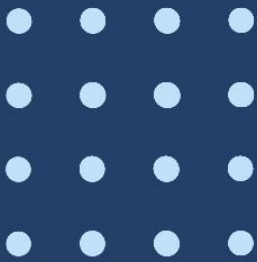


ANNUAL REPORT

2023/2024

Buckinghamshire, Oxfordshire
and Berkshire West Integrated
Care Board Safeguarding Adults
Safeguarding Children and
Looked After Children



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1. Introduction

1.1 This is the annual report on Safeguarding and Looked After Children (LAC) of the Integrated Care Board (ICB) that serves Buckinghamshire Oxfordshire, and Berkshire West (April 2023 – March 2024). The report aims to provide a national and local context to safeguarding developments during this period, outlining how the ICB has met and continues to meet its statutory duties and responsibilities for safeguarding and looked after children.

1.2 The report details the work of the Team for safeguarding children, safeguarding adults and looked after children, who ensure that the statutory responsibilities of the ICB are met through robust engagements across the BOB system and at local place. The Team works collaboratively with internal ICB colleagues and external statutory and non-statutory partners, including the three Local Safeguarding Children Partnerships (LSCP) and three Local Safeguarding Adult Boards (LSAB) of West Berks (Reading, Wokingham, and Berks West), Oxford, and Bucks.

1.3 Safeguarding adults, children and looked after children (LAC) involves a range of activities spanning the prevention of harm to those at risk, through to actions taken when harm occurs. The role of the ICB Safeguarding and LAC Team is to collaborate and work in partnership with other agencies across the local system and beyond, to ensure that services are in place to respond to adults and children who are at risk of abuse or neglect, or who have been harmed, and deliver improved outcomes for the most vulnerable people in the local population (NHSE, 2015). It remains the responsibility of every NHS funded organisation and each individual healthcare professional working in the NHS to ensure that the principles and duties of safeguarding adults and children are holistically, consistently, and conscientiously applied, with the well-being of adults and children at the heart of what we do.

1.4 The Care Act (2014), and Care and Support Statutory Guidance (Department of Health, 2015) delineated how safeguarding activity is not a substitute for:

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

1.5 Section 11 of The Children Act (2004) places duties on a range of organisations and individuals to make arrangements for ensuring that their functions, and any services that they contract out to others, are discharged with regard to the need to safeguard and promote the welfare of children.

2 National Context for Safeguarding and Looked After Children

2.1 NHS England

NHS England provides leadership and oversight of ICBs, ensuring that safeguarding principles and duties are applied comprehensively and that they have assurance mechanisms for their performance and the broader health system. NHS England is responsible for setting policy and improving safeguarding practice and outcomes in health and social care.

2.11 NHSE South East Regional Safeguarding Team

BOB ICB Safeguarding and LAC Team work in collaboration with the Regional Team to escalate and manage system risks, provide and seek assurance through routine reporting aligned with the Safeguarding Accountability and Assurance Framework (SAAF). In addition, the ICB participates in well-established peer groups, forums, communities of practice, and regional and national NHSE safeguarding networks. Regional NHSE staff also attend the BOB ICB Safeguarding Committee, and the ICB Director for Safeguarding and Looked After Children represents the organisation at the NHSE Regional Safeguarding and Looked After Children Steering Group.

2.12 NHS England Assurance and Accountability Framework 2022

NHSE published a revised Safeguarding Accountability and Assurance Framework (SAAF) in 2022 which provides details of the safeguarding roles and responsibilities of all individuals working within NHS funded care settings and NHS commissioning organisations. ICB Designated and Named professionals are clinical experts and strategic leaders for safeguarding and are a vital source of advice and support to health commissioners in the ICB and partners across the ICS. They work with the leadership of the Director for Safeguarding and LAC to assure the statutory roles and responsibilities of the ICB.

Evidence as to how the team has achieved against the SAAF compliance:

- Maintained oversight of commissioned providers and their standards to safeguard adults, children and Looked After Children
- Developed safeguarding adults, children, and LAC requirements for commissioned services (in response to new statutory requirements and best practice and developing the safeguarding adults, children, and LAC standards for the procurement of new services)
- Represented the ICB at Local Safeguarding Adult Boards (LSABs) and Local Safeguarding Children Partnerships (LSCP), chairing and actively contributing to sub-groups to ensure that learning is taken from cases to drive improvement across the system
- Provided expert advice in relation to complex cases, including allegations against staff, ensuring that the response is person centred, proportionate and timely
- Proposed robust responses to improve the safeguarding system in the health sector
- Worked with integrated care system leaders, primary care network leaders and GPs to ensure that safeguarding and the Mental Capacity Act are considered and embedded in frontline practice, training, and learning.
- Facilitated safeguarding involvement in all parts of the commissioning cycle, from procurement to quality assurance, developing a safeguarding procurement framework to standardise the process
- Responded to the interface between Child Death Overview Panel (CDOP), Learning Disability Mortality Reviews (LeDeR), Statutory reviews and serious incidences in relation to safeguarding
- Been proactive members of all statutory reviews; Children Safeguarding Practitioner Reviews (CSPRs), Domestic Abuse Related Death Review (DARDR) formally Domestic Homicide Reviews (DHRs); Serious Adult Reviews, including the chairing and leading workshops for learning
- Completed the annual NHSE Safeguarding Commissioning Assurance Toolkit, (SCAT)
- Compliance and reporting to the NHSE Case Tracker, to identify themes from statutory reviews and ensure they are feedback and drive improvement
- Proactive support of ICBs duty to cooperate with/statutory duty in relation to:
- Promoted Multi-Agency Responsibilities to Local Safeguarding Adults Board and Local Safeguarding Children Partnerships including Section 11 Audit Responsibilities

- Coordinated and collated learning from Statutory Reviews: Children Safeguarding Practice Reviews (CSPR); Safeguarding Adult Reviews (SAR) and Domestic Abuse Related Death Reviews.
- Represented the ICB on Local Domestic Abuse Partnership Boards
- Led on health role in Child Death Overview Panel – CDOP
- Led on health role in Modern Slavery and Exploitation including Refugees and Asylum Seekers
- Actively contributed to Prevent Agenda - Channel Panel and Prevent Board
- Led on health role in Serious Violence Duty
- Led on health role in Mental Capacity Act (MCA, 2005) and Liberty Protection Safeguards
- Proactively supported Child Protection – Information Sharing – CP-IS implementation and use.

2.2 Regulators, Inspections and Safeguarding Partners

Regulation and inspection are important to the ICB to demonstrate safeguarding assurance and accountability arrangements across the health system, to celebrate best practice and embed new learning. This is achieved through a variety of audits, reports, assessments, including: statutory reviews and learning; CQC Inspections; Joint Targeted Area Inspections; Section 11 self-assessment audits; data sets and reporting. Dashboard and commissioning documents have all be developed and agreed, to promote single approach across BOB for 2024/25 contract round. A single framework for reporting and an agreed approach to trust data collation is in place as part of the work. Safeguarding self-assessment processes will become standard, and collation of annual reporting will be possible in the future to build a shared assurance and a community of practice to promote safeguarding

During 2023/2024, the ICB Safeguarding and LAC team have participated in a number of inspections including three Independent Local Authority Children’s Services inspections (Reading, Oxford and Wokingham) and a Joint Targeted Area Inspection (JTAI) of Buckinghamshire in January 2024.

The Ofsted Inspection of Reading focused upon Looked After Children and the outcome was largely positive. Strengths identified included: children and young people (CYP) going into Care at the right time; good stable placements; good permanency planning and good attempts to keep children and young people within their own homes where possible. The level of senior scrutiny related to planning for the child was good and Ofsted acknowledged the child focused language when communicating with CYP and that their education needs were largely being met.

The JTAI in Buckinghamshire focused upon the Multi Agency Response to Identification of Initial Need and Risk in Buckinghamshire and consisted of the three lead regulators, OSTED, CQC and His Majesty’s Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS) and considered the safeguarding partnership response to children and families. Headlines from the inspections were positive and considered against a backdrop of increased demand, organisation change and improvements journeys for both the Police and Buckinghamshire Local Authority. There was recognition for the collaborative and innovative work that is delivered through the Child and Adolescent Service (Oxford Health) and the positive impact the services has upon children and young people. Wider health including mental health services and primary care were also noted as effective in their identification and management of risk and collaboration with wider safeguarding partners. Areas of improvement were identified in relation to the Buckinghamshire Multi Agency Safeguarding Hub and Partnership inclusion of education in relation to strategic planning. Outcomes and actions from this inspection and others are coordinated across the wider health and social

are system and monitored through the safeguarding partnerships, internal governance structure of organisations and also overseen within the ICB Safeguarding Committee.

3 Local BOB Context

3.1 The ICB Chief Executive has delegated to the Chief Nursing Officer the ICB Board-level Executive responsibility for Safeguarding. This includes holding the accountability for ensuring that effective safeguarding processes are in place and that the statutory responsibilities and duties of the ICB are met, as an equal partner with Thames Valley Police and Local Authority/Councils. The Director of Safeguarding leads the ICB Safeguarding Team, who work in partnership with statutory and non-statutory agencies at 'Place' and at a system-wide level to ensure and support safeguarding practice and strategy.

3.2 ICB Safeguarding team members have been assigned areas of responsibility and areas of work. The portfolio lead is responsible for providing overall leadership for the workstream throughout the identified health network. These portfolios and workstreams are included within the three key safeguarding and looked after children areas identified within the BOB ICB Joint Forward Plan (JFP).

- Work across ICB Directorates and with ICS partners to assess demand and capacity – standardise and identify new ways of working for priority workstreams.
 - Engage with vulnerable adults, children and young people and their representative groups to improve their experience and to develop our services.
 - Children in Care / Looked After Children (CIC/LAC) – Initial Health IHA/RHA clinical capacity
 - Multi Agency Safeguarding Hub (MASH) child and adult clinical capacity • Health Visitor/School Nurse HV/SC capacity
 - Quality Assurance Framework (QAF) capacity/ prioritisation
- Work to align and standardise our safeguarding Quality Assurance Framework (QAF) and processes:
 - Effective information sharing – new national Multi-Agency Safeguarding Partner Performance Board (MASPP)
 - Legal literacy MCA/DoLS/ – linked to preparedness for LPS and including inherent jurisdiction – Deprivation of Liberty Orders for CYP
 - Implementation of Multiagency Risk Management (MARM) Frameworks
 - CPIS 2 – introduction of next stage Child Protection Information Sharing system
- Developing an improvement programme which promotes preparation for new legislation and duties. As an initial priority is to align with the Community Safety Partnership and Thames Valley Police priorities (all age) to meet the statutory violence duty. Workstreams will include:
 - Criminal Exploitation
 - Child Sexual Exploitation
 - Contextual Safeguarding
 - Vulnerable and seldom heard groups e.g. LD and Neurodivergent, people with mental health needs
 - Domestic abuse • Violence against women
 - Modern Day Slavery
 - Transition to adulthood – links to SEND

[Joint Forward Plan | BOB ICB and System Delivery plan 31 March 2022 \(icb.nhs.uk\)](#)

3.3 Safeguarding Children

The numbers of children subject to child protection has increased over the year, however the number of children entering the case system is broadly similar. However, the demographic of those becoming looked after has seen a rise in the adolescent age range, as opposed to historically the under three year olds.

Complexity of presentation is a theme identified in providers and this is requiring the Designated post holders to support in terms of leadership, support and advice. Around one in four young people will experience Adverse Childhood Experiences (ACEs). These experiences will leave many with lasting trauma than can negatively impact their health and wellbeing, as well as hindering their social and emotional development. Trauma awareness training for professionals has been undertaken and promoted across the area, in collaboration with Thames Valley Violence Reduction Unit, and organisations have been challenged to consider how their organisation/team supports young people experiencing the impact of trauma to help improve their quality of life.

Neglect remains a key area for developing case work support, ensuring families are offered early help when emerging need is identified has been a core workstream across the place areas. Creating ways of working together in a coordinated way with a shared understanding if needs and issues arising for families with strategies to mitigate against these through Early Help Strategies and active involvement in Early help hubs/ services. The exploitation of young people is a key national safeguarding issue and work with these young people remains a priority, led by police colleagues for the partnership., learning events and awareness raising activities are provided to continue knowledge development about recognising potential exploitation of young people.

3.4 Looked After Children

Working Together to Safeguard Children (2023) and Promoting the Health and Wellbeing of Looked After Children (DfE, 2015) outline BOB ICB obligations for looked after children. It is the duty of ICBs, in coordination with other NHS commissioners and partners in local authorities, to guarantee the prompt and efficient provision of health services to looked-after children and care leavers. To guarantee system assurance and supervision, designated specialists have continued to supervise the commissioned services compliance. When scheduled, the Designated Nurses also attend local Corporate Parent Boards and provide representation. In order to improve the timeliness of health assessments, designated experts are collaborating with providers to facilitate the development of a new NHSE national data set for Assurance of Statutory Health Assessments for looked after children. The ICB Safeguarding Team are also working with local authorities to undertaking an audit to assess the effectiveness of placement change notifications to improve continuity of healthcare.

3.5 Safeguarding Adults

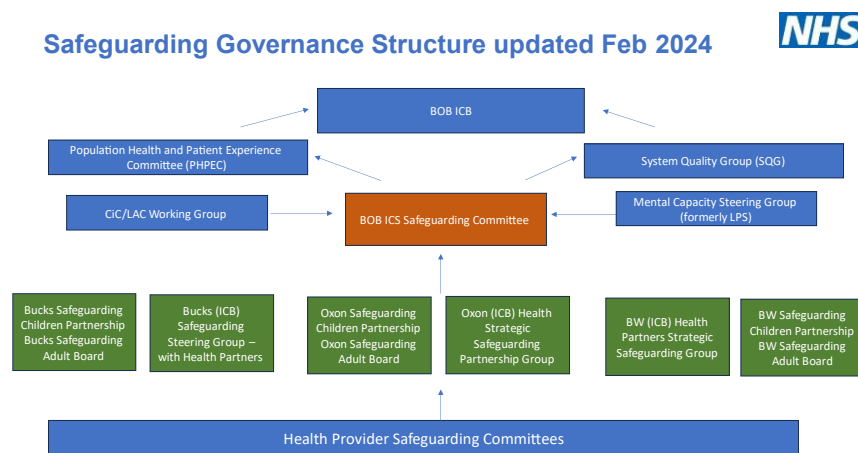
The BOB Adult safeguarding place team provide support and advice on request for safeguarding concerns, serious adults review and Domestic Abuse Related Death Reviews. There is no specific role or function to hold a safeguarding case load for designates or ICB safeguarding teams. However, the consultation support provided for primary care and our wider health economy at place is well established. The most frequent type of abuse in our cases work is in line with the Safeguarding Adult Boards annual reports and indicate a higher prevalence in neglect and acts of omission cases.

Across our systems and region safeguarding has indicated that health professionals are dealing more complexity in cases including mental health and mental capacity issues, both leading to more involvement of legislative frameworks. Overall there is an increase in safeguarding referrals nationally and this is seen in different local authorities across BOB. The Heads of Safeguarding Adults are involved with organisational abuse and this has seen an increase across the BOB in respect to working with our Local Authorities in provider

concerns frameworks. The team work closely with our ICB quality lead for health and social care.

3.6 Governance Arrangements

Governance arrangements, for safeguarding have been strengthened during 2023-2024, with the introduction of the ICB Safeguarding Committee, providing additional scrutiny and oversight of ICB, health provider organisations and the wider safeguarding system. Safeguarding continues to be part of the local place Quality and is assured at place through the Safeguarding Networks and Partner Committees. The ICB Safeguarding and LAC Committee offers the additional opportunity for a system wide health approach to safeguarding and LAC priorities and reports into the ICB Population Health and Patient Experience Committee (PHPEC), escalating and reporting to the BOB ICB Board and to NHSE as required.



3.7 Training and Development

The ICB Safeguarding and LAC Team has a lead in place to support ICB and system wide learning. Providers continue to struggle to meet and sustain agreed standard levels, due to staff capacity, high demand in care delivery and competing demands on staff time. Level 3 adult/child continues to present challenges in terms of demand and the complex nature and limited availability. All providers have agreed training strategies and training recovery plans which are monitored in contract review meetings. Staff competence is assessed in supervision and reflective sessions.

The Mental Capacity Act and legal literacy for frontline practitioners has been identified as a risk in the majority of safeguarding statutory reviews as well as several internal audits. Learning events and training has been provided in a range of formats and an updated training proposal for 2024-2025 is being finalised for ICB and system approval.

GP training events and supervision have been provided throughout the year by the ICB safeguarding team. These sessions complement multi-agency partnership training and topic specific learning events and generate positive feedback and support the complex nature of safeguarding within Primary Care specifically. Further work is being explored to develop a cohesive training offer with partners, for all healthcare professionals.

4 Multi-Agency Responsibilities

4.1 Local Safeguarding Adults Board and Local Safeguarding Children Partnerships (LSABs/LSCP's)

The ICB is a statutory partner of both the local Safeguarding Adults Board and Safeguarding Children Partnership (Care Act, 2014). This includes:

- the local authority which set it up
- the ICB
- the Chief Officer of Police in the local authority's area

The ICB Safeguarding Team have been collaborating with other partners in various work streams to enhance and reinforce the arrangements for safeguarding children and reviewing child deaths. The work also involves mitigating any potential organisational and partnership risks. As statutory partners, the ICB Safeguarding Children and LAC Teams have continued to work collaboratively, engaging with partners in work streams to improve and strengthen safeguarding children and child death review arrangements and where necessary mitigate organisational and partnership risks.

Safeguarding Adult Boards had consistent representation from the ICB Safeguarding Team. Workstreams and activities have been undertaken to improve Partnership working, develop enhanced services for those with care and support needs and create greater integration. This has included working with partners on self-neglect strategies, fire safety responses and homelessness health.

The ICB Safeguarding team actively contribute to sub groups and task and finish groups across the partnership.

4.1.1 Section 11 Audit Responsibilities

The ICB has a statutory responsibility to ensure compliance to the section 11 of the Children's Act 2004. Enhancing multi-agency collaboration functioning and practice within the BOB system requires learning and dissemination of findings from every audit. Additionally, it indicates areas in which further work is required for the ICB Safeguarding Team and Local Safeguarding Partnerships.

As statutory partners of LSCPs and SABs designated nurses have supported several multi-agency audits to demonstrate effective working practice and areas for improvement. All providers have reported and complied with the S11 audit.

4.2 Statutory Reviews

Relevant health agencies are required to conduct statutory reviews when required. The ICB are statutory partners and the Safeguarding Team, Primary Care, and wider ICB teams work to review and evaluate practice improvements and support the dissemination of learning. These reviews encompass a range of topics and areas of concern. These reviews include:

Safeguarding Adult Reviews (SAR): convened by a Safeguarding Adults Board for every case where an adult has died from, or experienced serious abuse or neglect, and there is reasonable cause for concern about how agencies and service providers involved worked together to safeguard the person. This is a duty under the Care Act (2014) The purpose is to identify learning that can drive change to prevent harm from occurring in future similar circumstances. This is a key function to the ICB safeguarding function and statutory responsibility in accordance with NHSE safeguarding accountability and assurance Framework. Themes from reviews include:

- Practical application and legal literacy of the Mental Health Act
- Self-neglect

- Rural Isolation
- Disguised compliance
- Fire safety risk assessment processes

Children Safeguarding Practice Reviews (CSPR): convened by Safeguarding Children Partnerships for every case where the child dies or is seriously harmed in the local authority's area, or while normally resident in the local authority's area, the child dies or is seriously harmed outside England and there is cause for concern as to the way organisations worked together. This is a duty under Working Together (HM Government, 2018). Overall learning points from reviews include:

- See beyond the behaviours of the child – remembering that behaviour is communication
- Embed the culture of early help increase the number of early help assessments to divert children and families from statutory intervention
- A child in school is a safer child – schools to be encouraged to hold a meeting with partners before excluding or permanently excluding a vulnerable child to see what can be done to keep them in school
- Ensure rigorous commissioning and quality assurance of placements for the children we care for
- Maintain oversight of how we record and share information – safe information sharing between partners and resolving disputes between professionals needs to be proactive
- Review access to emotional health services for children & young people – especially CAMHS and Eating Disorder services
- When completing assessments make sure all the other areas where the child has lived are contacted for information
- Mobile families who move across boundaries can fall through the systems if communication is poor
- Disproportionality in the provision of services for minority ethnic groups reviewing strategy meetings and S47 recalls.

Homicide Reviews (DHR): Statutory guidance under section 9(3) of the Domestic Violence, Crime and Victims Act (2004). In Q4 2024, the Government announced that the name of these reviews will be changed from 'Domestic Homicide Review' to Domestic Abuse Related Death Review' (DARDR). ICBs currently have an important role as regular DARDR CSP (Community Safety Partnership) panel members. The Designated Professionals and Named GP's contribute to the quality assurance of the review and ICB executives must be informed about the final DARDR and any health-related recommendations because these documents are published legal documents that reflect the organisational reputation. From April 2024, the executive assurance role will be delegated to ICBs. The BOB ICBs have established DARDR governance processes already in place. To support this assurance role the portfolio lead/s within the ICB Safeguarding team have developed the Domestic Violence Health Network that will launch in early Q1 24-25. The purpose of the network is to support the Domestic abuse agenda across BOB. This will include dissemination of key learning and will support assurance processes and track all health action derived from DARDR's. Themes from this past year have included:

- Justice and Liaison services on different recording systems to Information share therefore limited.
- Mental health-related challenges within the context of information sharing with relevant others
- Information sharing between GP practices when patients

4.3 Child Death Overview Panel – CDOP

The death of a child is the most difficult situation any family can go through. ‘Child death review’ is a term used to describe the formal processes that happen after a child dies. When there is an unexpected child death, this triggers the Child Death Overview Panel, (CDOP), process and a Joint Agency Review, (JAR) meeting is convened. The delivery of statutory requirements is managed differently at place across BOB ICB, with reporting processes and partnership arrangements varying across the ICS. Statutory requirements are met and the ICB works as strategic partner and holds the accountability in collaboration with the 5 Local Authorities across Bob ICB.

An ICB audit of CDOP roles and responsibilities was undertaken in Jan 2024. The findings are yet to be shared by the external auditor. Themed meetings are undertaken bi-annually across the Thames Valley area and CDOP coordinators are in the SE group to share best practice.

The last themed meeting was related to cold water deaths. Learning points were consistent with the National Child Mortality Data findings in their national review, in which toddlers and teenagers were the largest groups, and inland open waterways were the most predominant location. West Berkshire developed and shared water safety messages with Thames Valley partners at the following link: [Water Safety Messages - Key Resources - PPP \(publicprotectionpartnership.org.uk\)](https://www.publicprotectionpartnership.org.uk)

CDOP panels are required to complete an annual report, shared across their partnership, and incorporated into annual report findings. Learning from the review processes in the past year includes:

- Palliative care has remained a theme of learning within reviews. The value of early, proactive planning, involving both acute, community and palliative care teams has been clearly demonstrated however practice remains inconsistent. Pathways are being updated and learning is being fed back with education for wider teams soon being made available through the strategic clinical network for NHS SE.
- It has been recognised that in this review year there have been occasions in which delays in identification of serious illness have been noted. Viral illness developing into life threatening events, post operative complications and obscuring of symptoms (overshadowing) have all been explored within panel.
- Recommendations from the reviews relating to communication issues remain a consistent area for improvement. It has been acknowledged by teams and practitioners that as demand has increased, pressures on staff have reduced the time available to construct comprehensive handovers and communication updates. Good multi-agency and multi-professional active communication is essential to holistic and well-coordinated care.

Services are committed to ensuring the ongoing care and safety of children. Members of CDOP have a forensic approach to the Panel’s work ensuring that all possible learning is derived from each child death, that trends are identified and acted upon as quickly as possible and that the voice of parents and carers, and, where possible, children and young people, is heard and responded to. Whilst there is always room for improved communication and information-sharing across and within services, agency representatives on the Panels are committed to taking all learning back to their colleagues. As a result, service changes have been made in a timely manner and more collaborative and joint working has led to more effective and efficient sharing of resources across the local system.

4.4 Modern Slavery

Any UK business company with a total revenue of £36 million or more is required by Section 54 of the Modern Slavery Act (2015) to prepare a modern slavery and human trafficking

statement for each fiscal year. The statement, which must be posted on their website, must detail the actions they took during the fiscal year to guarantee that modern slavery is not taking place in their supply chains or within their own company. The ICS Safeguarding Team collaborates with important local stakeholders to create strategic strategies related to modern slavery and the broader exploitation of vulnerable adults, children, and youth. Within a backdrop of local authorities and councils across England working with providers and offering incentives to recruit from abroad to fill the high vacancy levels locally, the safeguarding team have been presented with challenges relating to allegations raised within care homes & domiciliary care. Potential data suggests up to 1500 victims of modern slavery that could need support. Sub-groups, systems and partnerships meetings are used to share, mitigate and safeguard with escalation to both Child and Adult Boards regarding concerns and increasing numbers of cases.

4.5 Refugees and Asylum Seekers

In order to support the identification of safeguarding concerns, risks are evaluated, and mitigations are put in place to protect children, young people, and adults who are at risk of harm, designated nurses for safeguarding adults and children provide safeguarding representation at place based and ICB health meetings for refugees and asylum seekers, including unaccompanied asylum-seeking children (UASC) with designates collaborating with place LA's. Temporary residential and pop-up centres have created huge demand on local health systems. BOB ICB/ICS Asylum seeker program group meet monthly with safeguarding input and work is aligned with South East Vulnerable Migrants sub-group.

During 2023/24 two USAC centres have been opened and an action plan to address issues such as access to transport for health appointments, access to dental services and access to health care is being developed. Community midwives and health visitors are also providing support to mother's and babies by visiting hotels and antenatal vitamins and children's vitamins to the under 5's. Families are also referred to charities and the LA for early help services and each hotel is allocated a GP practice.

4.6 Prevent Agenda - Channel Panel and Prevent Board

The ICB safeguarding team is an active member of the all the channel and prevent boards covering 5 Boards and 5 panels across the BOB areas supporting a multi agency interface with our primary care teams in this preventative space. This agenda works to safeguard and support people who are susceptible to the influence of radicalisers to terrorism for a range of causes such as animal rights and religious and political ideologies. The Director for safeguarding has raised the duty and responsibility of the ICB in emergency planning at a strategic board level for the ICB. The ICB attend the counter terrorism local profile and regional networks.

4.7 Serious Violence Duty

The Serious Violence and Violence Reduction Programme is well-established across the BOB ICB footprint. Health engagement is embedded at operational and strategic levels. Hospital Navigators programme is part of the Violence reduction programme in Thames Valley with schemes in 5 EDs across the patch and there are a huge number of stories from CYP and young adults across the Thames Valley who have successfully integrated into activities, supported into work, school and training or onto treatment pathways following this intervention. Conversations regarding future funding are in progress across the ICS to promote this is critical work to support CYP and young adults in terms of MH, behaviour, drugs, and alcohol. Volunteer recruitment has been challenging recently and requires more joint communications. In Reading they are using University Psychology Students as part of the programme and discussion is underway with Oxford to see if this can be replicated. An evaluation by Oxford Brookes University is to be presented in May 2024 to all key stakeholders.

Work continues to support and embed health engagement within the Thames Valley Together, multi-agency data-sharing system developed by Thames Valley Police and the Violence Reduction Unit. It has received positive scrutiny by the Information Commissioner's Office, with a final regulatory report published in November 2023. The project is still in a developmental stage and is progressing to enable consideration of data at a singular and aggregated level for a particular geography.

Information Sharing Thames Valley comprises of a small de-identified dataset collected by Emergency Departments (ED) and shared with local Community Safety Partnerships (CSP) on a monthly basis. The data covers all A&E attendances resulting from violent incidents, including:

- time and date of the incident
- time and date of arrival in A&E
- specific location of the incident
- primary means of assault (for example a weapon or body part used).

4.8 Mental Capacity Act (MCA, 2005)

The Mental Capacity Act Steering Group is a well-established forum across BOB, chaired by a Designated Adult Lead. The Group aims to collectively share knowledge and expertise for a health response to any legislative updates and coordinate a BOB approach to improving legal literacy and best practices across BOB. During this reporting period, the group has produced a program of work covering various topics within the context of MCA. They have also received reports from providers to develop heat maps and developed training packages to support providers in the practical application and legal literacy of the legislation.

A standalone MCA policy has been endorsed and circulated in Feb 2024. An ICB MCA training needs analysis is scheduled for the system quality group in April 2024 to outline the ICB's current position in relation to ICB staff MCA training compliance, with a recommendation to implement mandatory MCA training and increased levels for clinical staff.

The ICB has a firmly established BOB wide MCA steering group that meets quarterly with active participation across health and extended to our wider stakeholders. We monitor and have oversight of our system and provide national and regional updates, annual programme of events and peer support for audits. Our system partner and the ICB contribute and provide collaborative data providing them with an open transparent opportunity to Share assurance, innovative practice, and challenges quarterly. This has been built on from our NHSE maturity matrix and heat maps submission in 2023. There is an MCA governance system in place, including access to legal support and escalation of risk. There is a current risk corporately held with the ICB for Community DoL. The ICB provided regional support in chairing the SE regional MCA network.

4.9 Multi-Agency Safeguarding Hubs (MASH) – Child

Safeguarding children is a statutory responsibility of all agencies and Multi-Agency Safeguarding Hub's (MASH) have been well established in local authority areas across the country. The fundamental principle of a MASH was to bring key professionals together to facilitate better-quality information sharing, analysis, and decision-making to identify risks and needs of the child or children at the earliest possible point and respond with effective and joined-up actions.

The MASH model continues to evolve, and the safeguarding team in BOB ICB are striving to ensure that the fundamental principle of multi-agency working within a MASH and the efficacy of this continues. This has included considering what our colleagues are providing in other ICB areas and learning from feedback from a recent place Joint Targeted Agency Inspection. It has been recognised that health representation can be crucial for decision

making within the MASH and all areas of BOB ICB have some health representation within the current arrangements. However, having a MASH model in place does not guarantee a good safeguarding response. We have acknowledged that there are disparities between MASH services across the three ICB areas. There has also been a steady increase in demand which has impacted capacity. To mitigate risk, ICB resources have been redirected to the provider and work is underway by the ICB Safeguarding Team to consider ways to increase staff levels across the ICB places, as well as consider smarter ways of working to strengthen efficiency.

4.10 Child Protection Information Sharing Phase 2 (CP-IS)

The Child Protection Information Sharing (CP-IS) service shares information securely between Local Authority Childrens Services and urgent and emergency health care settings across NHS England. Information is shared on children who are looked after and children with a child protection plan, including unborn children, who have accessed unscheduled care (including 111). As per the NHS Long Term Plan, from the end of March 2024 this is being widened to include scheduled care. The following care settings have been prioritised for system access, as attendance here is most likely to indicate an increased risk of harm to child:

- General practice in hours
- Child and Adolescent Mental Health Services (all four tiers)
- Sexual Health: Sexual Assault Referral Centres
- Sexual Health: Termination of Pregnancy Services
- 0-19 Services: School Nursing and Health Visitors
- Community Paediatrics
- Dentistry (appointment-based dentistry including emergency dental care)

4.11 Female Genital Mutilation

Across BOB ICB confidential services are provided to support for women and girls who have undergone female genital mutilation or cutting (FGM/C). There are clinics within the ICS run by a team of female doctors with experience in women's health, chronic pain, psychosexual therapy and psychological medicine. Women can refer themselves to the clinic, or be referred by health visitors, GPs, community midwives or other health professionals. Staff within the services work closely with the communities and with safeguarding partnerships to ensure risk assessment and safeguarding duties to report are fulfilled effectively. Compliance with reporting requirements are monitored and supported by the ICB safeguarding team. Providers and commissioners from the services have contributed to the consultations undertaken this year in relation to these reporting processes and requirements.

4.12 Domestic Abuse

The ICB designated and deputy safeguarding designates represent the ICB at place-based Domestic Abuse Partnership Boards. The ICB have dedicated portfolio lead/s for DA and they have an oversight of system based activity across DA. On September 4th, 2023, NHS England launched a new initiative called the "Sexual Safety in Healthcare - Organisational Charter" in partnership with healthcare organisations. The charter was developed by a diverse group of organisations, including NHS England, professional bodies, and employers, among others. A workstream is being coordinated with HR to ensure that the charter is fully implemented. There are ten key principles within the charter, and all commitments apply equally to everyone involved. Compliance with all principles is required by July 2024. The DA portfolio lead is working alongside: HR/People teams, Staff Groups including Primary Care/PCNs, Providers, Trade Unions & Healthcare providers to get this embedded across our health systems and more importantly our culture.

5 Success and Innovation

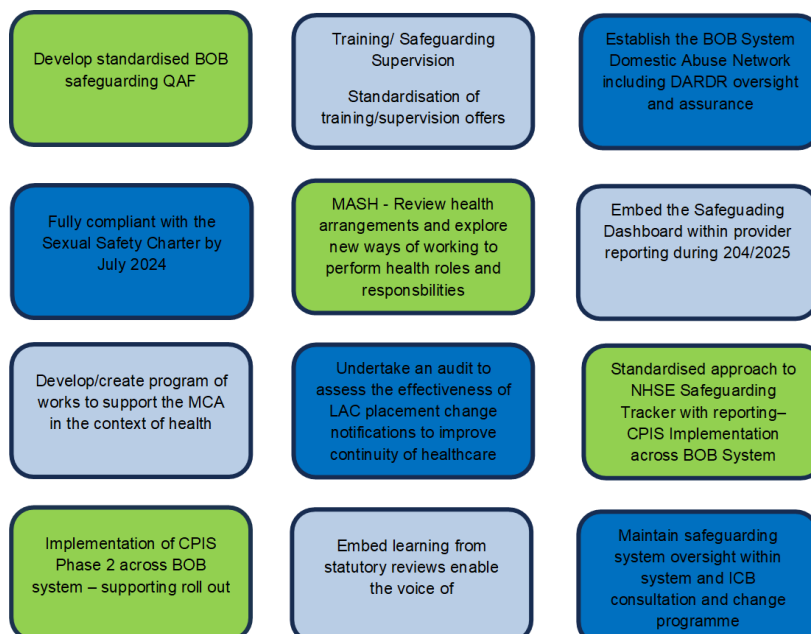
The BOB ICB Safeguarding team has seen investment over the past 12 months to increase the resource and provide future opportunities for team development, management of the increasing demand within safeguarding activity and strategy. The quarterly reporting to NHSE has provided opportunities for the team to recognise celebrations, innovations and business as usual throughout a challenging year for safeguarding and the wider health and social care system. The innovations and celebrations are considerable and details of these are provided below:

- Successful recruitment to all position in the new safeguarding team structure during 2023 and return of Designate seconded as MCA lead to NHSE
- Effective multi-agency engagement at PLACE led by Designates, supervision offers from Designates to providers and good engagement at Named and Designated Safeguarding Professionals Meetings; an opportunity for shared learning across providers.
- Health Partners Strategic Safeguarding Committee/Groups well established in each PLACE.
- Buckinghamshire and Oxfordshire Designates continue to provide Regional leadership chairing several NHSE SE network meetings
- ICS funding secured for a fixed term Domestic Abuse Coordinator to be based in Bucks.
- Positive JTAI inspection for health within Buckinghamshire system
- Primary Care Twilight teaching sessions:
 - April 23 'Safeguarding Concerns in Care Homes', attended by 60+ GPs. Two key speakers; a GP who works in a complex care home and one of the Care Home Support Service's Clinical leads. Robust discussion led to suggestions to improve care, e.g., a WhatsApp group for GPs working in C/Hs to share best practice, tips and hints. This will be taken forward in coloration with the ICB Quality Lead for Care Homes.
 - Nov 23 "Domestic Homicide". Speaker from Birmingham University who specialises in Domestic Homicide Review research and the CEO of Reducing the Risk. Attended by approximately 100 clinicians across the 3 place-based areas BOB ICB
- Themed CDOP meeting Buckinghamshire, Oxfordshire and Berkshire, hosted in Berkshire 22nd June - precipitated by increased drownings in Thames Valley, supported by the NCMD team. Report findings were presented to all BOB SG Designated professionals. Key learning included water safety messaging needs repeating and earlier in the year not just for summer holidays.
- Partnership work concerning Safeguarding Welfare Risk Reduction and Quality Improvement at Reading Festival 2023.
- Reading Ofsted 2 day Focused Looked After Child, Child In Care visit. The outcome was largely positive.
- MARAC GP letter improved across BOB to reflect Patient Access to Notes, encouraging reporting and recording, including adopting safety measures by using 104 codes to block on-line access and hiding consultations from view
- Regular programme of CHC Supervision planned, led by and supported by PLACE based Designate
- Plans in place to develop the sexual safety charter, enhance and update policies in line with new guidance and legislation
- Looked After Children Clinical Pool in Buckinghamshire continues to develop with training programme in place to support specialist work
- Complex case oversight and support by Safeguarding designates to enable Making Safeguarding Personal

- Dashboard and commissioning documents have all be developed and agreed, to promote single approach across BOB for 2024/25 contract round (April 24). A single framework for reporting and an agreed approach to trust data collation is in place as part of the work. Safeguarding self-assessment processes will become standard, and collation of annual reporting will be possible in the future to build a shared assurance and a community of practice to promote safeguarding
- Dentist Introductory Safeguarding Process Meetings have been undertaken, exploring ways to ensure their active engagement in local safeguarding practice. Positive feedback has been received supporting the need to continue training sessions that include useful and clear case discussions which stimulated debate and promote active learning
- Matrix working with LMNS maternity.
- BOB supported the organising of the Making a Difference week in March 2024 where the topic of Looked After Children and the Youth Justice System were the focus. Five lunchtime webinars were held across a week, with a total of 809 attendees
- In March BOB ICB Safeguarding Team supported the “Transition To Adulthood: young people” system wide event. Young people with a learning disability and/or autism, those who support them and professionals attended from across the BOB ICB footprint.
- Worked with NHSE to support POD safeguarding across BOB ICB
- BOB ICB Designates worked with Regional Safeguarding Team to present at Regional and National forums:
 - NHSE SE Adult Safeguarding Network Celebration Event – 12th June
 - DA provider community event Oxfordshire ‘Celebrating Good Practice’ – 15th June: Focusing on Oxon DA achievements, next steps to include review of DA reporting and recording in Primary care and review of how information is safely shared via MARAC processes
 - Prevent celebration event of provider practice innovative project work on audits and on prevent training for bespoke group of nurses

6 Priorities for 2024/2025

6.1 Nationally and within BOB ICB, we continue to see an increase in safeguarding demand and capacity. The current financial position and the impact to invest in new services presents additional challenge which requires the system to work in new ways in order to collaborate and support safeguarding more efficiently. The ICB Safeguarding team has several key priorities which are detailed in the Joint Forward Plan, and which focus upon the strategic management, oversight, and redesign of safeguarding. These will be progressed over the year alongside a large number of statutory responsibilities which are incorporated into business as usual. Further details on the priorities are detailed below:



7 Conclusion and Summary

The Safeguarding and Looked After Children Team in BOB ICB has maintained high-quality, safe service oversight and support to the population of the ICB and has provided specialist advice and guidance in relation to increasingly complex safeguarding adult, children and LAC concerns, assuring the ICB statutory duties and responsibilities. The increase in safeguarding activity continues, creating a high demand on the expertise and skills of the Safeguarding and LAC Team. The Team remain committed to championing safeguarding across the integrated care system so that those who are the most vulnerable in our communities receive safe care with the best possible outcomes.

Appendix A - Relevant Safeguarding Legislation and Key Documents

ADASS. 2018. Making Safeguarding Personal
www.adass.org.uk/making-safeguarding-personaloutcomes-framework-and-report

Care Quality Commission. 2022. Safeguarding People
[Safeguarding people - Care Quality Commission \(cqc.org.uk\)](http://www.cqc.org.uk/safeguarding-people)

DH, 2011. Safeguarding Adults: The Role of NHS Commissioners.
www.gov.uk/government/uploads/system/uploads/attachment_data/file/215715/dh_125036.pdf

DH 2022 Health and Social Care Act.
[Health and Care Act 2022 \(legislation.gov.uk\)](http://www.legislation.gov.uk/ukpga/2022/17/contents/enacted)

DH, 2017, Care and Support Statutory Guidance. London
[Care and support statutory guidance - GOV.UK \(www.gov.uk\)](http://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance)

DH, 2015. Final Report from the Jimmy Saville Investigation
<https://www.gov.uk/government/publications/jimmy-saville-nhs-investigations-lessons-learned>

DH, 2016. Multi-agency statutory guidance on female genital mutilation
www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genital-mutilation

DH, 2017. Care and Support. Statutory Guidance.
www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance

Domestic Abuse Act (2021)
<https://www.legislation.gov.uk/ukpga/2021/17/contents/enacted>

Foreign and Commonwealth Office.2014. The Right to Choose: Multi-Agency statutory guidance for dealing with forced marriage.
www.gov.uk/government/publications/the-right-to-choose-multi-agency-statutory-guidance

HM Government. 2014. Multiagency practice guidelines-Female Genital Mutilation. London
www.gov.uk/government/publications/multi-agency-statutory-guidance-on-femalegenital-mutilation

HM Government. 2023 Working Together To Safeguarding Children.
[Working together to safeguard children - GOV.UK \(www.gov.uk\)](http://www.gov.uk/government/publications/working-together-to-safeguard-children)

HM Government. 2014, The Care Act.
www.legislation.gov.uk/ukpga/2014/23/contents/enacted

HM Government. 2020. The Coronavirus Act.
<https://www.legislation.gov.uk/ukpga/2020/7/contents/enacted>

Home Office.2015. The Criminal Justice and Courts Act.
www.legislation.gov.uk/ukpga/2015/2/part/1/crossheading/offences-involving-ill-treatment-or-wilful-neglect/enacted

Home Office, 2015. Controlling or Coercive Behaviour in an Intimate or Family Relationship Statutory Guidance Framework

[Controlling or Coercive Behaviour in an Intimate or Family Relationship | The Crown Prosecution Service \(cps.gov.uk\)](#)

Home Office Prevent Duty Guidance, (2021)
[Prevent duty guidance - GOV.UK \(www.gov.uk\)](#)

Home Office. 2015. The Counter Terrorism and Security Act.
[www.gov.uk/government/collections/counter-terrorism-and-security-bil](#)

Home Office. 2015. The Modern Slavery Act.
[www.gov.uk/government/collections/modern-slavery-bill](#) Home Office. 2015. The Serious Crime Act
[www.gov.uk/government/collections/serious-crime-bill](#)

House of Lords, 2013-2014. Select Committee on the Mental Capacity Act 2005 Report of Session 2013–14
[www.publications.parliament.uk/pa/ld201314/ldselect/ldmentalcap/139/139.pdf](#) Capacity Act 2005:

ICB Clinical and Safeguarding Policies – accessed via ICB website

Safeguarding Children Partnerships and Safeguarding Adult Board Multi Agency Policies and Procedures

Intercollegiate documents: Looked After Children: Roles and Competencies of Healthcare Staff;
Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff;
[Looked After Children: Roles and Competencies of Healthcare Staff | Royal College of Nursing \(rcn.org.uk\)](#)
[Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff | Royal College of Nursing \(rcn.org.uk\)](#)
<https://www.rcn.org.uk/Professional-Development/publications/adult-safeguarding-roles-and-competencies-for-health-care-staff-uk-pub-007-069>

Modern Slavery Act. 2015.
[Modern Slavery Act 2015 - GOV.UK \(www.gov.uk\)](#)

National Offender Management Service Offender Management and Public Protection Group. MAPPA Guidance 2012 (Updated 2017).
[www.gov.uk/government/publications/multi-agency-public-protection-arrangements-mappa--2](#)

NHSE. 2022. Safeguarding Children, Young People and Adults at Risk In The NHS – Safeguarding Accountability and Assurance Framework
[B0818 Safeguarding-children-young-people-and-adults-at-risk-in-the-NHS-Safeguarding-accountability-and-assuran.pdf \(england.nhs.uk\)](#)

NHS England (2017) Prevent Training and Competencies Framework.
[NHS Prevent training and competencies framework - GOV.UK \(www.gov.uk\)](#)

The Local Government Association. 2015. Guidance on Domestic Abuse and Adult Safeguarding (2nd Edition, 2015)
[Domestic violence and abuse | Local Government Association](#)

UK Parliament, 2015, Counter Terrorism and Security Act [Unknown \(legislation.gov.uk\)](#)