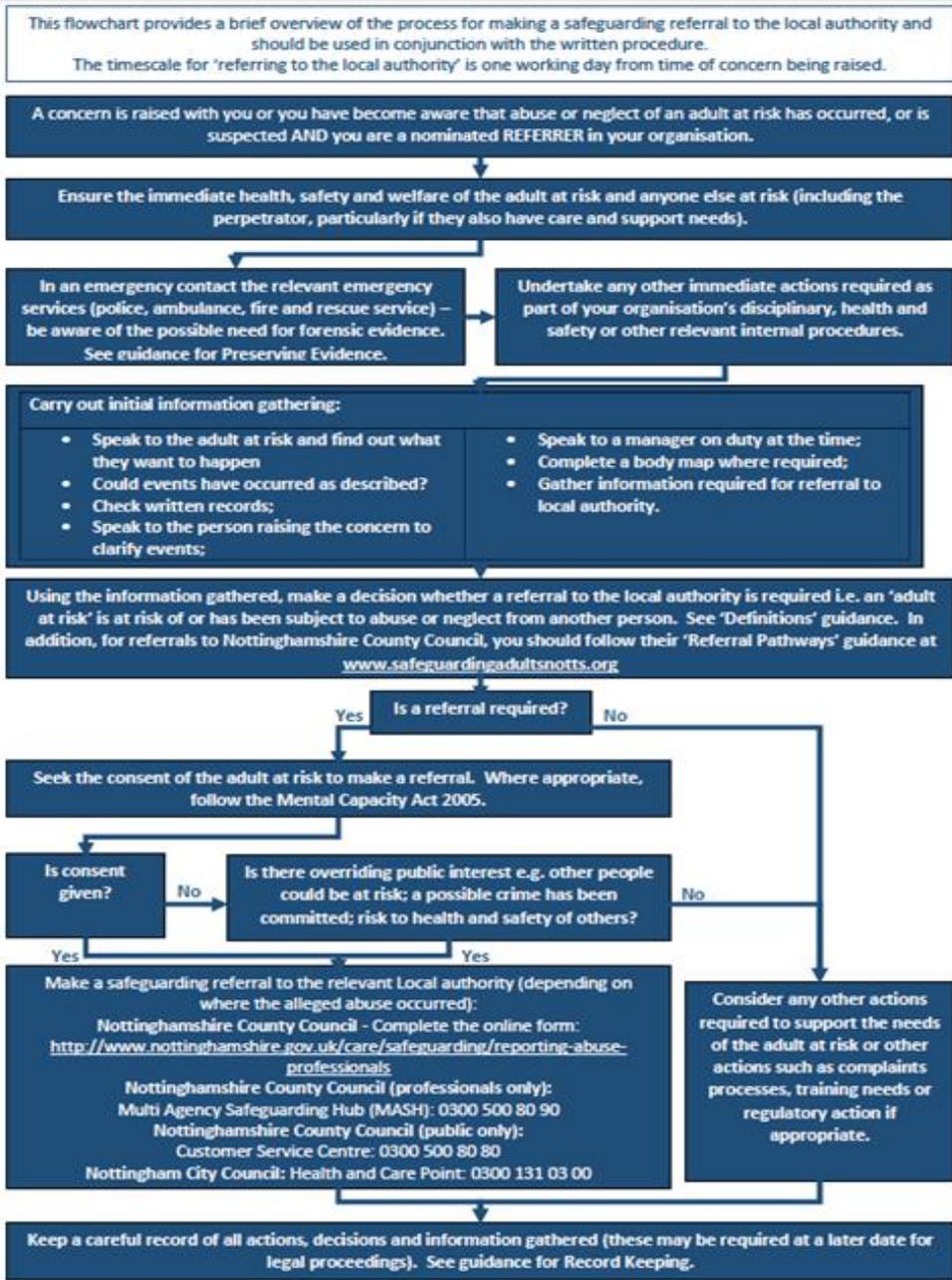
- Name and address; Age ; Gender;
- Relationship with service user – e.g. partner, neighbour, staff, other family member;
- Details of whether the person posing a risk is living with the adult at risk;
- Any immediate actions taken against them or to support them;
- Any details you may have about historical abuse involving the person posing a risk.

Explain to the call taker that you wish to make a 'SAFEGUARDING ADULTS REFERRAL'.

As a professional, you must provide your contact details.

Contact details:

- Nottinghamshire County Council: Completing the online form (professionals only) (Anytime) at: <http://www.nottinghamshire.gov.uk/care/safeguarding/reporting-abuse-professionals>
- Multi-Agency Safeguarding Hub (MASH) – 0300 500 80 90 (professionals only) (Opening times; Monday - Thursday 8.30am – 5.00pm, Friday 8.30am – 4.30pm)
- Nottingham City Council Health and Care Point – 0300 131 0300 (Opening times; Monday - Friday 8.00am – 7.00pm)
- Out of hours: Nottinghamshire County Council on 0300 500 80 80
Nottingham City Council on 0115 8761000



DSCB Procedures Briefing Note - February 2017

The Doncaster Safeguarding Children Board (DSCB) has put together a summary of new and updated procedures. The direct link to the procedures manual is: <http://doncasterscb.proceduresonline.com/>

New Procedures and Guidance:

'Honour' Based Violence - This new guidance provides information for practitioners on how to respond to so called 'Honour' based violence. 'Honour Based Violence' is a collection of practices, which are used to control behaviour within families or other social groups, to protect perceived cultural and religious beliefs and/or 'Honour'. Abuse occurs when perpetrators perceive that a relative has shamed the family and / or community by breaking their 'Honour' code, or when they feel under pressure to demonstrate their fidelity to perceived cultural and religious values.

The guide describes behaviours which can be seen to have broken 'Honour' codes and lists indicators of 'Honour' based violence. It also explains the 'One Chance Rule' and the importance of an assured and confident professional response if a child or young person discloses that they have suffered (or are at risk of) 'Honour' based violence. The guide ends with best practice for professionals on how to respond if they become aware of 'Honour' based violence.

Safeguarding Children from Dangerous Dogs Practice Guidance - The new guidance has been written to help protect children living in Doncaster from the serious injuries that can be inflicted by dogs which are prohibited, dangerous or poorly managed. The guidelines set out to explain and describe the following:

- The children most likely to be vulnerable to injuries inflicted by dogs;
- The dogs most likely to pose a danger to children;
- The information that should be gathered when any child is injured by a dog and the criteria that should prompt a referral to the Doncaster Children's Services Trust Referral and Response Team;
- The basis for an effective assessment of risk and the options for action that could be considered at Strategy Discussions or Child Protection Conferences.

The guidance also contains a risk assessment tool for use by practitioners and a reference document summarising key signs of poor welfare in dogs.

Doncaster Multi-Agency Guidance for Preventing and Responding to Behaviours Which May Indicate Potential Suicide or Self Harm Clusters - This resource has been developed to assist agencies in Doncaster to manage or contain an actual or potential suicide cluster. A suicide cluster is defined as a collection of suicides or behaviours which indicates a significant intent to die by suicide or self-harm. Research estimates that's between 1 and 5% of all suicides by young people occur in the context of a cluster.

The guidance describes how a community plan will be developed and implemented by members of the community and the services that support them in order to manage and contain any risk of 'copycat suicidal acts'. The community plan might focus on a locality, a particular facility e.g. a school, hospital or youth club, or a rural or virtual community.

Whistleblowing or Raising Concerns at Work - This new chapter provides guidance for staff and volunteers who are concerned about poor practice or possible malpractice in the workplace. It explains the legal requirements for whistleblowing and lists sources of advice and support for staff or volunteers who have any concerns.

Updated Chapters:

Doncaster Children's Services Trust or Police Action Following a Referral - Section 16 Agency Checks has been updated to include additional detail on the checks which the Social Worker must undertake in the course of the Children and Families Assessment. Checks must be made with all agencies that may have relevant information about the child and their family, including the Police, Health, Education services and other relevant community services.

The diversity of health services and provision in Doncaster means that it should not be assumed that a universal health professional such as a Health Visitor or School Nurse is in possession of all available health information. All efforts should therefore be made to ensure all relevant health information is collated, including GP records, hospital records (via the Named Nurse Safeguarding team on 01302 642437) and adult services for information that is held. Unless this is done, the Section 47 Enquiry may miss crucial information relating to the child or family's contact with different parts of the health community.

DSCB Procedures Briefing Note – February 2017

Bullying - This chapter has been updated to include links to Department for Education Resources for Parents and Schools on cyberbullying. Section 6 Specialist Organisations is new and contains links to a range of national anti-bullying organisations, including links to specialist support in relation to young people with Special Educational Needs or Disabilities who are bullied, LGBT young people and online bullying.

Domestic Violence and Abuse - Section 10, Safety Planning is new, and offers advice on safety planning with victims in a range of circumstances, including when victims leave the home or when they decided to stay with the perpetrator.

Safeguarding Unborn Babies - Section 2, Pre Birth Referral and Assessment has been updated to include information on Pregnancy Liaison Meetings. Cases of concern can be heard at the Pregnancy Liaison Meeting, from the point of professionals becoming aware of the birth to 16 weeks gestation and prior to a referral being made. The purpose of the Pregnancy Liaison Meeting is to provide a pathway which will offer information and advice to professionals, to ensure that pregnant women are enabled to access support services at the right stage in pregnancy.

Safeguarding Children and Young People against Radicalisation and Violent Extremism - Section 5 Issues has been updated to include a link to the Gov.uk website which can be used to report online material promoting terrorism or extremism.

Procedure for Responding to Allegations against Staff, Carers and Volunteers - This guidance has been reviewed locally and updated throughout as required to reflect current local practice in responding to allegations against staff, carers and volunteers. Additional information has been added into Section 1, confirming the circumstances when these procedures should be applied. Section 15 Record Keeping has been updated to reinforce the importance of confidentiality when recording information about allegations on the child's and adult's files and to confirm retention periods. A link to the LADO Referral Form has also been added.

Learning and Improvement Framework (including Serious Case Reviews) - Links to the following publications have been added to this chapter:

- Pathway to Harm, Pathways to Protection: A Triennial Analysis of Serious Case Reviews 2011 to 2014 Final Report- The study considers a total of 293 SCRs relating to incidents which occurred in the period 1 April 2011- 31 March 2014 and aims to provide evidence of key issues and challenges for agencies working singly and together in these cases; and
- Serious Case Review Quality Markers – The Quality Markers have been developed to help support commissioners and reviewers to commission and conduct high quality reviews. They provide a consistent and robust approach to SCRs by covering the whole process from setting up to running the review, to looking at outputs and outcomes from the review

Resolving Professional Difference Protocol - This protocol has been updated to remind practitioners that, if a concern or disagreement is escalated to Stage 3 (Escalate to Senior Manager), then a copy of Appendix 2 - Form for submitting cases for escalation and resolution should be forwarded securely to the DSCB Admin Team. This will help Doncaster Safeguarding Children Board to monitor professional disagreements and the use of this protocol.

Actions

- Please ensure your Designated Safeguarding Leads/Officers are aware of this briefing and the new and updated procedures.
- Register for policy and procedure alerts - we can alert you whenever the procedures manual is updated, to register for updates, please complete the form at:
http://doncasterscb.proceduresonline.com/chapters/register_updates.html



Next of Kin: Understanding decision making authorities.



The National Centre for Post-Qualifying Social Work and Professional Practice



National Mental Capacity Forum

Next of Kin: Understanding decision making authorities



Chartered Trading Standards Institute



Leading the fight against dementia

University College London Hospitals
NHS Foundation Trust



The term 'Next of Kin' is often used in Health and Social Care as a euphemistic shorthand for 'Who is the person we communicate with about you and who do we contact when you are dead?'

In law the term has no status when you are alive - it is misleading too because it does not clarify if this is the person who is your nearest relative or the person most important to you. Indeed, these are often different people.

This helpful leaflet clarifies how people can plan ways, with those they love, to ensure their wishes are taken into account if through illness they cannot take decisions for themselves. I cannot stress enough how important it is to plan ahead and let our wishes be known, in the event we cannot express them.

As Chair of the National Mental Capacity Forum I commend this advice leaflet; we all want the best care provided in accordance with our wishes and this leaflet helps everyone understand how to ensure that happens.

Baroness Ilora Finlay.

Next of Kin (NoK)

The term Next of Kin (NoK) is commonly used and there is a presumption that the person you identify as your NoK has certain rights and duties. Health and social care colleagues should always consult the people closest to a person who lacks capacity to understand that person's wishes and feelings to help them make a decision in that person's best interests. However, the person identified as next of kin should not be asked to sign and/or consent to certain interventions (unless they have a legal basis for doing so - see overleaf). This is a mistake often made in many hospital and nursing or residential type accommodations, where family members are asked to sign care plans, end of life plans and other treatment options and provide consent which is not legally valid.

Advance Decisions

If you have a particular preference or view about a type of treatment it is possible to make an advance decision to refuse this. This is called an Advance Decision in the Mental Capacity Act 2005. It is sometimes referred to as a 'living will' however this is not a legal term as a will only really applies after someone's death.

only be made by a person if they are over the age of 18 and have capacity to make that decision. They must state which treatment they are refusing and the decision can be changed/amended at any time by the person themselves. Health and social care professionals seeking to provide treatment once the person has lost capacity to make the decision will need to check whether a decision exists, if it does is it valid (i.e. the person has not altered the decision) and if it is

applicable to the treatment being proposed.

A valid and applicable advance decision to refuse treatment has the same effect as the person making the decision themselves at the time it needs to be made.

More guidance is available to support professionals and carers think about whether an advance decision applies in Chapter 9 of the Code of Practice which accompanies the Mental Capacity Act 2005.

Under the Mental Capacity Act 2005 these types of decisions have legal status. An advance decision can

Next of Kin: Understanding decision making authorities.

Lasting Powers of Attorney

Before the Mental Capacity Act 2005 (MCA) was introduced, there was an arrangement called an Enduring Power of Attorney (EPA). These are now less common, but there are still a number in existence. These relate to financial and property matters only and do not enable anyone to make decisions on your behalf in relation to any care and treatment matters. The MCA created a new system by which a person could select who they want to make decisions on their behalf and the decisions which they have authority to make; these are called Lasting Powers of Attorney (LPA). Your next of kin does not have legal decision-making authority without an EPA or LPA (unless they have been appointed by the Court of Protection). This creates a legal decision-making authority that would not exist for your next of kin otherwise.

There are two types of LPA, one for property and affairs, including finances, and one for health and welfare, including medical treatment and accommodation issues. For an LPA to be valid it must be registered with the Office of the Public Guardian (OPG). Where an LPA has been signed but not yet registered before the person loses the capacity to make this decision it may still be registered with the OPG if it can be demonstrated the person did have capacity at the time of signing. We recommend seeking advice from the OPG or the supporting solicitor where one was involved if this is the case.

While you can register an LPA with the OPG without legal advice, you may wish to use a solicitor to provide independent advice to ensure your interests are protected and that the LPA is correctly registered with the OPG. In these cases you can expect to pay around £200-£300 for the advice.

It costs £110 to register an LPA with the OPG so if you make one for property and affairs and one for health and welfare you would pay £220.

For more information, please refer to Chapter 7 of the MCA Code of Practice or visit the government website at <https://www.gov.uk/power-of-attorney/register> for details on how to make and register an LPA.

Court of Protection and Court Appointed Deputies

If a person lacks capacity to make a particular decision and they have not made an LPA or advance decision, it may be necessary to apply to the Court of Protection to make the decision in the person's best interests. Where a number of decisions need to be made on an ongoing basis the Court may appoint a Deputy to act on that person's behalf. A Deputy may be a family member, a professional (such as a solicitor or accountant) of the relevant local authority.

For more information, please refer to Chapter 8 of the MCA Code of Practice or visit the Court of Protection website at <https://www.gov.uk/courts-tribunals/court-of-protection> for more details on making an application to the Courts.

Daisy Bogg and Professor Keith Brown, May 2016

The National Centre for Post-Qualifying Social Work and Professional Practice

Did you know....

- That there is no legal basis for next of kin
- If your loved one is in hospital and unable to consent to treatment, you have no legal right to give consent on their behalf unless certain legal procedures are in place

There is actually only one situation where 'next of kin' is legally valid; this is if you die without leaving a will. In this case, your estate will be passed on to the person or people who are your closest blood relation, also termed as your next of kin.

The Mental Capacity Act 2005 has rectified this problem by introducing a number of ways to ensure your wishes and feelings are considered should a time come when you are unable to make a decision for yourself. Relying on an identified 'next of kin' is not one of those ways.



The National Centre
for Post-Qualifying
Social Work and
Professional Practice



National
Mental
Capacity
Forum

POSW Administration Team

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DSCB Neglect Strategy



Neglect Strategy

Why do we need a strategy?

The DSCB recognise that more needs to be done to tackle neglect, and reduce both its prevalence and its harmful effects on children and young people in Doncaster. This new DSCB strategy sets out our multi-agency approach to addressing this pervasive problem. All children and young people in Doncaster have a right to be looked after properly and kept safe. This remains our priority.

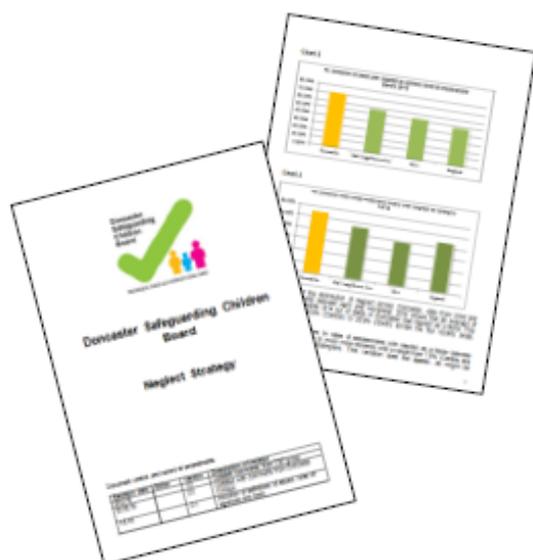
The impact of neglect on children and young people is enormous. Neglect causes great distress to children and young people, leading to poor health, educational and social outcomes and is potentially fatal. Lives are destroyed, children and young people's abilities to make secure attachments are affected and their ability to attend and attain at school is reduced. Their emotional health and well-being is often compromised and this impacts on their success in adulthood and their ability to parent in the future. The purpose of this strategy is to set out the strategic aims and objectives of the DSCBs approach to tackling neglect.

The over-arching aim of the strategy:

'To improve outcomes for children, young people and families in Doncaster by reducing the incidence and impact of neglect'

In order to achieve this there will be three distinct strands of work:

- Communication and awareness of neglect to families, children and young people, professionals and the public
- Working with children, young people and families to reduce the effects of neglect. To develop tools and guidance to support practitioners to assess and work with neglect.
- Profiling and quality assurance to better understand the prevalence and nature of neglect and measure outcomes.



What is Neglect?

In terms of statutory responsibilities for safeguarding and child protection *Working Together to Safeguard Children 2015* defines neglect as:

The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing or shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate caregivers); ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.' (Glossary, p93)

DSCB Neglect Strategy

Underlying Principles to tackling neglect

All interventions whether early help or statutory interventions will hold to the following principles: Families are best supported when neglect is identified in its early stages

- The safety, well-being and development of children and young people is the overriding priority.
- Working in partnership with children, young people and families is essential to better outcomes.
- Working together with other professionals is essential to providing effective support.
- Building resilience is key to sustaining the safety of children and young people into the future.
- Children and young people with additional needs such as special education needs and disabilities are more vulnerable to the effects of neglect.
- Consideration of historical information is essential to inform the present position and identify families at risk of inter-generational neglect.
- Effective information sharing needs to take place between agencies to inform assessments and evaluations of risk.
- Decisive action needs to be taken to avoid ongoing neglect when improvements are not seen.

Your Role...

There are no specific services that exist for supporting neglectful families. Neglect is a form of abuse and as such is the responsibility of all agencies to identify the signs at an early stage and to be able to either provide support themselves, signpost to a service which can provide support or, if the threshold for social care is met, make a referral to Doncaster Children's Services Trust (DCST). Currently support is provided through a number of key agencies such as schools, health, the Council through its early help services, health, housing services and DCST.

Professionals across all agencies who come into contact with families will need to be able to spot the signs which identify that neglect is occurring and be able to signpost or make a referral to social care.

Those agencies who provide any type of family support service, whether that be in a school setting, a children's centre or youth hub need also to know how to assess risk and provide support to prevent the neglect from continuing.

Those social care services will need to be able to assess the parent's ability to change to ensure that unnecessary drift isn't caused by adopting a 'start again' approach when families have been known to services for a long time.

For neglect training please visit:

www.engagedoncaster.co.uk or contact the Doncaster Safeguarding Children Board on 01302 734214.

A copy of the strategy and toolkit can be located on the DSCB website

www.doncastersafeguardingchildren.co.uk

If you have concerns about a child or young person then please contact the Referral and Response Team on 01302 734100 between 8:30am and 5pm, Monday to Friday or email childrenassessmentsservice@doncaster.gcsx.gov.uk Outside of these hours call 01302 796000.

Early Help Hub:

T: 01302 734110

E: EarlyHelpHub@doncaster.gov.uk

The below supporting documents can be found on the DSCB Website;

- Doncaster Early Help Strategy
- DSCB Thresholds Document
- Early Help Handbook for Practitioners
- DSCB Multi Agency Safeguarding Procedures
- Neglect Toolkit

Further information and useful advice can be found on the below websites:-

NSPCC: <https://www.nspcc.org.uk/preventing-abuse/signs-symptoms-effects/>

Signs of Safety: signsofsafety.net

2017 Safeguarding Training Details

Safeguarding Training Level 2 Children & Adults		
Date	Time	Venue
18.01.17	9am – 1pm	BDGH Education Centre Room 2
09.02.17	1pm – 5pm	MMH – Boardroom
28.02.17	9am – 1pm	DRI – Learning Room 2, Education Centre
15.03.17	1pm – 5pm	DRI – Lecture Theatre *Extra Session*
23.03.17	9am – 1pm	DRI – Learning Room 2, Education Centre
25.04.17	1pm – 5pm	MMH - Boardroom
17.05.17	9am – 1pm	BDGH - Kilton & Blyth Rooms, Management Suite
14.06.17	9am – 1pm	DRI - Lecture Theatre *Extra Session*
29.06.17	9am – 1pm	DRI - Training Room, C Block
28.07.17	9am – 1pm	BDGH - Kilton & Blyth Rooms, Management Suite
29.08.17	9am – 1pm	DRI - Learning Room 2, Education Centre
14.09.17	9am – 1pm	DRI - Lecture Theatre *Extra Session*
19.09.17	9am – 1pm	DRI - Learning Room 2, Education Centre
18.10.17	1pm – 5pm	BDGH - Kilton & Blyth Rooms, Management Suite
29.11.17	1pm – 5pm	DRI - Learning Room 2, Education Centre
13.12.17	1pm – 5pm	DRI - Learning Room 2, Education Centre

Safeguarding Training Level 3 Professional Roles and Responsibilities for Clinicians		
Date	Time	Venue
17.01.17	9am – 5pm	DRI – Conference Room, Women’s & Children’s Hospital
14.03.17	9am – 5pm	BDGH – Boardroom
16.05.17	9am – 5pm	BDGH - Boardroom
11.07.17	9am – 5pm	DRI - Learning Room 2, Education Centre
19.09.17	9am – 5pm	MMH – Fred & Ann Green Boardroom
14.11.17	9am – 5pm	DRI - Conference Room, Women’s & Children’s Hospital

PREVENT Training		
Date	Time	Venue
10.01.17	10.30am – 12 noon	Lecture Theatre DRI
07.03.17	10am – 11.30am	Lecture Theatre DRI
24.05.17	2pm – 3.30pm	Lecture Theatre DRI
13.07.17	10.30am – 12 noon	Lecture Theatre DRI
12.09.17	2pm – 3.30pm	Lecture Theatre DRI
13.11.17	9.30am – 11am	Lecture Theatre DRI

All Safeguarding training sessions can be booked via the Training Department at DRI on 01302 642055.

Training information is also available on our intranet training page.
Please see: http://intranet/Corporate-Directorates/Nursing-Quality/Safeguarding_Training.aspx

Please note: we are no longer able to provide refreshments for training courses.