



National Unplanned Pregnancy Advisory Service

Safeguarding Adults and Children Annual Report April 2023 – March 2024

Jo Slater – Designated Midwife for Safeguarding Adults & Children

April 2024

Contents

1	Background and Introduction	3
2	Governance & Accountability Arrangements	4
3	Quality Assurance	5
4	Governance Assurance Framework for Safeguarding	6
5	Partnership Working	7
6	NUPAS Safeguarding Activity: Safeguarding Under 18s Safeguarding Risk Assessments Domestic Abuse Safeguarding Support Safeguarding Policies Safeguarding Training Compliance Safeguarding Supervision Safeguarding Practice Audits Safeguarding Incident Reporting Data	8
7	Learning from external reviews	19
8	Safeguarding Improvement Activity	20
9	Digital Transformation	21
10	Quality Improvements and Assurances planned for the coming year	21
11	Patient Stories	22

1. Background/Introduction

Welcome to NUPAS' 2023 annual safeguarding report which showcases our commitment to the wellbeing and safety of our patients.

All safeguarding work across the organisation is underpinned by NUPAS Values:

-  ***Our patients are at the heart of our service - we respect and support their right to choose and are committed to providing a safe, compassionate and caring environment for them to exercise that right.***
-  ***We are transparent in all that we do - we communicate openly, honestly and compassionately in an inclusive manner, to and with all.***
-  ***We work as a team with a common goal - we are always assessing, responding and adapting to drive quality improvement and provide the best possible care.***
-  ***We are caring and passionate about what we do - everything we do is because we care, it is our driving force and our motivation.***
-  ***We value and support our staff - we promote an inclusive and responsive culture where everyone matters equally, and everyone has a voice.***

This year's annual report provides an overview of safeguarding activity for the period. It summarises and showcases the safeguarding work undertaken across the organisation and demonstrates how NUPAS discharges its statutory duties and responsibilities in relation to Section 11 of the Children Act 2004 and Care Act 2014.

Staff are supported to work in partnership and to respond proportionately and appropriately to safeguarding concerns for children, young people and adults at risk who access NUPAS services in accordance with their statutory duties.

NUPAS operates nationally and works closely with our ICBs and local safeguarding

partners when required.

This report would like to acknowledge and provide focus to the numerous excellent safeguarding achievements which have occurred in this reporting period. There are a great number of committed staff who work impeccably to support our patients and the Designated Midwife for Safeguarding and Safeguarding Team would like to acknowledge them all.

2. Governance and Accountability Arrangements

All providers of NHS funded health services including independent sector should identify a named professional for safeguarding within its structure. Named professionals have a key role in promoting good professional practice within their organisation, providing advice and expertise for fellow professionals, and ensuring safeguarding training is in place.

NUPAS have in place the Designated Midwife for Safeguarding Adults and Children who provides leadership and oversight of safeguarding arrangements across NUPAS and has the strategic responsibility for the safeguarding children and adult functions, supported by the Regional Safeguarding Leads.

The Designated Midwife for Safeguarding provides the statutory safeguarding functions in line with the Safeguarding Children, Young People and Adults at Risk in the NHS: Safeguarding Accountability and Assurance Framework (NHSEI, 2019).

Safeguarding activities and minutes from the Safeguarding Team Meetings are reported up to Patient Safety and Risk Oversight Committee (PSROC) for assurance and oversight.

Moving forward our Safeguarding Strategy, currently in progress, will be presented annually at the Senior Leadership Team meeting.

3. Quality Assurance

All health providers are required to have effective arrangements in place to safeguard children and adults at risk of abuse or neglect and to assure themselves, regulators, and their commissioners that these are working and effective. (*Safeguarding Children, Young People and Adults at Risk in the NHS: Safeguarding Accountability and Assurance Framework NHSEI, 2019.*)

This includes:

- i. Safe recruitment practices and arrangements for dealing with allegations against people who work with children or adults.
- ii. Safeguarding policies and procedures that support local multi-agency safeguarding procedures.
- iii. Effective training of all staff commensurate with their role and in accordance with the intercollegiate competencies for safeguarding children and adults.
- iv. Effective supervision arrangements for staff working with children, families, or adults at risk of abuse or neglect.
- v. Effective arrangements for engaging and working in partnership with other agencies.
- vi. Developing and promoting a learning culture.
- vii. Developing an organisational culture where all staff are aware of their personal responsibilities for safeguarding and information sharing.

The Designated Midwife for Safeguarding provides evidence against these requirements through completion of the Section 11 and Care Act 2014 compliance audit and is monitored

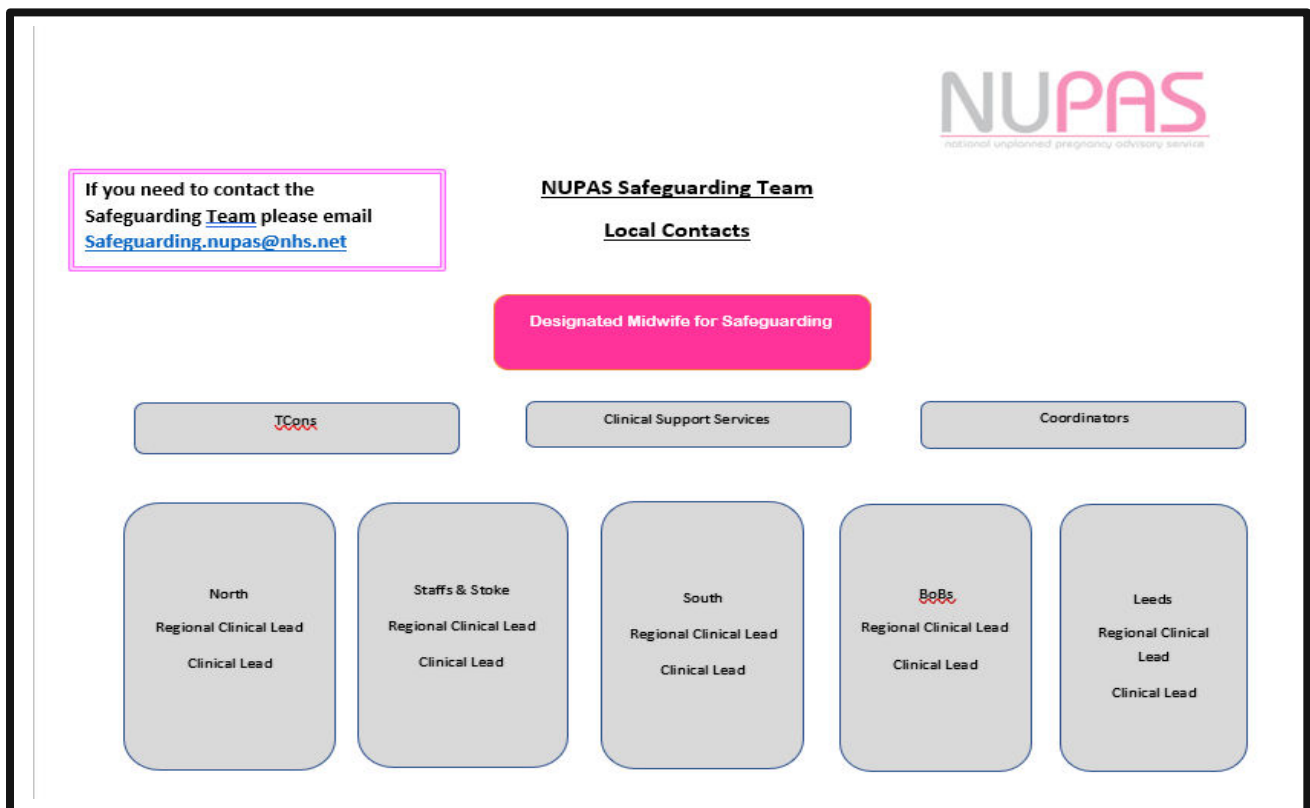
by the Patient Safety and Risk Oversight Committee and overseen by the Clinical Governance Committee.

4. Governance assurance framework for safeguarding

NUPAS has an internal assurance process. This includes a quarterly Safeguarding Team Meeting which reports to the Patient Safety and Risk Oversight Committee who report up to the Clinical Governance Committee. The Patient Safety and Risk Oversight Committee has a performance and quality assurance role and monitors the annual work plan and safeguarding risk register.



Each region has a lead representative at the Safeguarding Team Meeting to ensure that safeguarding priorities are embedded at an operational level and this feeds back locally.



5. Partnership Working

NUPAS is committed to working in collaboration with all external agencies to protect children, young people and vulnerable adults from harm. We work collaboratively with local authorities, police and safeguarding partners as required.

The Designated Midwife for Safeguarding will support Safeguarding Adult Reviews; Child Safeguarding Practice Reviews; Domestic Homicide Reviews; Channel Panel and Prevent/Contest boards as required throughout the reporting year.

Any learning identified from these reviews which is specific and relevant to the service is communicated as appropriate and quality improvements are implemented.

6. NUPAS Safeguarding Activity 2023/2024

A notable highlight of the past year has been increased activity which has consequently led to a higher number of disclosures. This demonstrates the growing trust our patients place in our services and the effectiveness of our efforts to create a safe environment where individuals feel empowered to disclose their vulnerabilities and safeguarding issues.

Data collected for 2023-2024 demonstrate that 40091 patients completed consultations with NUPAS and 100% of our patients received a safeguarding assessment. Of this number it was identified or disclosed 15-20% had a level of historic or current safeguarding concern which, as audits evidence, were addressed appropriately, whether this be signposting or requiring a referral to the local authority or police. This number is in line with the national average.

The average number of monthly external safeguarding referrals based on the last 6 months data is 13, which includes referrals to, in descending order, local Childrens' Social Care, local Safeguarding Midwifery Team, patients' GP and Police.

The most common reason for external referral is current domestic abuse followed by patients whose children have been removed from their care where information disclosed requires sharing.

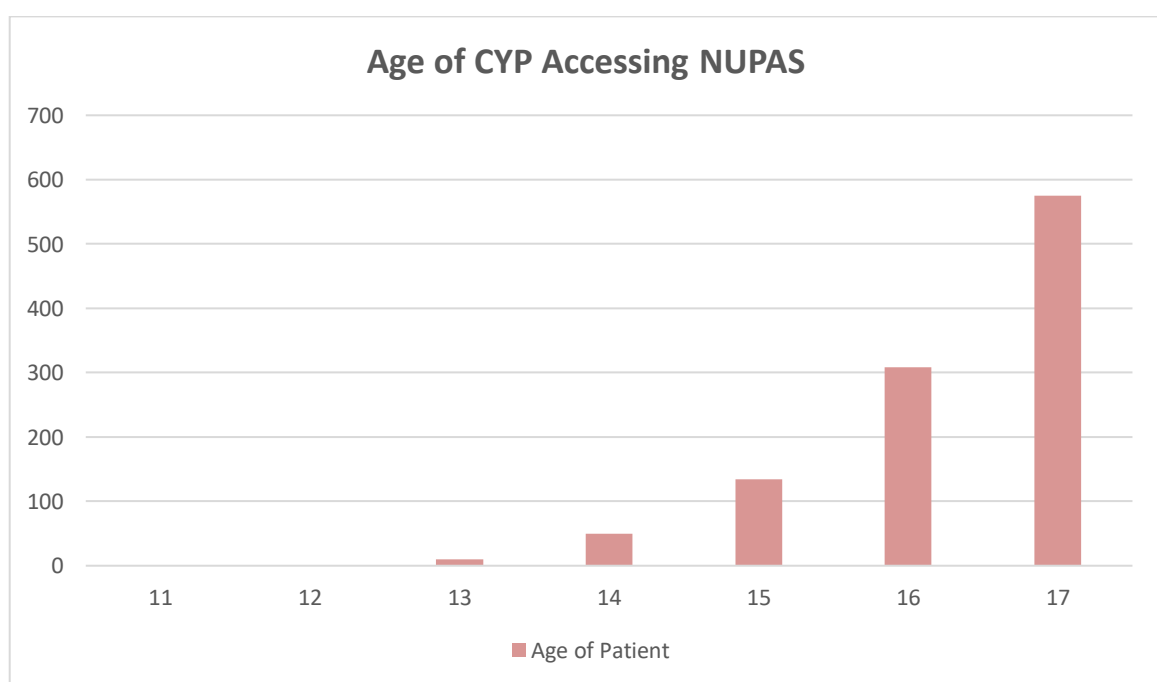
Safeguarding Under 18s

3.4% patients accessing NUPAS in 23/24 were under 18 years old which is line with the

national average.

16 and 17 year olds are offered a face to face appointment however in the absence of any safeguarding concerns can choose the telemedicine service as long as they have a responsible adult to support them. In line with the Royal College of Paediatrics and Child Health (RCPCH) guidance NUPAS sees all under-16-year-olds face to face in order to ensure safeguarding is robustly risk assessed.

Activity type	Total
Number of Consultations	40091
Number of procedures	30934
Number of under 18 year olds	1079

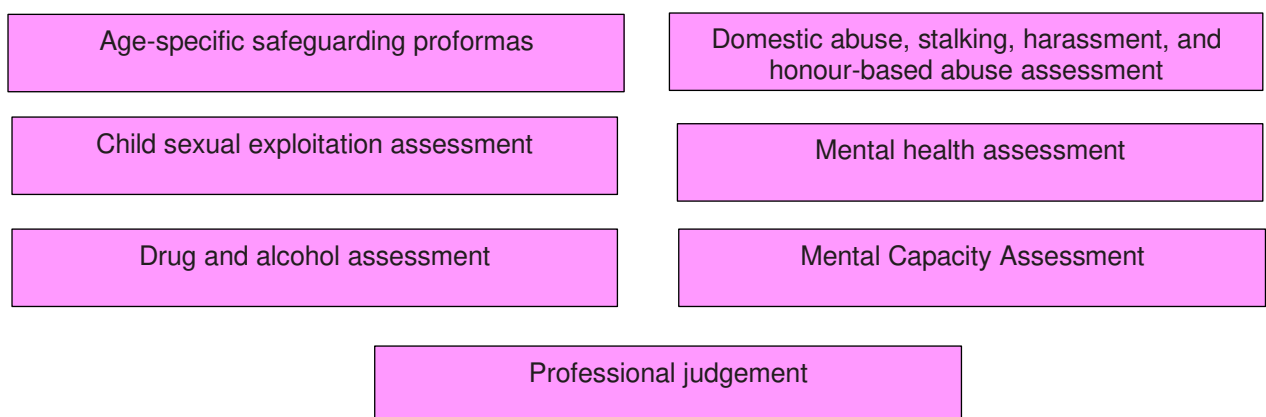


In this reporting period NUPAS was contacted by 3 under 13 year olds. Audits and reviews demonstrate that appropriate safeguarding and onward referral for NHS paediatric care, as per organisational policy, was actioned. The highest demographic of under 18s accessing care was 17 years old (575).

Going forward safeguarding data and activities will be reported quarterly into the Patient Safety & Risk Oversight Committee and will be reported up as per the governance structure. Identified risks and quality improvements are reported into Patient Safety & Risk Oversight Committee for oversight.

Safeguarding Risk Assessments

In safeguarding, evidence of clear risk assessment and decision-making is vital. Where safeguarding concerns are identified, the following internal tools are utilised to obtain further information:



All staff are made aware of their responsibilities in relation to safeguarding and supporting documentation within advertised job descriptions and at induction. We aim to provide a

holistic response to vulnerable patients accessing our services by preventing harm, empowering individuals, and acting proportionately to disclosures.

Domestic Abuse

The most frequently disclosed safeguarding issue within NUPAS safeguarding assessments is domestic abuse.

The cross-government definition of domestic violence and abuse is:

Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but not limited to:

- *Psychological*
- *Physical*
- *Sexual*
- *Financial*
- *Emotional*

The definition includes honour-based abuse, female genital mutilation and forced marriage and it is clear that victims are not confined to one gender, religion or ethnic group.

The Domestic Abuse Act 2021 sees children under 18 as victims of domestic abuse where they see, hear or experience the effect of domestic abuse. NUPAS Domestic Abuse Policy has been updated to reflect the changes in the Domestic Abuse Act 2021 and to remind staff that domestic abuse occurs across all genders, identities and sexuality.

NUPAS utilises the SafeLives Risk Indicator Checklist (RIC) tool when current domestic abuse is identified and will contribute to the Multi Agency Risk Assessment Conference (MARAC) as required.

Safeguarding audits are undertaken to provide assurance that domestic abuse is considered and referrals are made where safeguarding concerns exist.

Safeguarding Support

The Designated Midwife for Safeguarding Adults & Children is responsible for:

-  Ensuring that there are systems and processes in place including the development of policies, procedures and guidance/protocols that are compliant with primary legislation, national, regional and local government strategies relating to safeguarding children and adults;
-  Providing evidence of safeguarding policies for service specifications, tenders and contracts;
-  Delivering face to face Level 3 safeguarding training to all patient-facing staff as per the intercollegiate guidance;
-  Monitoring staff compliance with safeguarding training in conjunction with HR;
-  Providing quarterly Safeguarding Supervision;
-  Providing effective leadership and comprehensive advice to all NUPAS staff in relation to safeguarding;
-  Is the Lead for Managing Safeguarding Allegations Against Staff (or Lead for Persons in a Position of Trust);
-  Is the MCA Lead;
-  Is the Prevent Lead.

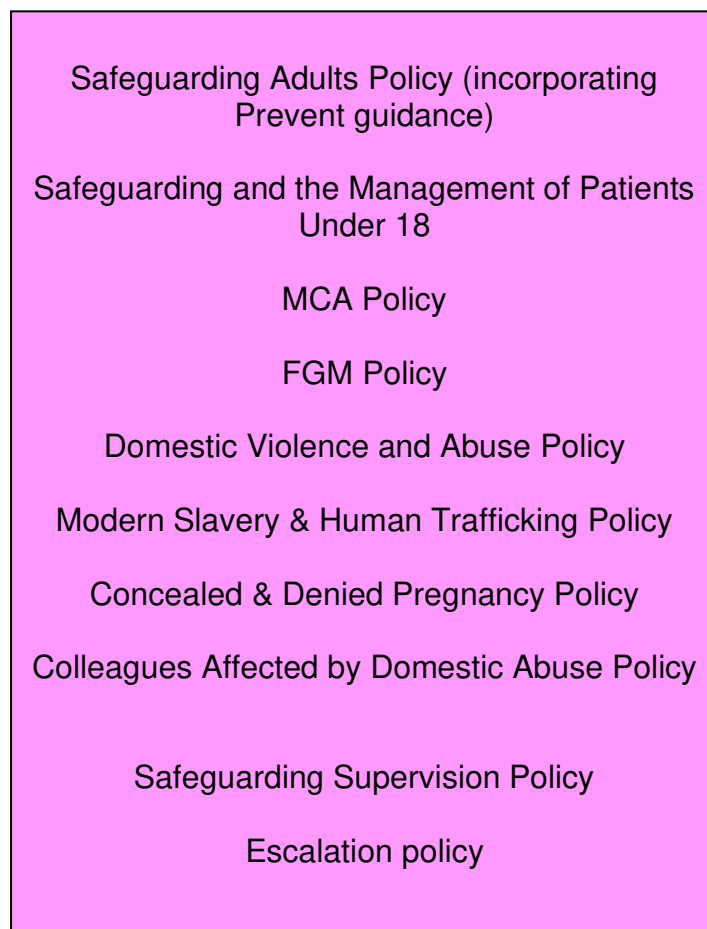
Safeguarding Policies

To ensure a strong focus on safeguarding all patients accessing our services, NUPAS have a suite of quality-assured policies for the safeguarding of adults and children, aligned to statutory guidance and legislation as defined in *Working Together to Safeguard Children 2023* and in the Care and Support statutory guidance issued under the *Care Act 2014*. These set out our lines of intervention and clear referral pathways and are supported by safeguarding training and supervision for all colleagues.

All NUPAS safeguarding policies contain process guidance, escalation flowcharts, and assessment proformas where relevant.

They are easily accessible to all colleagues via our Intranet, and staff follow these to ensure we provide safe, consistent, high-quality care for all our patients.

In 2024 NUPAS will continue to review and update our safeguarding guidance regularly in line with national and local mandates and in response to incidents that may arise within the organisation.



Safeguarding Training Compliance

NUPAS has a training needs analysis (TNA) in place which is based on the Intercollegiate Documents, Safeguarding Children and Young People: Roles and Competencies for Health Care Staff Fourth edition (2019) and Adult Safeguarding Roles and Competencies for Health Staff First edition: August (2018). The TNA outlines the levels of training staff require to be compliant and frequency of training. Staff are required to be fully compliant within 4 months of recruitment.

The training plan incorporates Safeguarding Children & Adults, Domestic Abuse, FGM, CSE, MCA and Prevent training. The aim of the training is to support effective safeguarding

practice. There are a variety of training opportunities including in-house face-to-face, webinars, e-learning and external training opportunities.

Level 1 and 2 are completed via an accredited e-learning platform – E-Learning for Health. Level 3 Safeguarding training is delivered face-to-face to all patient-facing staff by the Designated Midwife for Safeguarding.

Compliance is monitored by Human Resources, Designated Midwife for Safeguarding and Regional Managers. Reports are provided at the quarterly Safeguarding Team Meeting and compliance is over 90% across the organisation.

The Safeguarding Adult Boards and Safeguarding Children's Partnerships also provide multi-agency training which can be accessed by NUPAS staff.

Feedback from internal Level 3 Safeguarding training is gathered via an evaluation form provided to attendees. The feedback is used for quality improvements.

Recent feedback received from delegates who attended the Level 3 safeguarding training has proved very positive:

Thank you SO MUCH for the clarification. You are a great teacher!

I appreciate you for taking the time to answer my follow - up questions. I am much more comfortable with the SG issues now.

*Fantastic info, great use of case studies
Thought provoking and informative !*

*I needed this refresher.
I will seek advice from the SG Team*

I will take this learning into practice.

Safeguarding Supervision

Safeguarding supervision provides the opportunity for learning and reflective discussion and promotes professional curiosity. It provides protected time to think, explain and understand safeguarding concerns, help practitioners to cope with the emotional demands of the job and help workers identify unknown issues or offer a new view on complex issues.

NUPAS is committed to embedding a culture of Safeguarding Supervision. Supervision is provided quarterly by the Designated Midwife for Safeguarding Adults & Children and ad hoc by the regional safeguarding leads.

As part of NUPAS Safeguarding Strategy we plan to invite professionals from external

agencies to attend supervision sessions to talk about topics such as domestic abuse and exploitation. The hope is that clinicians will be able to use the knowledge and resources shared within the course of their work and safeguarding assessments.

Safeguarding practice audit

The Designated Midwife for Safeguarding completes a monthly safeguarding practice audit, the results of which are fed up via the Governance structure for assurance.

NUPAS completes and audits safeguarding risk assessments, which are completed for all patients accessing abortion treatment, to ensure safeguarding is assessed appropriately and enables a robust review to ensure case management escalation takes place where required.

Key audit findings for the previous year has identified that safeguarding processes are well embedded across the organisation and 100% of patients received a robust safeguarding assessment. Mean average of audit results reported is 93.75%.

The current safeguarding assessment template has been reviewed and divided into two separate assessments which will be more relevant to adults and under 18s, the function of the safeguarding audit will increase to reflect the change and areas for improvement will be identified as auditing continues.

Currently any gaps or areas for improvement and learning identified with regards to our referral completion processes are addressed via our quality improvement processes and appropriate action plans and training are provided.

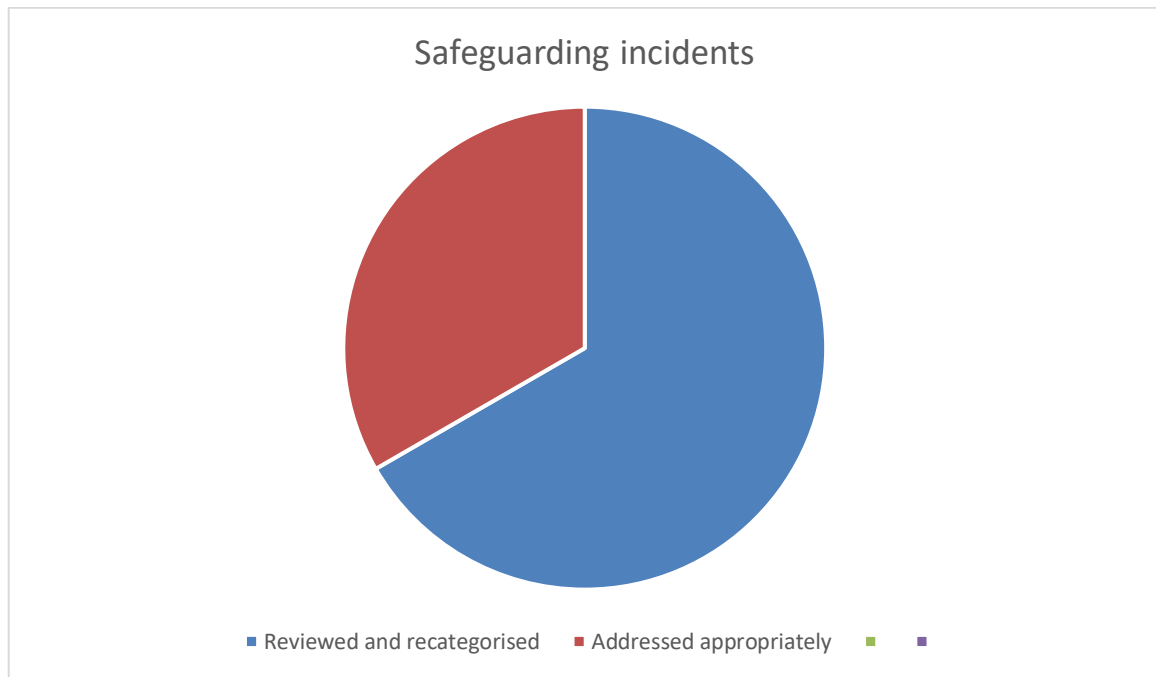
The audit is completed monthly and results are fed up to the Head of Nursing and reported into the Senior Leadership Team meeting for assurance.

Our audit process ensures we identify any learning and improvement measures with regard to our referral completion processes and identifies any gaps or areas for improvement.

Safeguarding Incident Reporting Data

NUPAS encourages all colleagues to raise concerns, whether this be in relation to a patient safety incident; a safeguarding incident or about any concerning behaviour in the workplace. All safeguarding incidents are reported on the internal incident reporting system (RADAR). The incidents are reviewed and screened by the Quality Team for appropriateness and any identified areas for improvement are communicated to staff. This supports staff in their decision-making to consider any safeguarding concerns and to make the appropriate external safeguarding referrals.

All submitted safeguarding incidents are screened by the Designated Midwife for Safeguarding Adults & Children for appropriateness; any safeguarding incidents which are not considered to be suitably addressed are reviewed internally and escalated as required.



7. Learning from External Reviews

The Designated Midwife for Safeguarding Adults and Children accesses various resource groups in order to remain abreast of emerging topics and themes and awareness of new guidance and legislation, these include:

- NSPCC CASPAR current awareness newsletter for practice, policy and research
- IHPN Safeguarding Forum
- NHSE Safeguarding Adults National Network (SANN)
- National Maternity Safeguarding Network
- West Yorkshire Anti-Slavery Partnership VRN meetings
- Quarterly meetings with other abortion providers Safeguarding Leads

NUPAS will participate in external reviews, such as DHR, SAR and CSPR where required and learning from these reviews - which includes our own single agency learning and wider lessons - is important to develop practice and to reduce the risk of similar issues arising.

Emerging themes are considered and as a result policies, guidelines and training are updated accordingly.

Assurance that learning has been embedded into practice is key to providing evidence and this is achieved by audits related to specific areas of practice.

There have been no identified themes emerging from national reviews that were relevant to abortion services.

8. NUPAS Safeguarding Improvement Achievements 23/24

NUPAS safeguarding assessments have been restructured into age-specific templates which will help us to avoid duplication and aid in robust decision-making.

All new starters will complete training 'passports' before working independently to ensure safe and consistent approaches to patient care and are being implemented organisationally.

This includes the implementation of a Clinical Passport for Safeguarding Practice. Regular audits are currently completed however additional auditing will be undertaken to ensure safeguarding practice standards and quality remain high across the organisation.

Level 1 training is delivered by the Designated Midwife for Safeguarding to all Patient Booking Line and Contact Centre staff in order to ensure they are able to recognise and respond appropriately to identified safeguarding concerns.

Use of an annual Safeguarding Health Outcomes Framework / Section 11 Audit in order

to internally audit our own safeguarding processes and data.

9. Digital Transformation

The Child Protection Information Sharing (CP-IS) programme links the IT systems used across health and social care to share basic information to securely support children's well-being.

CP-IS is endorsed by CQC and is included in the key lines of enquiry during CQC inspections. CP-IS has been in use across emergency and unplanned care since 2014, supporting the safeguarding of children when they present in these care settings.

NUPAS has been in talks with NHSE&I and our NHS Spine providers since 2021 with regards to the practicalities/possibility of CP-IS being extended to abortion providers (and sexual health services). We have very recently been advised this access is in the process of being granted and will advance our safeguarding capabilities using a balanced approach with robust justification of use.

10. Quality Improvements and assurances planned for the coming year

- CP-IS (Child Protection Information System) (as above)
- Safeguarding Strategy
- Identify a system to accurately report numbers of NUPAS external referrals
- Implement separate Safeguarding assessment templates and communicate to all staff
- Recruit and embed a Named Doctor for Safeguarding
- Identify a deputy to the Designated Midwife for Safeguarding
- Invite outside speakers to supervision / STM to compliment current training
- Review themes from national reviews (CSPRs, SARs, DHRs) to ensure learning has occurred

11. Patient Stories

NUPAS received a call from a GP who had a pregnant 12 year old child in their surgery. The GP was unsure of the statutory processes expected when a child under 13 presents as pregnant so contacted NUPAS for advice.

A NUPAS midwife spoke to the patient and invited her in to her nearest clinic the following day to complete a robust clinical consultation and ultrasound scan to confirm pregnancy. The patient attended with her mum where non-judgemental, compassionate and patient-centred care was demonstrated to encourage engagement from the patient.

Fraser and Gillick competency was assessed and the additional safeguarding tool 'Spotting the Signs' was utilised to further assess potential safeguarding risks with regards to the circumstances of the pregnancy. There were no other safeguarding risks identified from the assessments completed or expressed by the patient or her mum.

The patient was referred to the NHS for paediatric care as per NUPAS policies and appropriate referrals were submitted to the local childrens social care and police as per policy and the Pan Lancashire child protection procedures document (section 5.41 Sexually Active Young People Under the Age of 18). Rationale for sharing of information was discussed with the patient and her mum as per best practice, both were happy for the information to be shared.

All appropriate advice and contact details were provided to the patient and she was encouraged to contact NUPAS if she had any questions or needed any further advice.

The assessment and actions were screened by the Designated Midwife for Safeguarding Adults and Children; screening determined all appropriate actions were taken and good practice was demonstrated by the clinician involved.

Identified Learning Opportunity

A missed opportunity to safeguard a patient was identified and prompted a review of our current safeguarding training provision. All Patient Booking Line and Contact Centre staff now receive Level 1 safeguarding training as a webinar recorded by the Designated Midwife for Safeguarding. Staff must acknowledge that they have watched and understand the webinar via our reportable RADAR incident reporting system.

The rationale for the learning webinar is that non-patient facing staff can recognise and respond to potential safeguarding concerns ensuring that safeguarding is embedded at every level of contact.

Thankyou for taking the time to read our Annual Safeguarding Report. If you have any comments or suggestions please email jo.slater@nupas.co.uk.

