

www.enfield.gov.uk/safeguardingenfield









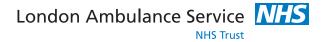


Here are some of the organisations working to keep children, young people and adults at risk safe in Enfield.







































We all have a role to play to help keep children, young people at adults who may be at risk, safe. If you have concerns, please contact us and we can act to stop abuse.

## Please talk to us

Safeguarding children, young people and adults at risk is everyone's responsibility. As someone who might live, work or study in Enfield you have a role too. If you are worried about someone or yourself, please talk to us. You can get help in any of these ways.

#### Children and young people

If you or the person you are concerned about is under 18 (a child or young person):

- Ring the Children Multi-Agency Safeguarding Hub (MASH) Team on 020 8379 5555, Monday to Friday 9am-5pm.
- Call the emergency duty team on **020 8379** 1000 at night and weekends, and tell them what is happening.
- For people who work with children and young people, please make your referral using the Children Portal: www.enfield.gov.uk/childrensportal
- You can email at: ChildrensMash@enfield.gov.uk
- In an emergency such as when someone is being hurt or shut out of their home – ring the police on 999. You can also ring ChildLine on **0800 1111** or visit the ChildLine website: www.childline.org.uk

If you don't want to talk to someone you don't know, you can ask an adult that you trust, like a teacher or youth worker or even a friend, to make the phone call for you. When people are working with children they have to follow set procedures, but they will explain to you what they will do and should be able to support you through the process.

#### **ChildLine**

ChildLine have launched the 'For Me' app - the first app to provide counselling for young people via smartphone and other mobile devices. For more information and to download the app for free, go to:

www.childline.org.uk/toolbox/for-me

#### **Adults**

If you or the person you are concerned about is over 18 (an adult at risk) you can call anonymously on the Adult Abuse Line: 020 8379 5212 (Textphone: 18001 020 8379 5212). In an emergency always call 999.

There is also helpful information on the Safeguarding Enfield website. Go to: www.enfield.gov.uk/safeguardingenfield

#### For all Enfield residents

#### Domestic Abuse Freephone helpline

If you have experienced or are currently experiencing being made to feel unsafe by someone close to you, this is domestic abuse. Domestic abuse is not okay and is a crime. There is a specialist team to ensure no one is turned away and support is there for anyone in need. call us on 0800 923 9009, Monday to Friday 9am-5pm. Email us at: callusDAH@enfield.gov.uk.

We are here to help you.

#### Modern Slavery Helpline

Modern Slavery is a crime that is hidden from plain sight but, occurs everywhere around us. Modern slavery is happening right here in Enfield and it needs to be stopped. An advice line is available to provide information and support for those that have any concerns or general questions regarding modern slavery. If you would like to discuss your concerns please contact us on 020 3821 1763, Monday to Friday 10am-2pm, or you can email us at: ModernSlavery@enfield.gov.uk

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# Our vision:

"is for a community where adults at risk, children and young people can live free from abuse and harm; a place that does not tolerate abuse; where we all work together to stop abuse happening at all, and where we all know what to do if it does take place."

## Foreword from the Chair

As the Independent Chair of the Enfield Safeguarding Adults Board (SAB) and the Scrutineer of the Safeguarding Children's Partnership (SCP) I am pleased to introduce the 2019-20 Annual Report of the joint partnership activities which contribute to keeping Enfield's communities safe.

Safeguarding is 'everyone's business' and if you are worried about a child, family, young person or adult at risk, please speak up using the contact information in this report. We can help.

Put simply, my role is to make sure that the safeguarding arrangements for adults and children are working as well as they should. When problems are identified it's important that the partners discuss these together and come up with a solution if at all possible. As this report has been prepared, whilst all of the recent activities have been on the COVID-19 pandemic, all bar one week of this report's focus predated COVID-19 related activities.

Across the Children's Partnership, this year saw the new arrangements introduced and approved in previous legislation, continue to evolve. The three statutory partners, (Metropolitan Police, Clinical Commissioning Group in Health and the Local Authority) all now share responsibility for children's safeguarding. This is a significant cultural change, previously the default position

had been children's social care were the main responsible authority. The wider partnership network involves schools, early years, colleges, hospitals, mental health groups, voluntary groups, the national probation service and the community rehabilitation company. Communications across all of these groups is vital, and this is an area that we want and need to improve upon. Regular newsletters, and a relaunched website are both important to enable the significant numbers of staff across the partnerships to stay up-to-date with developments and learn from each other.

A new Executive Group has met at two monthly intervals. Various partnership groups led on specific activities (such as exploitation, case learning, child deaths, community awareness, private fostering, and a police-led focus on insights and data analysis). This report outlines the progress made. A new and exciting development has involved 'safeguarding ambassadors' who are a group of young people who are acting as critical friends of the safeguarding arrangements.

An increasing amount of 'serious youth violence' across the Borough is of concern. Poverty and housing pressures, as well as health inequalities have all been identified as factors that need active partnership focus. Exploitation of children

and County Lines activities are regularly looked at with community safety colleagues. Whilst the partnership continues to strengthen its joint work, it has to be acknowledged that the existing resources available are stretched. The Business Unit is constantly examining how the joint partnership resource can be best used.

The Safeguarding Adults Board meets at three monthly intervals. Between these formal meetings, adult case reviews are being undertaken, as well as case audits. Various themed areas, such as safeguarding and housing providers, working with domestic abuse, addictions and mental health, hoarding and self-neglect, adults with learning disabilities and the newly identified threats of modern slavery all lead to a rich and demanding landscape of concerns. The multi-agency partnership work focuses on reducing these risks and vulnerabilities.

Community Awareness across the adult sector is assisted by two active and involved lay members (Irene Richards and Gill Hawken) who usefully prod the system at regular intervals with challenging questions. Enfield has a large number of care homes and this involves regular dialogue with the Care Quality Commission (CQC) and inspection outcomes are frequently aired and focused on.

Keeping children, young people and adults safe from harm requires highly skilled and well motivated staff. I want to thank all the staff across the variety of partnerships in both children's and adult's safeguarding who contribute on a daily basis to what is an extremely challenging area of work. Well done and a huge Thank You. No system is without fault and when improvements are needed there is an appetite for serious reflection and learning.

It would be an omission not to mention the recent challenging work that has taken place across Enfield during the COVID period. Next year's report will cover this in more detail, although an early appreciation is due. Enfield Stands Together an initiative involving community volunteers, health services, the local authority, to name just a few, made sure that residents had a central point of contact and advice and assistance was available to those in need.

The Safeguarding Business Unit hosted by Enfield Local Authority is the central engine that makes sure all the required activities and meetings, are convened, coordinated, recorded and organised. Maintaining contact and responding across so many organisations definitely brings its challenges. Particular thanks are due to Lisa Tait, Licia Sinnott, Julie Watson and Bharat Ayer.

Finally, I want to encourage all of you readers to let us know your thoughts. Tell us what you think, what are we doing well, what do we need to improve on, how else can we communicate better across all the different communities. Whilst I am keen for you to find this report informative, future versions could be improved upon with your ideas and input.

Take a look at our twitter feed @enfieldsafeguarding and our website: www.enfield.gov.uk/safeguardingenfield

Please email us at:

SafeguardingEnfield@enfield.gov.uk

#### **Geraldine Gavin**

Independent Chair of the Safeguarding Adults Board, and Independent Scrutineer of the Safeguarding Children Arrangements





Safeguarding Adults Board members, June 2019



Safeguarding Children Partnership members, June 2019

## Introduction

This report presents the work that the Enfield Safeguarding Adults Board, the Safeguarding Children's Partnership, and the organisations that are part of them have done to keep children, young people and adults at risk of abuse, safe.

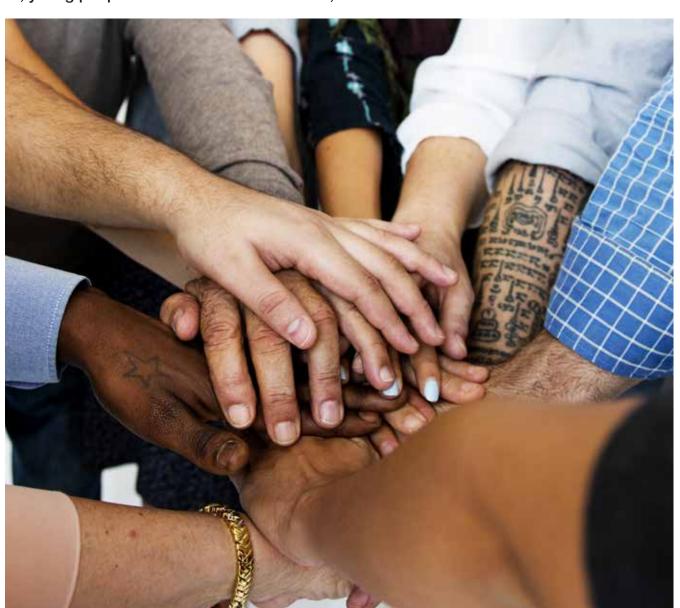
The report covers the period 1st April 2019 to 31st March 2020. The style and presentation of this report has been developed by Enfield Safeguarding Adults Board's Service User, Carer and Patient group.

#### Care Act 2014 (Adults)

The Care Act requires the Board to report on its activities in the past financial year, and its plans for the coming year to keep people who may be at risk of abuse or harm, safe.

# Working Together 2018 (Children)

The statutory guidance says we must publish a report at least once in every 12-month period. It must set out what we have done as a result of the arrangements, including on child safeguarding practice reviews. The report should also include evidence of the impact of the work of the safeguarding partners and relevant agencies.



## Safeguarding in Enfield

Safeguarding is the work done to protect children, young people and adults who are, or may be, at risk of abuse or harm.

Safeguarding is everyone's business. This means you, your friends and families, your neighbours, as well as the people who work for organisations like Enfield Council, the Police, the NHS and others, have important roles to play to help keep people safe in our community.

#### Safeguarding work in Enfield is brought together in two ways:

- 1. the Safeguarding Adults Board, and
- 2. the Safeguarding Children's Partnership.



These arrangements bring together organisations that work in Enfield to make sure there are good ways of working to keep safe children, young people and adults at risk.

The Safeguarding Adults Strategy 2018-23 outlines our work and priorities for Adults at risk; and the Safeguarding Children Arrangement document (2019) details how partnership work for Safeguarding Children is organised. Many of the Activity Groups (please see page 30) work for both Children's and Adults Safeguarding. Both of these documents can be found at: www.enfield.gov.uk/safeguardingenfield

The work of the Safeguarding Partnership is organised into one of four areas: Prevent abuse, Protect those at risk, Learn from Experience, and, Improve Services.

#### Care Act 2014 (Adults)

The Enfield Safeguarding Adults Board is a statutory board formed under the Care Act 2014. The Local authority, the Police and the NHS are statutory members of the Board.

#### **Working Together 2018** (Children)

The Statutory Safeguarding Partners are the Local Authority, the Police, and the Clinical Commissioning Group.

Enfield's arrangements were agreed and signed by the Safeguarding Partners on 5th June 2019. The arrangements were in place on the 29th September and the Department of Education were notified.

#### Children Act 2004 and the **Children and Social Work Act** 2017 (Children)

The Children's Act 2004 and the Children and Social Work Act 2017, state the statutory duties for local authorities and safeguarding partners to work together to safeguard and promote the welfare of children.

# Summary of what we did in 2019-20

This section presents a summary of the main pieces of work that the Enfield Safeguarding Partnership completed or oversaw in 2019-20. This is followed by information presenting work in each of the four priority areas.

# Covid-19 response (PROTECT)



Across the Partnership all of our agencies have been affected by the pandemic. As part of our Partner updates for this report we have asked partners to provide information about their response to the pandemic.

This has included:

- Increased domestic abuse and neglect related cases into acute hospitals;
- Daily calls to care homes
- Thousands of welfare calls, include 2,000 from the LD service

See Appendix B for more detailed information.

# Modern Slavery (PROTECT)



Enfield is one of the first areas in London to have a dedicated Modern Slavery Team comprising of Local Authority and Police staff. The multi-agency team has been raising awareness and responding to intelligence.

National Referral Mechanism (NRM) training has been carried out by the Salvation Army for all our Modern Slavery Champions (who sit in a number of Local authority teams: children and adult social services, finance, housing, mental health and community safety) and support to facilitate awareness training amongst partnership members: in NMDX A&E, CCG and GPs. Awareness raising training has been given to council workers, care providers service providers, health clinics and schools.

A Modern Slavery conference took place in May 2019. This was funded by the Enfield CCG, and organised by the Enfield Council. This included presentations from the Children's Society, Police and Salvation Army. Over 100 delegates from across the Partnership attended.

The multi-agency team has been raising awareness and responding to intelligence.

# **Domestic Abuse** (PROTECT)



Over the course of the 2019-20 financial year, we've had a strong partnership focus on

strengthening our response to domestic abuse, leading to the launch of the hub on Friday 1st May 2020. We sent out information regarding the free-phone helpline (0800 923 9009) and bespoke email address. Information about the multi-agency team was also sent to over 10,000 people, and included in the second Safeguarding Newsletter.

# Female Genital Mutilation (FGM) (PREVENT)



Our ongoing work around FGM relates to both protecting adults who have been affected by FGM (e.g. before migration to the UK) and children living in Enfield at risk of FGM. Our FGM steering group works with the aim of increasing awareness and improving responses across the Partnership.

# Centre of Excellence (PROTECT)



The Enfield Centre of Excellence (ECOE) works with social workers at all levels, as well as others involved in face to face practice, to

identify opportunities to improve the impact of all our work with children, young people and vulnerable adults, as well as those that care for them. Team members have a continued focus on best practice, applying the strength-based model across the partnership, keeping children at the centre of everything we do and making every contact count. Two practice weeks were organised - one on Child Sexual Abuse between 10th and 14th June, and a second on Neglect between 18th and 22nd November. culminating in a Social Work Conference on Neglect on the 22nd November. The ECOE website is being developed and will be launched in 2020-21.

#### **New Arrangements for** Children (IMPROVE)



During the year we agreed and started working on the new arrangements for Safeguarding Children. This was agreed by the partners and launched in June 2019. As required by law, we were working to these arrangements by September 2019, and informed the Department of Education.

#### **Child Death (LEARN)**



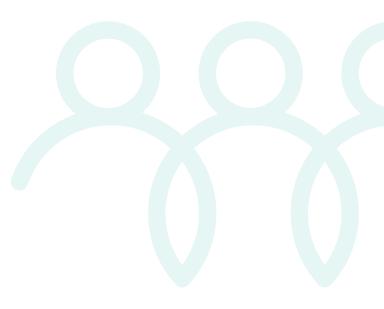
Every child death in Enfield is reviewed, to ensure there is appropriate bereavement support, and to help us understand if there are any patterns or issues that need to be addressed.

Over 2019-20 there were 21 child deaths (death of a person under 18 years of age).

#### Supporting our care providers (IMPROVE)



Our Safeguarding Information Panel ensure that partners effectively share information to identify any risks of harm to those who use services. to prevent any future or additional harm taking place. The Panel can initiate actions such as Provider Concerns, Quality Checker visits, Immigration Enforcement visits and London Fire Brigade visits.



## Prevent abuse

In this section we present the work we've done to prevent abuse from happening. This can include:

- raising awareness about risks so people can stay safe;
- making sure we've identified the right priorities (consultations); and,
- continue to work in ways that can prevent abuse from happening.

#### Early Help for children and families

Early help, also known as early intervention, is support given to a family when a problem first emerges. It can be provided at any stage in a child or young person's life.

#### **Early Help Family Hub**

Between 01 April 2019 and 31 March 2020, a total of 1,652 referral assessments were accepted by the Early Help Family Hub. This represents a 33% increase on the previous vear and a 70% increase on combined referrals to the individual services comprising the Early Help Family Hub. This year the Early Help triage has been embedded into MASH

You can raise concerns about children or make Early Help referrals through the Children's Portal (www.enfield.gov.uk/ChildrensPortal).

#### Prevention of youth crime and serious vouth violence

Enfield Youth Offending Service continues to see a reduction of first-time entrants. In the financial year 2019-20 there were 87 first time entrants to youth justice, which represents a reduction of 3.3% from previous year. This is attributed to the broader Early Help offer alongside of the Triage support provided by the Youth Offending Service, which is an additional intervention delivered within the scope of our Out of Court disposals work.

Enfield Summer University in 2019 has significantly enhanced the local Youth Offer and provided 67 diverse learning courses and positive activities to prevent 545 young people from boredom and engagement in risky behaviour.

Building on the local Youth Offer of preventative programmes, Enfield Council has been successful in attracting funding of £1.35 million from the Young Londoner's fund for three years starting in 2020. This will enable us to provide a programme of diverse projects delivered in partnership with local third sector providers. The aim of the programme will be to prevent youth crime and serious youth violence by targeting young people aged 10-21 through the provision of support with emotional and physical well-being, employability and access

to information, advice and guidance to make positive and safe life choices.

#### **School Exclusions**

Our schools and support services such as the Secondary Behaviour Support Service and the SWERL Team (Strengthening Wellbeing, Emotional health, Relationships and Readiness for Learning) have worked in partnership to develop alternatives to exclusions for Enfield's young people. We are pleased to report that data from the Department of Education demonstrates a significant reduction in the number of permanent exclusions from our schools, and we now have the 15th lowest permanent exclusion rate in England. For the second year running, there were no primary permanent exclusions from Enfield primary schools.

We have also made great progress in relation to reducing the number of fixed term exclusions and the Local Authority will continue to work together with our schools as we recognise the need to reduce this further

#### **Reducing Parental Conflict**

Conflict between parents is a normal part of relationships. However, there is a large body of evidence that shows that parental conflict puts children's mental health and long-term outcomes at risk when it is frequent, intense and poorly resolved. These destructive conflict behaviours include aggression, non-verbal conflict, lack of respect and emotional control and in their most extreme form, domestic abuse.

The risk of conflict between parents is higher at crucial transition points in family life, such as becoming pregnant, having a baby, starting or changing school, or separation and divorce. However, relationship difficulties are often seen as a private matter and couples tend to only seek help when they are in crisis.

In Enfield, we are working with the Department of Work and Pensions, and the Early Intervention Foundation. The Change and Challenge Service with the Safeguarding Partnership Business Unit have introduced RPC training courses, to frontline practitioners and managers, across the Safeguarding Children partnership.

In 2020-21, e-learning for 200 members of staff have been commissioned and are being delivered.

#### **Joint Services for Disabled Children**

The Joint Service for Disabled Children is comprised of the specialist social work service,

preschool support home visiting service, early years keyworker service and a specialist short breaks and family support service.

Services are delivered in house 7 days per week at Cheviots, specialist play and home care providers are commissioned, and families can also access a personal budget to arrange the support that best meets their child and family's needs.

The services and support are designed to provide fun activities for the child, an opportunity to meet with their friends or be supported to access community activities, and provide a break for the parent from their caring responsibilities to support family life.

In 2019-20 there were 155 referrals to the service for preschool children and 234 referrals for children over 3 years for short breaks and family support.

In 2019-20 there were 625 children receiving short breaks and family support services.

#### **Transforming Care**

We are committed to making sure that children and young people with a learning disability, autism or both have the same opportunities as anyone else.

#### These include:

- getting the support they need to live long and healthy lives
- being treated with the same dignity and respect
- having a home within their community
- being able to develop and maintain relationships and
- getting the support they need to live a healthy, safe and fulfilling life.

To do this we need to ensure that we have excellent services and support available in our community so that children and young people are able to live at home, attend a local school and receive the health care they need.

In Enfield we work closely with parents, colleagues in social care, education, health and housing to make sure that together we are doing everything we can to transform care and support for children and young people in Enfield.

#### **Positive Behaviour Support (PBS)**

All behaviours have a meaning.

Positive Behaviour Support aims to understand what behaviours that challenge tell us ,so that the child's needs can be met in better ways.

#### Prevent abuse

The way the child is supported often has to change to achieve this and this needs to be regularly reviewed by all the people involved.

Positive Behaviour Support is an approach that puts the child at the centre to make systems work for them. We aim to give the right support at the right time so children can thrive to their potential.

We are continuing to train our staff in this approach.

#### **Preventing Abuse in Enfield's Adult Care Providers**

Enfield has 187 CQC registered providers, one of the highest numbers in London. To manage the risks around Quality and Safeguarding we have a Safeguarding Information Panel to ensure that partners can effectively: share information, identify any risks of harm to those who use services, and prevent any future or additional harm taking place.

The Panel can initiate actions such as Provider Concerns, Quality Checker visits, Immigration Enforcement visits and

London Fire Brigade visits. The Panel meets every six weeks. Over 2019-20, the Safeguarding Information Panel, in

addition to information sharing amongst members, received 11 referrals. The following interventions were implemented:

Type of Activity	Number of activities
Provider Concerns Initial meeting held	10
Nurse Assessor visits	9
Immigration enforcement visits	6
Occupational Therapy visits	1
LBE Quality Assurance visits	11
Care Home Assessment Team visits	9
London Fire Bridge safety visits	3
Quality Checker visits	14
Welfare calls/visits to service users and or carers	45
Quality Assurance 'Out of Hours' visits	7

#### Case Study - Adapting practice during COVID-19

A SIP meeting took place on the 28th May using Microsoft Teams and attendees shared new ways of working in view of the COVID-19 restrictions in place which were preventing face to face visits if not deemed to be essential.

The impact that the pandemic was having on all aspects of social care provision and the people requiring support was also discussed. It was clear from safeguarding data that the number of safeguarding concerns raised had significantly decreased and that more creative and subtle surveillance methods would be required to effectively monitor the quality of care being provided by social care providers. The SIP heard that the Strategic Safeguarding team were using 'face time' and video calling to take a virtual look around care homes and observe practices where possible. This, matched with the ability to view samples of recording, reporting and documentation, ensured that Provider Concerns processes were still supporting service improvements that had been identified.

It was recorded at the SIP meeting that 'AK (CQC lead) informed the meeting that feedback about how LBE has responded to the COVID-19 situation has been very positive'. In addition numerous messages of thanks have been received from social care providers for the daily calls and stocks of PPE supplied by the Council, but mostly for the sensitivity and empathy from the LBE staff during the many difficult conversations they have shared.

#### **Private Fostering**

Private fostering is when a child aged under 16 years (or under 18 if disabled) is cared for, on a full-time basis, by an adult who is not their parent or an immediate relative, for a period of 28 days or more. This is a private arrangement made between the parent and the carer. There is a legal requirement to notify Children's Social Care about private fostering arrangements.

Since transferring private fostering to the Fostering Service, there has been a drive to develop partnership working. Raising awareness about private fostering has been an important communication aim for the Safeguarding Children Partnership. Meetings with the Safeguarding Board have been held to discuss raising community awareness. A new leaflet has recently been produced titled "Are you Looking After Someone Else's Child" which was shared and approved by Enfield's Children's Partnership. How to report private fostering arrangements into Children's Care has been included in all our Safeguarding Enfield Newsletters. Six-weekly meetings have been held with consortium partners to share ideas and develop partnership initiatives, e.g. consortium private fostering webpage. Enfield's children portal has been reviewed to encourage referrals from the public.

In 2019-20, 13 new referrals were made to the Fostering Team, making a total of 17 cases (including 4 cases that were transferred when fostering took over). A number of cases were closed as a result of the young people turning 16 years of age, children returning to their parents' care, and students returning to their countries of origin. At the end of 2019-20 there were 4 privately fostered children/young people in Enfield. Historically, nationally and locally, there has been low numbers reported of children and young people in private fostering arrangements which fluctuates throughout the year.

We have an action plan in place for 2020-21 to continue to raise awareness (i.e. through campaigning and distribution of leaflets etc.), however, the COVID-19 outbreak has hindered promotional plans to a certain extent.

#### **Communication improvements**

Numerous developments have taken place over the year to enhance our ability to engage Enfield residents, professionals and volunteers in conversations about safeguarding. We've developed a newsletter which is sent to our partnership, all schools in the borough, all of our care providers and GPs.

We have also developed a new website, working in partnership with our Service User Carer Patient group and our Safeguarding Ambassadors. The new site has better accessibility features, including translation, and is compatible on different devices. Over the coming months the 'Learning Resources' and 'Staying safe' sections will be developed further to include more multi-media content.

#### **Female Genital Mutilation (FGM)**

Our ongoing work around FGM relates to both protecting adults who have been affected by FGM (e.g. before migration to the UK) and children living in Enfield at risk of FGM. The FGM steering group works with the aim of increasing awareness and improving responses across the Partnership and includes Enfield Council, Police, Health and 3rd Sector colleagues. Updates of the work of the group are being provided to the Safeguarding Adults Board and Safeguarding Children's Partnership.

#### Raising awareness in schools about exploitation

During 2019-20 a range of activities were undertaken to raise awareness about child exploitation, including the Child Sexual Exploitation Prevention (CSEP) team delivering 11 presentations across schools. Also supported by Enfield Strategic Partnership, a

#### Prevent abuse

series of immersive drama productions were commissioned that raised awareness around Child Sexual and Criminal exploitation. The plays were offered to Secondary Schools, Pupil Referral Units (PRU) and further education colleges within the Borough, aimed at young people over 12 years of age. The target audience were children from all ethnic backgrounds in the specific year groups 7, 8, 9 and 10 (12 to 16 years of age). Both plays toured in 2019-20 around local schools and the outturns were hugely encouraging. All secondary schools in Enfield, including grantmaintained schools, Academies and Special Schools were offered 2 performances and 14 schools took the offer up, enabling students from Year 7 – year 10 to watch. The 'tour' ran from 1st July – 12th July 2019. Over the 2 weeks both plays were watched by a combined total of 6306 students. As a direct response to the performances a handful of young people shared concerns which were reported to MASH. The County Lines play was also performed at this year's Care leavers conference in November 2019. A further run began in March 2020, however had to be cancelled due to the Covid pandemic.

Comments from pupils and teachers who watched the County Lines:

Really well acted and our kids learnt so much as it was not only entertaining but educational, and I know they will make better choices now!

Spot on, need more of this for year 7&8.

They all really liked the play. The story was credible, and the message was clear.

It was very informative - there was a lot of very relevant information delivered to them through the play in such a short space of time.

Comments from pupils and teachers who watched the Chelsea's story:

Honestly, they watched in such a mature way. They were entertained but also knew when to be quiet and paid attention to the story.

The team were amazing, they answered questions and worked so well with the students.

Very enlightening and disturbing to find out what's going on in some places.

Great portrayal of the difficulties our youth are facing at present times.

In 2019-20 166 young people were identified as either experiencing or being at significant risk of CSE. This figure is slightly higher than the last full year analysis, where 162 young people were identified. This indicates the impact of raising awareness, enables earlier identification of those at risk.

## Protect people at risk

One of the main tasks for the Safeguarding Partnership is to make sure we have excellent responses to concerns. We do this through having clear policies, good training, looking at our data and audits (checks). Here we present our some key policies, talk about our training and present some high-level data.

#### **ADULTS**

#### Covid-19 response

Across the Partnership all of our agencies have been affected by the pandemic. As part of our Partner updates for this report we have asked partners to provide information about their response to the pandemic.

This has included:

- Increased domestic abuse and neglect related cases into acute hospitals:
- Daily calls to care homes
- Thousands of welfare calls, include 2,000 from the LD service

Please see Appendix B for more detailed information.

#### **Modern Slavery**

Enfield is one of the first areas in London to have a dedicated Modern Slavery Team comprising Local Authority and Police staff. The multi-agency team has been raising awareness and responding to intelligence.

National Referral Mechanism (NRM) training has been by the Salvation Army for all our Modern Slavery Champions (who sit in a number of Local authority teams: children and adult social services, finance, housing, mental health and community safety) and support to facilitate awareness training amongst partnership members: in NMDX A&E, CCG and GPs. Awareness raising training has been provided to council workers, care providers service providers, health clinics and schools.

A Modern Slavery conference took place in May 2019. This was funded by the Enfield CCG, and organised by the Enfield Council. Guest speakers included the Childrens Society, Police and Salvation Army. Over 100 delegates from across the Partnership attended.

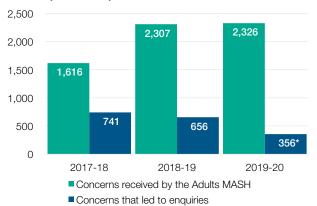
#### Care Act 2014 (Adults)

Safeguarding Adults duties are detailed in Section 42 of the Care Act and in the accompanying Statutory guidance.

Where the following criteria are met for a concern the Local Authority, who is named as the lead agency for safeguarding, must ensure that a Safeguarding Enquiry takes place. The criteria that a concern must meet to require an enquiry are that: it is about a person who is over 18 years of age, with care and support needs, and who is experiencing, or is at risk of, abuse or neglect, and is unable to protect themselves.

#### Protect people at risk

# Adult Multi-Agency Safeguarding Hub (MASH)



\*Only includes Statutory Section 42 (2), 2017-18 and 2018-19 data included both Sect 42 (1) and Sect 42 (2) so was higher.

Since the conception of the Adult MASH, there has been a commitment that all concerns will be responded to. This can include information and advice, sign-posting to other services, assessments for care and support services, or for a social worker to work with the adult to manage the risks of abuse they face.

#### **Hoarding and Self Neglect Policy**

Hoarding disorder and self-neglect are complex and therefore challenging to work with, requiring an effective, coordinated response from all the relevant services and agencies. It is difficult for services and agencies to strike the balance of protecting adults who hoard and self-neglect from harm while respecting their right to self-determination. Hoarding and self-neglect is not somebody having an untidy home or an untidy appearance; it is compulsive and often linked to challenging personal circumstances, social isolation, physical and mental health issues.

To ensure that there is a consistent approach to manage Hoarding and Self-neglect cases a Policy was developed by the Safeguarding Adults Board. The Policy was presented to the Service user, Carer and Patient sub-group and they suggested that alongside the policy for professionals a fact sheet for the Enfield residents should also be produced.

#### **CHILDREN**

#### **Domestic Abuse**

Over the course of the 2019-20 financial year, we've had a strong partnership focus on strengthening our response to domestic abuse, leading to the launch of the hub on Friday 1st May 2020. We sent out information regarding the free-phone helpline (0800 923 9009) and bespoke email address. Information about the multi-agency team was also sent to over 10,000 people, and included in the second Safeguarding Newsletter.

#### **Centre of Excellence**

The Enfield Centre of Excellence (ECOE) is the point of contact for the children workforce where their knowledge and skills, professional development will be supported – to ensure the Children and Family Service deliver the best practice and best outcomes for children and families.

Enfield are piloting the National Assessment and Accreditation System for social workers (NAAS) in 2020-21 as a key component of how child and family social workers will develop skills and knowledge to improve outcomes for children and families. The Centre of Excellence will be responsible for leading the development and implementation of NAAS in Enfield.

We will embed Trauma Informed Practice into our work with families and provide joint training to 200 social workers and police colleagues. Social workers and police officers will become trauma aware and appreciate the relevance of trauma. Social Workers and the police will understand how to change their behaviour and respond to the impact of trauma and avoid responses that contribute to traumatisation. The learning will help Social Workers and the police to build effective relationships that offer safety and the opportunity to build resilience.

Following a Local Learning Review on neglect the ECOE is increasing neglect training in line with the neglect strategy which is under review.

We are also introducing virtual reality headsets into our development and training for social workers to help experience the child's world.

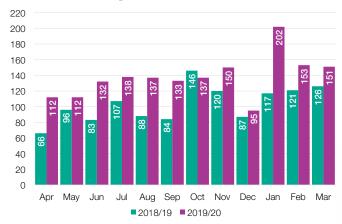
Enfield's first Social Work apprenticeships are starting in September 2020. The apprenticeships will be an exciting opportunity to invest in existing social care staff to provide them with social work training.

#### Safeguarding Children in numbers

In the Summer of 2019, the Children's Portal was launched, aimed at providing a streamlined electronic referral and information system to reduce bureaucracy and simplify processes. The portal puts all information, advice and guidance into one place. Work has been undertaken to develop a professional feedback template within the portal. There has been some challenges around the IT of the portal and partner's use of it. There will be a re-launch in 2020 to increase partner's use of the portal.

Between 1 April 2019 and 31 March 2020, a total of 1.652 referral assessments were accepted by the Early Help Family Hub. This represents a 33% increase on the previous year (as shown below) and a 70% increase on combined referrals to the individual services comprising the Early Help Family Hub in 2017-18 (prior to the joint triaging arrangements put in place in September 2018). This year Early Help triage has been embedded into MASH.

#### Breakdown by month



In 2019-2020, 6.293 MASH contacts progressed to a referral. An increase on the previous year (5,117) 326 strategy meetings/ discussions were held (down 40 from 2018-19). and 1.520 contacts went onto a new Children & Family Assessment.

During the Covid-19 pandemic a dip sample of MASH cases that had been closed were audited in 2020, to understand if there was any impact as a result of the pandemic. The audit showed that overall the decision making was robust and the correct threshold applied.

At the end of the year the Referral and Assessment (R&A) team had 361 children's cases open. The number of children and family assessments completed within 45 days has continued to improve, going from 74.10% last year to 87.4% in 2019-20. There has been permanent investment and additional social workers appointed in the service, ensuring caseloads can be kept at a level that would enable social workers to provide more consistently effective responses to children and families needing help and protection.

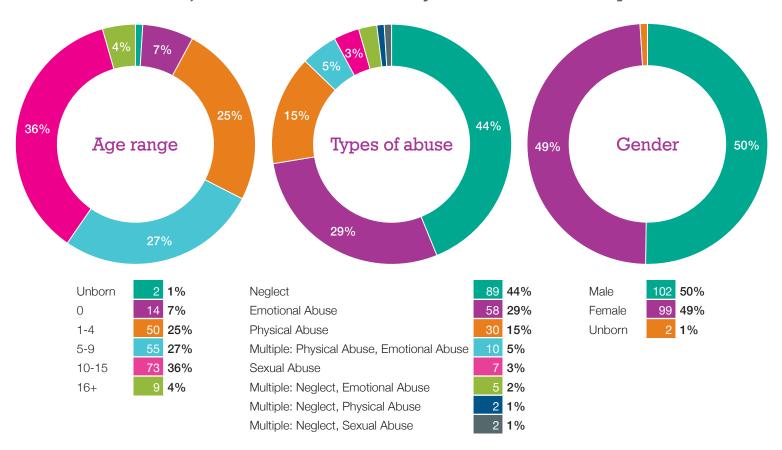


#### Protect people at risk

The need to ensure the consistency of child in need (CiN) plans was identified by Ofsted in 2019. As a response there has been an intensive practice improvement plan in place to improve the quality of practice, assessment and plans for children who are need. To enhance the practice in the service, a new CIN team was established which focuses on working mainly with families where neglect is a primary concern.

A range of audits have been undertaken throughout the year. An audit of CIN plans sampled a selection of cases and found that there had been some improvement thresholds where appropriate, and direct work was clearly written up in case notes, however this was not consistent across all cases. This remains a priority area of focus for the service.

As of 31st March 2020, there were 203 children subject to Child Protection plans



In 2019-2020 there has been an increase in CP Plans under the category of physical abuse since last year, from 29 to 30 (3.45% increase from last year) and a decrease in sexual abuse from 10 to 7 (30% decrease from last year). Neglect continues to be the main reason children and young people become subject to plans. A multi-agency neglect audit was undertaken in 2019. This was a small sample and highlighted the complexities and challenges around neglect and practice.

While improvement around CIN plans continues to be a priority, auditing across the Child Protection and Family Support Service has shown a consistent trend of cases being graded as good.

Significant investment in the service has resulted in a reduction of caseloads which means social workers have more time to focus on quality of work.

Partner agencies are expected to complete pre-conference reports. This remains a priority area for the children's partnership to achieve consistency, transparency with parents and good information sharing prior to and within case conferences.

#### LADO activity (Local Authority **Designated Officer**)

The role of the LADO is set out in the Working Together to Safeguard Children (2018) document. The guidance requires Local Authorities to have an officer or a team of officers to manage and oversee allegations against people who work with children, and that this officer or team are sufficiently qualified and experienced to fulfil this role effectively. It also requires newly appointed officers to be qualified Social Workers.

The total number of new allegations between 1st April 2019 and the 31st March 2020, which met the threshold for formal LADO involvement was 72.

The number of allegations which met the threshold for formal LADO involvement has been increasing over the last 5 years. The increase has been gradual, indicating consistent thresholds have been applied as well as a growing awareness of the role of the LADO, including with professionals, parents, carers and young people.

A crucial part of the LADO role, in addition to managing allegations, is also to offer Consultations to agencies on managing low and medium level concerns, where the threshold for an Allegations against Staff and Volunteers (ASV) Meeting has not been met. Some of these cases refer to conduct issues for staff in all settings and standard of care issues for foster carers. In addition, some cases involve incidents where there have been clear factors that school staff needed to use reasonable force to prevent harm to other children, staff or damage to property (under section 93 of the Education and Inspection Act 2006). It is important to note that in cases where the need for reasonable force is not clear, an ASV Meeting may be held to consider the circumstances and relevant factors as the process safeguards children but also the children's workforce. In 2019-20, there has been 220 recorded Consultations.

#### Children on the edge of care

Most children at the Edge of Care were supported through the FAST team, however some were supported in various teams across the service. The need for consistency in supporting and offering effective interventions was identified, and now significant investment has been agreed to create a specific edge of care service in 2020. The aim of the team will be to improve parent/young people relationships to prevent family breakdown.

#### Protect people at risk

#### Missing Children

There were 196 children reported missing from home or care in the 12-month period covering 2019-20. Of these, 49 children were looked after children, which makes up a quarter of the total of children who went missing.

A debriefing service was set up in the MASH. This provided assurance that children who are missing and not open to children's services were offered a consistent response in line with open cases. Debriefing discussions are shared with the police and, where the young person is known to the youth offending team, a discussion takes place to determine who would be best placed to carry out a return home interview. Children and Young people who go missing now have an opportunity to speak to an independent person about their period of missing and this helps to identify any areas of risk that is then communicated to the allocated social workers.

# Child Sexual & Criminal Exploitation Child Sexual Exploitation Team

The team works directly with young people who have been identified as being at risk of Sexual Exploitation, and works closely with the Police to support victims of exploitation. Some of the work undertaken is awareness raising in

schools and individual work with young people who are vulnerable to exploitation.

There are currently 53 children who have been identified as being vulnerable to exploitation and 19 have been discussed at MACE, which is the multi-agency group for exploitation, both in respect of Sexual Exploitation and those at risk of Criminal Exploitation.

#### **Progress of Children in Care**

Support for Children in Care comes in many formats. All children have a personal education plan to identify the areas where additional support is needed, which is agreed by the school, the Social worker and the Head of the Virtual School. Financial support is provided to the child's school to provide additional support in the agreed areas. In addition, the Looked After Children's Health team undertake annual health assessments in respect of children's health needs, and children have access to child and adolescent mental health support where this is needed.

The Virtual school supports children to reach their academic ability and monitor children's progress throughout the key stages, ensuring that they are ready to learn and able to access the curriculum.

#### **Progress of Care Leavers**

It is important that young people leaving Local Authority Care are encouraged to strive to achieve their potential. There are a number of services which work alongside the team to encourage young people to engage with employment and training opportunities. We have been able to ring fence several apprenticeship opportunities within the Council for Care leavers and are hoping to continue this programme.

A conference was held in October 2019 for Enfield's Young People Leaving Care. 70 young people attended. The Conference was opened by Cllr Rick Jewell, there were presentations from services working with young people as well as a speaker who was herself a Looked After child and has had successful career.

The Care Leavers core offer was launched in January 2019 and the care leavers have been working with officers and have designed a care leavers hub operational from Triangle House.

The Conference will be an undertaken Annually to coincide with Care Leavers week.

## **Training data for 2019-20** (1st April 2019 to 31st March 2020)

Course Name	Course Type	Total Numbers
Adults		
Safeguarding Adults – Awareness	eLearning	234
Modern Slavery and Human Trafficking	eLearning	197
Advanced Assessing Capacity & Best Interest	Seminar	18
BIA Refresher	Seminar	30
DoLs Signatory Training - Legal Update	Seminar	12
Working with older survivors experiencing Domestic and Sexual Abuse	Seminar	20
Making S42 Enquiries	Seminar	12
Mental Capacity Act / Deprivation of Liberty	Seminar	50
Safeguarding – Adult Abuse Awareness	Seminar	58
Self-Neglect and Hoarding	Seminar	11
Personality Disorder	Seminar	15

Course Name	Course Type	Total Numbers
Children		
Basic Child Protection	Seminar	75
Prevent & Radicalisation Workshop	Seminar	9
Hidden Harm & Substance Misuse	Seminar	37
Reducing Parental Conflict Basic Training	Seminar	24
Reducing Parental Conflict for people who work with families training	Seminar	70
Reducing Parental Conflict Course for Trainers	Seminar	12
Reducing Parental Conflict Managers Training	Seminar	36
3rd Sector Training		
Child Protection	Seminar	156
Child Protection (diversity)	Seminar	10
FGM Training	Seminar	5
Impact of Parental Mental Health	Seminar	40
CP Refresher	Seminar	5
Community Child Protection / Safeguarding	Seminar	20

## Learn from experience

Here, we discuss the various tools that the Enfield Safeguarding Partnership uses to understand where things might have been or are going wrong and learn lessons.

Outcomes and findings from all our reviews are used to promote a culture of continuous learning and improvement across the partner agencies. The processes here are required by law, either the Care Act for adults safeguarding, or Working Together for children's safeguarding.



#### **ADULTS**

#### Care Act 2014 (Adults)

The Care Act places statutory functions on the Board. One of these is in relation to review events and practices when things go wrong. The Safeguarding Adults Board must conduct a Safeguarding Adult Review (Section 44) should an adult with care and support needs die or experience serious harm, and abuse or neglect is suspected, and where there are concerns about how partners worked together.

# What is a Safeguarding Adults Review?

A Safeguarding Adults Review (SAR) is a process that investigates what has happened in a case and ultimately identifies actions that will reduce the risks of the same incident happening again. The investigations are completed by people who are not involved in the case.

## Safeguarding Adults Review referrals in 2019-20

A referral was received regarding the care received by a young woman. In December 2019, the referrer was advised this would not progress to a SAR.

A referral was received about how partners provided care and treatment to a man. In December 2019, the referrer was advised that this would be progressing to a SAR. The review will be reported in 2020-21.

A referral was received about how partners provided care and treatment to an older man living on his own. Further information is being sought and will be brought to a SAR referral meeting in 2020-21.

# Safeguarding Adults Reviews in Progress

A review which was agreed in July 2018 in response to how partners provided care and treatment to a young woman is still ongoing. This review is expected to be reported on in 2020-21.

A review which was agreed in December 2017 in response to the care and treatment to an older woman living by herself is still ongoing. The review will be reported in 2020-21.

A review which was agreed in December 2017 in response to the systemic financial abuse of service users over a number of years is still in progress. The review will be reported in 2020-21.

#### **Learning Disability Mortality Reviews**

As from the 1st April 2017, all NHS and Local authority bodies are required to notify and review all deaths of children (4-17) and adults (18+) with learning disabilities in their area.

A local process in Enfield has been established which builds on our previous best practice in mortality reviews. Learning from the reviews will be collated nationally and locally, with local learning being reported to the Safeguarding Adults Board, the Local Authority and Clinical Commissioning Group in the Annual End of Life Report. Review training is being provided by

NHS England and the ILDS will have 10 trained review staff from across the service. Information on the programme is available at www.bristol. ac.uk/sps/leder/easy-read-information

Over the 2019-20 financial year period, 19 adults with learning disabilities and one child died. 9 of these deaths were due to respiratory issues, followed by infection/sepsis deaths (6).

Examples of improvements steps being taken include:

- **Epilepsy** an epilepsy specialist community nurse has now been employed by the Integrated Learning Difficulties Service
- Hospital Discharge the key issue here was communication with care providers, Royal Free have developed an easy-read discharge pack that is given to the person this is also on the agenda for the North Midd Steering Group.

#### **CHILDREN**

#### **Local Safeguarding Children Practice Reviews during 2019-20**

One local learning review was started at the end of 2018-19, focusing on neglect suffered by children whilst in the care of their parents, where there were concerns about substance misuse and domestic abuse. The case was referred to the national Child Safeguarding Practice Review Panel, who confirmed that a Local Learning Review was appropriate. The review was presented as part of the Partnership day in January 2020. A multiagency action plan is in place and overseen by the Children's Safeguarding Partnership.

The Local Authority referred 2 looked after children who had tragically died to the National Child Safeguarding Practice Review Panel during 2019-20. The National Panel agreed with the Local Authorities decision not to carry out a local learning review.

#### **Child Death Overview Panel (CDOP)**

The Child Death Overview Panel determine and share key learning from every Enfield child death. They monitor and challenge agencies for the completion of identified actions and publish a separate annual report.

Between April 2019 and March 2020 CDOP received notifications of 21 child deaths (death of a person under 18 years of age). The number of deaths reported over the last four years has been stable.

Of the 21 deaths, 13 were male, 8 were female.

Over the year, 12 child death cases from the 21 were reviewed.

Modifiable factors, in other words, things that could have been done differently, were not found in any of the cases that were reviewed by the Panel.

## Improve services

We have a number of processes to help us improve the quality of our services. This is an important part of managing safeguarding risks.

Some of these processes are national, for example, OFSTED inspections, and others are local, for example, the Quality Checkers. They all have a role to play in making sure our services and safeguarding responses meet local people's needs.

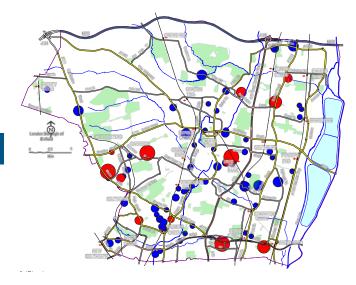
#### **ADULTS**

## **Supporting Enfield's Adults Social Care Providers**

Enfield has one of the largest number of care providers in London, including 85 care homes.

The map here shows the spread of care homes (nursing and residential) we have in the borough, one of the highest in London. All registered providers are monitored by the Care Quality Commission.





#### Nursing Homes number of beds





55 to 70 (1)

40 to 55 (3)

25 to 40 (2) 11 to 25 (1)

#### Residential homes

Number of beds

40 to 60 (7)

30 to 40 (4)

20 to 30 (10) 10 to 20 (17)

6 to 10 (15)

3 to 6 (19)

#### Who are the CQC?

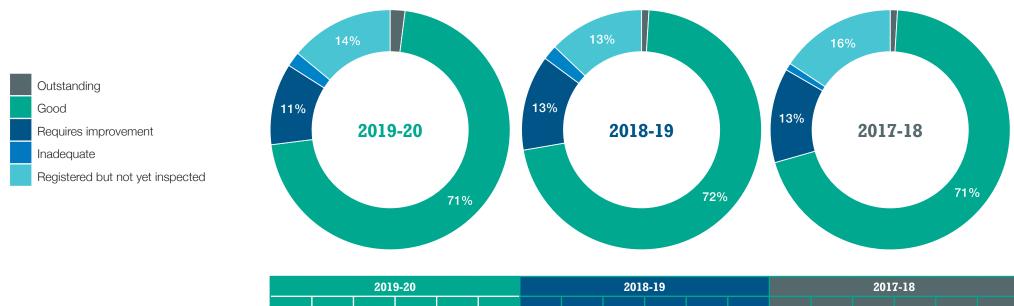
The Care Quality Commission (CQC) is an executive non-departmental public body of the Department of Health and Social Care of the United Kingdom. It was established in 2009 to regulate and inspect health and social care services in England.

#### **Provider Concerns Process**

Our Provider Concerns process was initiated 10 times in the year through our Safeguarding Information Panel. The process brings together the organisations that are involved with a care provider to discuss concerns and risks, and work with the provider to make improvements for the residents or service users. The process can include a suspension on new placements, or in some cases, particularly if there is a risk of deregistration, an exit strategy.

The Provider Concerns process was developed in Enfield, but now forms part of the Pan-London Safeguarding policy and procedures. The policy can be found on the MyLife Enfield website. Go to: www.enfield.gov.uk/mylife

## **Care Quality Commission Rating Data**



	2019-20 2018-19				2019-20						2017-18							
Care Quality Commission Rating Data	Outstanding	Good	Requires improvement	Inadequate	Registered but not yet inspected	Total	Outstanding	Good	Requires improvement	Inadequate	Registered but not yet inspected	Total	Outstanding	Good	Requires improvement	Inadequate	Registered but not yet inspected	Total
Community based adult social care services	1%	64%	11%	0%	23%	90	1%	64%	12%	1%*	22%	94	0%	59%	11%	1%*	29%	82
Nursing home	0%	67%	33%	0%	0%	12	0%	69%	31%	0%	0%	13	0%	69%	23%	0%	8%	13
Residential care home	2%	79%	8%	4%*	7%	85	0%	83%	11%	3%*	3%	71	0%	85%	13%	0%	3%	72
Total	2%	71%	11%	2%*	14%	187	1%	72%	13%	2%*	13%	178	1%	71%	13%	1%*	16%	167

<sup>\*</sup>All Inadequate provision have been subject to Enfield's Provider Concerns Process.

#### Improve services

#### **Quality Circle for Nursing Homes**

There are 12 nursing homes in Enfield. To improve and maintain quality standards the managers are regularly brought together to form a Quality Circle. They discuss issues that are impacting on quality, and with the support of Safeguarding and Quality staff work on improvements. The group meet quarterly.

#### **Nurse Assessor**

Enfield CCG and Enfield Council jointly fund a nurse assessor, who provides specialist clinical advice as part of Safeguarding concerns, and Provider concerns processes. The Nurse assessor focuses a lot of attention on resolving issues in Nursing homes in the borough.

#### **Quality Checker projects**

Quality Checkers are service users and carers who live in Enfield and inform us about what's working and what needs improvement. The Quality Checker programme has continued

to go from strength to strength with new volunteers recruited and new projects. The number of Quality Checker volunteers is currently 56, however the number of volunteers actively working on the project fluctuates to accommodate their availability to work on the project.

The Quality Checkers are now working remotely in line with government guidance during the pandemic. They continue to make calls to those receiving care services to collect feedback on the quality of care and raise issues and concerns to care management colleagues to be resolved. The Quality Checkers continue to be an integral part of the Strategic Safeguarding Team and provide an independent and service user focused perspective to support the development and service improvement of social care services in the borough.

#### **Safeguarding Ambassadors**

We have recruited 10 Enfield Youth Leaders as our Safeguarding Ambassadors. Over 2019-20 we have been coproducing a training programme with them so that they, and future Safeguarding Ambassadors, can scrutinise the work of the Safeguarding Children Partnership. They will be part of the Section 11 audit process for 2020-21.

#### **Safeguarding Adults Thresholds**

Over the course of 2019-20, many local areas took part in a project to better define a section 42 Safeguarding enquiry. The national Safeguarding Adults Collection data suggested that different areas were not consistent in their interpretation of what was a Section 42 statutory enquiry, and what was an 'Other' enquiry. To remedy this, national guidance was produced to better define these Safeguarding Adults 'thresholds'.

The Section 42 duty requires consideration of the following criteria under Section 42 (1) and (2) of the Care Act (2014):

- Section 42 (1) Whether there is "reasonable cause to suspect" that an adult:
  - has needs for care and support
  - is experiencing, or is at risk abuse or neglect, and
  - as a result of their needs is unable to protect themselves
- Section 42 (2) Making (or causing to be made) whatever enquiries are necessary
  - Deciding whether action is necessary and if so what and by whom

#### **Section 42 (1)**

Information gathering to inform a decision as to whether that duty will continue into a statutory S42 enquiry

### **Section 42 (2)**

Only if the three criteria in S42(1) and 'reasonable cause to suspect' are fulfilled is the duty under S42(2) to make enquiries triggered

#### Reporting

It is the activity under S42 (2) which is reported to NHS digital in the SAC (that is where the inconsistency showed up where we started in all of this)

Establishing the 3-stage test in Section 42 (1) can incorporate a lot of work – Section 42 (2) is not therefore a good indicator of staffing input. For our data is also means that now, where the three-stage test is not being met these Section 42 (1) are not present in our data for 2019-20.

## New Safeguarding Children's arrangements

The Safeguarding Children arrangements were signed off at a Safeguarding Partnership day on the 5th June 2019. We notified the Department of Education that our arrangements were operational on the 29th September 2019, as required by Working together 2018.

#### Why did we make changes?

In May 2016, a review of Local Safeguarding Children Boards by Alan Wood was published. The review presented its view on the effectiveness of Local Safeguarding Children's Boards and made recommendations on how the arrangements to safeguard children and young people could be improved.

The changes detailed in the Children and Social Work Act 2017 and Working Together 2018 are the government's response to the recommendations. These tell local areas what they must do from the 29th September 2019. The ambition is that these changes will improve the way organisations and communities work together to safeguard children and young people.

The biggest changes are that:

 Local Safeguarding Children Boards (LSCBs), which are set up by local authorities, will be replaced by safeguarding partner arrangements.

- The three safeguarding partners (Local Authority, Police and Enfield Clinical Commissioning Group) will have a shared responsibility for these arrangements.
- The Local Authority is no longer leading this area of work.

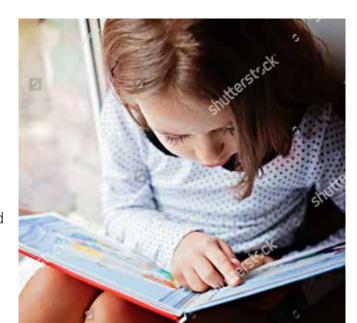
In Enfield, we have used these changes as an opportunity to encourage more joint working between adults and children's safeguarding. Three of the Activity Groups are joint – Insights, Practice Improvement and Community Awareness Raising.

#### **Independent Scrutineer statement**

I write this in the summer of 2020, as many lockdown measures are being relaxed and we approach the end of the first year in our new safeguarding arrangements. There have been many positive developments in the year, the Practice Improvement group, which covers adults and children's safeguarding practice issues is becoming established and partners are recognising the similar themes across their specialisms: the importance of hear the voice of the service user, the problems of transition, the vital importance of professional curiosity in understanding and managing risks. We have very strong lay member voices and there is good progress with our Safeguarding Ambassadors, Enfield's version of the Young Scrutineers.

Moving towards a new culture where each of the Safeguarding Partners feels there is an equal responsibility to safeguarding children and young people will take time. The vital importance of strong communication between the various levels of the partnership is clear, and will be an area of focus for 2020-21. Better communication tools (Newsletter and Website) will help, but we will also consider our meeting structures ensuring we can meet the challenges of some of the highest serious youth violence and domestic abuse numbers in London.

Overall, we have made a positive start in the new world, and I'm reassured by our strong partnership working that we can meet the challenges of the coming year.



## Priorities for 2020-21

The following pages outline the key actions for 2020-21 and how they relate to our overall priorities. You will note that community engagement, and co-production are key themes; as well as using technology and data to better focus the work we do.

Safeguarding Priority 1: Prevent Abuse									
What is our objective?	How are we going to do this?	2020-21 Actions	How will we know						
Engage with our community, to promote a culture where abuse and neglect are not tolerated (Adults and Children)	Create a culture in Enfield where our community has a zero tolerance of abuse and neglect and understands how to report any concerns they may have.	Community Awareness Raising Activity group to develop approach with Third sector starting with website layout and language.	Attendance and feedback from community engagement activity.						
Use technology and social media to engage with our community, professionals, providers and voluntary organisations (Adults and Children)	Improve website and social media presence, so people can stay informed and report concerns; promote developments in assistive technologies and social media options (including video calls).	Develop online resources to support residents to recognise abuse and stay safe. Further develop social media approaches. Ensure learning is presented via videos.	More visits to website, use of social media to report concerns, start to collect feedback on how social media and assistive technologies are helping people through customer audits.						
Work to reduce isolation (Adults)	Online training; community engagement to encourage groups to stay in touch with people who might be isolated.	Complete pilot project to introduce 100 devices into homes to support better connectivity with family and friends.	Monitor responses to the isolation question in our social care survey.						
Work with people alleged to have caused harm to prevent further abuse (Adults)	Identifying and working with people who will benefit from support and intervention.	Enfield has been selected to be part of National project working with adult service users who are have alcohol dependency.	Evaluation of the programme by professional, and through customer feedback.						
Maintain a strong focus on raising awareness of exploitation and safeguarding of adolescents throughout the wider partnership (Children)	Deliver and review the Safeguarding Adolescents from Exploitation Strategy and action plan in light of the developing Serious Youth Violence Strategy. Ensure ongoing awareness on website, in newsletter and through events.	Modern Slavery conference; London Modern Slavery conference; Modern Slavery and Adolescent Exploitation on newsletter. Specific section to be built on new website. Review and consolidate multi-agency vulnerability panels such as MACE and GPG with focus on CSE, CCE, gangs and serious youth violence. Review the existing services supporting adolescents vulnerable to exploitation and entering care to develop new service model informed by local needs.	Feedback from Safeguarding Ambassadors, Independent Scrutineer, and attendees of events.						
Improve outcomes for children who are living in families that are experiencing harmful parental conflict (Children)	Work with DWP, KnowledgePool and Early Intervention Foundation to develop training to social care staff, safeguarding partner and relevant agencies.  Develop Domestic Abuse Hub and freephone helpline.	Provide at least four Enfield training session focussing on people who work with children (managers, and introductory training was focus of 2019-20).  Launch Domestic Abuse Hub and freephone helpline.	Feedback from training. Evaluation of programme in Enfield and across country by the Early Intervention Foundation.  Monitor and evaluate progress monthly report to executive partnership.						

## Priorities for 2020-21

Safeguarding Priority 2: Protecting Adults at Risk, Children and Young People								
What is our objective?	How are we going to do this?	2020-21 Actions	How will we know					
Make sure our community knows how to recognise and report abuse (Adults and Children)	Raise awareness about our Adult abuse line, re-launch the Children's Portal and online resources, and different types of abuse through our marketing and community engagement activity.	Improvements to website; social media. Highlighting how to recognise abuse. Audio tools for people with visual impairments.	Attendance and feedback from community activity and visits to website.					
Make sure professionals are appropriately trained across children and adults partnerships, with a focus on Making Safeguarding Personal (Adults)	Ensure partners and providers have trained professionals to the required level of safeguarding. Everyone who works with adults at risk should have safeguarding adults basic training, which includes: different types of abuse, including hidden or under reported abuse such as Modern Slavery, Domestic Abuse, Female Genital Mutilation, and details of what to do to report concerns.	Multi-agency training programme based on learning from reviews; and wider statutory changes: focus on Mental Capacity; substance misuse.	Attendance and feedback from training sessions.					
Develop ways to help people protect themselves from abuse and harm (Adults)	Paper and online factsheets; information videos; and links to organisations that can help (e.g. for fraud, home security).	Stay Safe Factsheets to be relaunched; and audio versions made.	Downloads of factsheets; visits to page.					
Develop online tool to make sure everyone knows how to access different services (Adults)	Update website with new tool; this will also make sure that as partner organisations change, once updated, other agencies will still know who to contact and what everyone does.	Website section will highlight key services and signpost to MyLife, Children's Portal and Local Offer webpages.	Hits on website, improved referrals, feedback in audits.					
Ensure there is effective multiagency analysis of data/ information to understand current and emerging risks (Adults and Children)	Develop work of Insights Activity group to explore current data and methods to create an effective local picture.	Focussing on exploitation data held in different partner organisations, provide a view of risks around transition and the effectiveness of interventions.	Analysis product completed, and response options identified.					

Safeguarding Priority 3: Learning from experience									
What is our objective?	How are we going to do this?	2020-21 Actions	How will we know						
Check that the way we manage safeguarding concerns is working properly (Adults)	We have regular checks and an annual adults independent audit and we will work with our neighbours. Checks will include: the user experience and applying the Making Safeguarding Personal approach. We will also work with neighbours to develop consistent London-wide assurance framework, and thresholds. We also conduct the Statutory Section 11 audits for children safeguarding.	Safeguarding adults Assurance (SAPAT) tool will confirm key safeguarding features are present in organisations; Partner updates and data at each Safeguarding Adults Board. Section 11 will take place, with input from Safeguarding Ambassadors.	Audit reports (including Section 11) and confirmation.						
Learn from the advice of our Service Users, Carers and Patients (Adults and Children)	Implement learning from Quality Checkers; ask people who have been through a safeguarding process about their experience and make improvements where necessary.	Include feedback of Service users who have had safeguarding enquiries as part of audit processes. (Question introduced on system in 2019-20)	Partners' confirmation of the action they have taken to address issues in feedback.						
If things go wrong, review what happened and learn lessons (Adults and Children)	Identified in Care Act, Children and Social Work Act 2017, Working Together 2018, we have to undertake Reviews, learn lessons, and make system improvements.	Continue to work on publishing SARs, and local learning reviews and analysing learning opportunities based on recommendations.	Audits feedback, data.						
Learn from the experiences of other local authority areas (Adults and Children)	We work with our neighbouring boroughs and regional sector led improvement alliance to learn lessons together. We share our lessons from reviews and will work on checks together.	We work with our neighbouring boroughs and regional sector led improvement alliance to learn lessons together. We share our lessons from reviews and will work on checks together.	Annual review and audits to identify improvements based on learning from other boroughs.						
Improve sharing of learning between adults and children's safeguarding (Adults and Children)	Establish Practice Improvement Activity group by September 2019. Ensure discussions relating to children's and adults issues are influencing improvements.	Practice Improvement group has received feedback on one Children LLR, and at April meeting will input on recommendation of Safeguarding Adults review.	Group established and has met. Terms of reference agreed. Minutes from meetings.						

## Priorities for 2020-21

Safeguarding Priority 4: Supporting Services Improvements									
What is our objective?	How are we going to do this?	2020-21 Actions	How will we know						
Ensure we have effective arrangements in place to intervene when provider quality drops below expected standard (Adults and Children)	Support Enfield services to improve, due to quality standards, whenever possible.	Provider Concerns policy being reviewed and relaunched.	Number of Provider concerns improvement processes and key issues addressed.						
Ensure partners share information and intelligence about poor quality services (Adults)	Ensure there are arrangements in place to share information properly about services so that partners can act quickly to respond to unsafe services.	More detailed data analytics to be introduced into meetings.	Regular meetings with partner agencies and evidence of actions.						
Ensure the voices of children and young people, as partners and scrutineers, are built into our Safeguarding Partnership work	Develop online presence to share information, policies and best practice with providers to ensure organisations have tools they need to improve.	Develop Safeguarding information for providers as part of new website.	Traffic on website; download of resources.						
Online space for Providers (Adults)	Make sure Enfield has clear and consistent policies with neighbouring boroughs which represent best practice in all areas.	Safeguarding Adults Partnership Assurance Tool (SAPAT); London wider exercise will be conducted. Continued participation in National work on defining and recording enquiries.	Audits, and data analysis will confirm consistence of practice						
Ensure the voices of children and young people, as partners and scrutineers, are built into our Safeguarding Partnership work (Children)	Recruit eight children and young people to scrutinise and develop our arrangements.	Eight young people will be providing feedback on Scrutiny of safeguarding children's arrangements (incl. Sect 11).	At least eight young people recruited and working with us on projects (website, Section 11 audits).						

# Appendix A Detailed Data

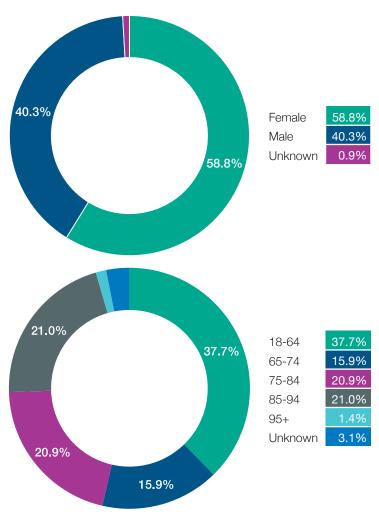
## Protect – assurance data for 2019-20

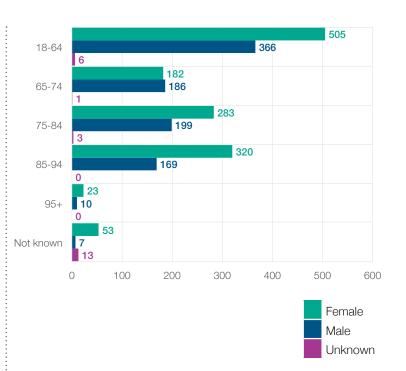
Key data is presented here showing the trends in comparing to the previous financial year.

# Overall concerns and enquiries

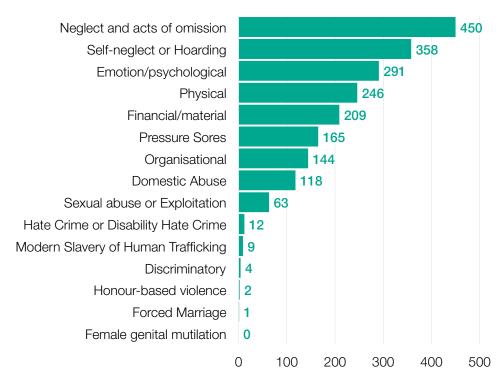
- Total number of concerns = 2,326
- Of these, 356 went on to Section 42 Safeguarding Enquiries (2018-19 = 655)
- Conversion Rate **15.3%** (2018-19 = 28.4%)
- The remaining 1,970 concerns have received some form of other safeguarding/preventative measure (e.g. Information and advice, Referral).

#### **Concerns - Age Range by Gender**





### **Type of Abuse Concerns**



Type of Abuse*	2019-20		2018-19	2017-18
Neglect and acts of omission	450	21.7%	22.7%	28.5%
Self-neglect or Hoarding	358	17.3%	18.8%	9.5%
Emotion/psychological	291	14.0%	12.7%	15.2%
Physical	246	11.9%	12.3%	13.4%
Financial/material	209	10.1%	11.1%	12.0%
Pressure Sores	165	8.0%	5.5%	6.2%
Organisational	144	6.9%	7.7%	4.9%
Domestic Abuse	118	5.7%	5.6%	6.9%
Sexual abuse or Exploitation	63	3.0%	2.5%	2.3%
Hate Crime or Disability Hate Crime	12	0.6%	0.5%	0.4%
Modern Slavery of Human Trafficking	9	0.4%	0.3%	0.2%
Discriminatory	4	0.2%	0.2%	0.4%
Honour-based violence	2	0.1%	0.0%	0.1%
Forced Marriage	1	0.0%	0.1%	0.0%
Female genital mutilation	0	0.0%	0.0%	0.0%
Total	2,072			

<sup>\*</sup>There can be multiple forms of abuse so numbers do not add up to the number of concerns

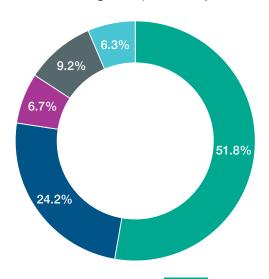
### **Risk Outcomes for completed enquiries**

51.8% 24.2%

6.7%

9.2%

Of the 365 enquiry forms, 240 have a risk outcomes that is not blank (i.e. the enquiries have been completed). The table below compares risk outcomes against previous years.



Risk reduced

Risk removed

Risk remains
Risk did not exist

Not applicable

Where risk identified, what was the outcome?	2019-20		2018-19	2017-18
Risk reduced	129	51.8%	59.0%	64.5%
Risk removed	58	24.2%	15.7%	11.8%
Risk remains	16	6.7%	9.3%	8.5%
Risk did not exist	22	9.2%	6.9%	6.5%
Not applicable	15	6.3%	6.7%	7.9%
Total	240			

# Appendix B Partner Statements

# Barnet, Enfield and Haringey Mental Health NHS Trust

### **Training**

In Safeguarding Adults we have increased training over the past 4 quarters. Staff are trained to L3 on their induction so that they have the skills necessary to carry out safeguarding enquiries with the support of the SAM and Safeguarding champions.

Safeguarding Supervision training has been developed and is being rolled out in the trust to help support supervisors and Safeguarding Champions to support with their roles.

In order to improve training compliance the safeguarding team are currently developing an online version of the face to face level 3 integrated safeguarding training.

The safeguarding children lead and the Lead Nurse for CAMHS facilitated an online Question and Answer session for the crisis hub.

#### **Prevent**

Prevent is now being managed by the Children and Adult Safeguarding leads within the trust.

### **Section 42 Enquiries**

We continue to collect data regarding the number of safeguarding adult cases that meet the Section 42 Enquiry threshold. Our conversion rate of 49% (i.e almost half of our alerts/concerns progress to the enquiry stage) is above the London-wide average of 33% and represents an improvement in the quality of referrals and a better understanding of the threshold by those making the referrals.

#### **Section 42 conversion rate (Enfield)**

Q1	Q2	Q3	Q4
11	23 (inc. 12 from NLFS)	29 (inc. 13 from NLFS)	21

### **Safeguarding Adult Reviews (SAR)**

The trust is currently actively involved with no SAR cases in Enfield. A decision is being made about a SAR case related to a suicide. The Local authority has been provided with the necessary information from the mental health trust.

### **Case Examples**

An example of positive multi-agency practice was observed in the case of NN whereby the adult at risk (Mrs N) is open to the local authority and the suspected perpetrator (NN) is open to the Mental health trust. Joint meetings between the agencies resulted in positive outcomes in terms of risk management and

support offered to the Adult at risk, family and suspected Perpetrator.

CPN and Social worker arranged a 3 way telephone conversation with Mrs N ,(in light of pandemic) discussing the risks, discussing N's behaviour and helping her to gain insight into the fact that N is in control of his behaviour and it is a feature of antisocial traits rather than only exhibiting this behaviour when he becomes psychotic or mentally unwell. This helped inform the Mrs N and family of ways to manage risks with the teams i.e. police involvement and cameras.

Joint work between mental health nurse and Local authority social worker as well as the respective Safeguarding teams resulted in Forensic risk assessments and it was established by the that medication compliance would not impact on whether NN presented as aggressive and or abusive towards his mother. In light of this, the local authority were able to ensure that risks were managed via a criminal justice route. Direction given to the police as to as to criminal behaviour and risks towards his mother being less a feature of the psychosis and more related to anti-social personality traits.

In addition IDVA and MARAC referrals were completed. Non molestation order sought and ongoing joint work to information share to manage risks.

The trust has had one case that required the support of the Enfield PIPOT in the last quarter. Safeguarding Adult lead communicated with the PIPOT to inform a safeguarding plan in order to protect the Adult at risk and wider populations. Due to the fact that the adult at risk had capacity, withdrew her allegation in terms of police and safeguarding investigation, the teams involved in the safeguarding could only pursue the impact on the wider population aspect of the safeguarding process. PIPOT informed the trust to ensure that the HR and disciplinary route was followed and that if the suspected perpetrator was dismissed that the Disclosure and Barring Service was notified. A second action was liaison with the care coordinators of other vulnerable adults. who were on the wards whilst suspected perpetrator was working there to ensure there were no further disclosures. The safeguarding team will work with ward leads and management team to ensure that policies around staff boundaries, professionalism and sexual safety on the wards are continuously implemented.

### Safeguarding focus during Pandemic

We gave staff updates over the period of lockdown to ensure they were vigilant in certain areas if safeguarding that were presenting more frequently due to people staying at home and social distancing measures. We gave additional attention to areas of heightened risk including self-neglect and Domestic Abuse. The safeguarding team have disseminated the updates in a number of ways: Safeguarding champion meetings (teleconference), Email; Daily updates via COMMs and during informal supervisions.

Safeguarding in the BEH MH Trust is, in line with recent legislation, Business as usual. In fact, it is even more important that the Trust and our partners are vigilant in recognising abuse at this time: Abuse is potentially more hidden when people are self-isolating.

A case example whereby a safeguarding relates directly to the pandemic was a case whereby staff supported a victim of hate crime. During their weekly telephone outpatient session the client reported they had been the victim of two hate crimes in relation to their race and COVID-19. They reported a member of the public had shouted at her and told her to 'go home' and that on a separate occasion a different member of the public

had spat towards her, although this did not hit her. She reported she did not feel able to report these to the police at the time, feeling that it was not high enough priority. She was encouraged to report any further incidents to the police if she feels able and was offered support to do so. The client reported she feels worried about going out in case she experiences further incidents of hate crime but is going out for essential shopping and some walks. Subsequently the police were involved and were able to support the adult at risk. Community officers were informed to be vigilant in her local area. We recommended that they police work with the mental health service and gather information about other hate crimes in the area and potentially adopting a strategic approach e.g. if a lot of these are reported in a certain area, they can put more community officers in the vicinity.

The adult at risk was supported in various other ways and coached around coping mechanisms to manage any further incidents.

To view the Trust's Safeguarding webpage go to: www.beh-mht.nhs.uk/safeguarding.htm

# Community Safety Unit

Community Safety are working with Probation to bid to a MoJ pot of funding for a pilot project working with non-mandated perpetrators of Domestic Abuse. Total pot including match will be £80,000 if successful. This is an area which we have not been previously able to address and is an action in the VAWG strategy.

The Domestic Abuse Hub set up to streamline the Council's response has received 34 calls up

to the 16th June and is advertised on line and in a variety of settings throughout the borough, including health and retail.

The Gangs Partnership Group and Pre Mace are seeking to better align work and a new group may be developed to lead on provision of support and/or enforcement to manage adult offenders of violent crimes where the level of risk falls below the threshold for existing

groups such as MAPPA. The cases are likely to include those involved in exploitation and drug dealing or violent crimes. The need for this work has been identified in the borough following an increase in violent crime across the capital and nationally and the group will augment the work from existing strategies to improve the safety of local people.

Operation Boxter led by the police is seeking to deter street sex work along the Fore Street Corridor. In the first 3 weeks there have been 91 Stop and Searches carried out, 6 arrests and 9 cautions.

### Safeguarding focus during Pandemic

During lockdown the crime profile of the borough has changed, with a significant increase in ASB calls about lack of social distancing and an increase in concern/reports about domestic abuse and sizeable reductions in other areas such as burglary serious youth violence.

The Community Safety Unit has worked remotely during the lockdown, with the exception of CCTV which has carried out business as usual and we have supported the police in operations and in addressing concerns around social distancing.



# Department of Work and Pensions (DWP)

DWP continues to upskill its staff with internal presentations from organisations on working with customers with complex needs. We continue to build links with the Local Authority and various Providers and Organisations e.g. Mind to allow us to offer support or signpost to support where required.

We recently ran a "speed dating" event in house for Work Coaches with a variety of Partners in the health field presenting their support offer to them.

We continue to work closely with the Las leaving Care Team and have a presence on site once per week to provide advice, guidance and support.



# **Enfield Carers Centre**

Our progress with regards to safeguarding adults at risk, children and young people over 2019/20:

- Our Board of Trustees reviewed our Safeguarding Adults Policy at their 1st June 2020 meeting
- We have noticed a number of alerts during COVID-19 which we've dealt with by either raising alerts or by deciding there's no immediate risk and that information/ signposting was sufficient.
- Our Safeguarding log is being maintained
- We discuss any Safeguarding issues or alerts at any Team and Board Meeting.

#### **Safeguarding focus during Pandemic**

We have reviewed our safeguarding procedures and have put in place extra safeguards for our young carers' online activities including ensuring staff sit in on all zoom calls, requiring passwords and disabling private chat facilities.



# Enfield Children's and Young People Services

Enfield Children and Young Persons Services (ECYPS) is an umbrella organisation with charitable status. ECYPS provides advice and support to voluntary organisations working with children and young people aged 0-25 years.

FCYPS continued to deliver an extensive safeguarding programme for the third sector. Over the past year we supported 40 organisations including afterschool clubs, arts and drama clubs, pre-schools, youth clubs, sports groups, community and faith organisations. Training included child protection/safeguarding level 1, child protection and diversity, impact of adult mental health on children and young people, FGM and domestic abuse.

We incorporated child protection awareness sessions within our major events to address issues of safeguarding and to support children and young people's well-being. Events such as Mind Kind at Millfield Theatre. multi-faith safeguarding events, ECYPS forums, information days and road shows were delivered at various primary schools and throughout the borough. We produced community handbooks and a guide for parents and carers 'affordable and free activities' which were disseminated at fun days, community events and various workshops. ECYPS also

delivered bespoke child protection training specifically for the Polish, Albanian and Somali communities.

We facilitated four parenting programmes throughout the year; child protection/ safeguarding awareness were covered on each programme with 36 parents attending. The sessions improved knowledge and understanding of child protection and safeguarding procedures as well as services and support available in the borough.

ECYPS provided one-to-one sessions supporting new and emerging groups, startup packs including advice on policies and procedures-health and safety, child protection, risk assessment, insurance, training, DBS checks, Ofsted registration and governance. We are a registered umbrella body for Disclosure and Barring Services. Between 20019/20 we carried out 400 DBS checks for different organisations.

Covid-19 had a huge impact on our services and on the local communities. It has been challenging and difficult at times, but we were prepared for the 25th March, when Boris Johnson announced 'Lockdown'. We went live with our Covid-19 support group via Facebook and other social media platforms. Providing online activities for parents and young people

including fitness sessions, healthy eating cooking sessions, online safety, Covid-19 updates, dance sessions, mindfulness, creative writing-Scribeasy, wacky Science, pilates, parenting support, storytime, creative art and counselling services. The online sessions will continue focusing heavily on supporting the wellbeing of families.

Throughout lockdown. ECYPS' team have been working hard providing regular foodbanks twice a week, clothes bank, and toy bank for local families, including deliveries for vulnerable families who were self-isolating. We are continuing with food banks supporting families on low income, young carers, people suffering from mental health and for people who have lost their jobs during Covid-19.

# **Enfield Council Safeguarding**

### Community engagement/ Safeguarding Ambassadors

Weekly meetings have been taking place with our Youth Leaders who are developing the young people's Safeguarding Ambassador role. We are developing a 6-week training programme to prepare youth leaders to work with us. The first focus of their work will be alongside the Section 11 audits, making sure the voice of young people is present in our safeguarding arrangements. The Service User, Carer and Patient group is advising on this work.

### **Modern slavery**

Helpline has been established and referrals are being received. ModernSlavery@enfield.gov.uk (Mon-Fri 9am-5pm). Telephone 020 3821 1763 (Mon-Fri 10am-2pm).

#### Website

The Safeguarding Partnership Business Unit has been working with the Service User, Carer and Patient Sub-group, and our Safeguarding Ambassadors on a new website for the Safeguarding Enfield Partnership. The website will be accessible on different devices (mobiles, tablets and laptops) and has better search and accessibility features. The site is due to be launched by the end of June.

### **Liberty Protection Safeguards**

Strategic Safeguarding Adults Team have competed a mapping exercise to estimate potential figures of those aged 16+ who will be requiring Liberty Protection Safeguards. We have also been consulting with Edge Training who have supported with the completion of an LPS Report which discusses the estimates and how Enfield proposes to meet these new demands. Colleagues across the partnership have been identified and will be invited to a Steering Group once the Code of Practice has been published. A training plan has been submitted to the Enfield Council Learning and Development Team to assist managers and practitioners with the changes in legislation and will be made available once the Code of Practice is ready. Training is currently being provided to staff on LPS and mental capacity to help raise awareness and manage expectations.

## **Safeguarding focus during Pandemic** Supporting Care Homes

Members of staff from the Strategic Safeguarding Adults Service, including our Business Unit, have been working with our Brokerage and Commissioning colleagues to make daily call to care homes. This has been to support the homes, map the spread of the virus amongst staff and residents and make sure PPE was available in line with government guidelines.

#### **Contacting vulnerable residents**

Our Safeguarding Adults Practice Team manager has been ensuring that volunteers and staff making calls to residents on the Shielded list have access to information and advice about Safeguarding through regularly surgeries that have been organised with Public Health.

# Working with people who have refused to comply with government guidance

Regular meetings (initially weekly, now 3 weekly) have taking place, chaired jointly with Public Health to consider residents, and council tenants, who have not been complying with COVID-19 guidance on social isolation and distancing. The meetings are multi-agency and have provided a place where agencies can refer in, with a risk assessment, and appropriate local action can be taken. If these measures are not successful, the group can refer to Public Health England. This has not been necessary in Enfield.

# **Enfield Council Housing**

Safeguarding is everybody's responsibility and we are continuing to embed and strengthen safeguarding principles in our strategic and day to day housing operations.

The Council agreed a Homelessness Prevention and Rough Sleeping Strategy in 2019 which sets out to end homelessness. It provides the Council's strategic direction for change and us important for setting out the strategic direction for safeguarding and meeting the needs of homeless adults at risk, children and young people.

A transformation of the Council's Homelessness and Prevention Services began in September 2019 to deliver investment in multi-agency, co-located 'up stream' homelessness prevention services. Workshops to design and develop the new service model have involved managers from Adult Social Care and Children's Services, helping to strengthen relationships across services. Investment in the service will ensure more vulnerable adults and families with children are given early advice and support to prevent their homelessness including strengthened support plans.

Rough Sleeper Services were strengthened in 2019/20 following government funding for additional support staff, services and accommodation including a new Rough

Sleepers shelter in the borough, enabling vulnerable, destitute adults at risk of abuse and harm to be housed and given support to get their lives back on track. A multi-agency panel for high risk rough sleepers was also set up, bringing together professionals to discuss and put in place plans for vulnerable rough sleepers with complex support needs including mental health issues, substance misuses.

Other areas in which our safeguarding activities within Housing Needs have been strengthened include:

- Housing Needs Managers meet with Children with Disabilities Managers to discuss cases involving families with children who have multiple and complex needs to find solutions.
- A Housing Options and Advice Officers is co-working with the MASH/SPOE Teams week and referral pathways are strengthened. There are plans to increase the co-working arrangement in 2020/21
- Multi-agency meetings are continuing for leaving care, mental health, Council tenants evictions. MAPPA and MARAC.
- Eligible homeless families with children, who have no recourse to public funds, are being accommodated/supported until a decision is made on their immigration status.

 Disabled Facilities Grants are provided to eligible families to safeguard and support independent living, covering eg stair lifts and walk in showers.

### **Housing Management Team Safeguarding Activity**

Throughout the 2019/20 period, the housing management team have maintained core membership of the Multi-Agency Child Exploitation (MACE) panel, using the forum to remain aware of, and highlight safeguarding concerns, as well as decimating best practice to frontline housing management staff.

As part of our commitment to continuous development, frontline housing management staff receive regular training through an annual training programme which includes refresher training on the Care Act and Housing. Furthermore, within our training plan, each training session must have a focus on safeguarding and its implications, for example, safeguarding considerations in managing cases involving Domestic Abuse, Anti-Social Behaviour, and Fraud.

Our front-line housing management team maintain a central record for Safeguarding referrals and the Housing management team also monitor, review and report the number of safeguarding referral made each month.

The housing management staff are currently conducting a review of our tenancy management procedures and we are incorporating safeguarding best practice as a standard subheading within each housing management process, to ensure staff remain aware of their obligations. Within each frontline housing management team, there is a nominated Safeguarding lead, which ensures that Safeguarding remains a priority at every level.

### Safeguarding focus during Pandemic Housing Needs

Safeguarding and ensuring the safety and wellbeing of local residents was at the heart of changes to the way housing needs services were delivered during the Covid 19 pandemic and 'lockdown'.

- Street homelessness was addressed quickly through compliance with government guidance to move rough sleepers from shared housing to self-contained housing within days of the announcement.
- 2. Rough Sleeper accommodation/support delivery plan developed those who were assessed as homeless or at risk of sleeping rough were accommodated during 'lockdown' in hotels or self-contained

- accommodation. This meant more single people and couples without children were kept safe.
- 3. A new dedicated Housing Advice Telephone line was introduced immediately after 'lockdown' to re increase access to services/replace Face to Face contact at John Wilkes House (main Housing Needs Office) when the Council building closed. New access arrangements were immediately communicated widely across the Council/Voluntary and Community Sector, Information was translated into community languages. When Enfield and Edmonton libraries opened to the public, a Housing officer has been located there to support library staff providing services to customers at risk of homelessness wh do not have digital access or a phone.
- 4. Three Housing Officers were appointed to the Council's Domestic Abuse Hub in recognition of data showing an increase in domestic abuse during 'lock down' to work exclusively with this client group carrying out risk assessments, safety planning and identifying safe accommodation; welfare checks were carried out on all open homeless cases where domestic abuse was reported as the cause of homelessness.

#### **Housing Management**

During the Government Lockdown imposed from 23rd March 2020, the Housing management team undertook a "Welfare and Wellbeing checks" programme, calling all known vulnerable residents and those believed to be at risk of abuse or neglect. The service maintain regular contact with all sheltered housing residents and a significant portion or our residents over 65 in General Needs accommodation who have requested ongoing support.

We are working in partnership with the Riverside Floating support service to help residents carry out tasks associated with independent living, utilise technology (where appropriate) to assist in their support and longer term wellbeing, and access information, community resources and social interaction to avoid becoming socially isolated. Since lockdown restrictions have been lifted, the housing management team are now undertaking a series of welfare checks and welfare visits to residents with whom the service has had little or no contact.

Staff have had specific training in identifying signs of abuse and neglect, as well as training for identifying and supporting those suffering from Domestic Abuse during the Covid period.

# FGM update – Public Health

Our ongoing work around FGM relates to both protecting adults who have been affected by FGM (e.g. before migration to the UK) and children living in Enfield at risk of FGM.

#### Recent progress includes:

- Re-established FGM steering group meeting. Met in December 2019. Quarterly meetings planned for 2020.
- Revised governance arrangements so that FGM will be a standing item on the Violence Against Women and Girls (VAWG) Strategic Group. The FGM Steering Group will continue to exist as a forum for multistakeholder engagement and will feed directly into the VAWG Strategic Group.
- The Enfield Public Health team have been working with partners and the FGM Steering Group to update the FGM Needs Assessment for Enfield. This brings together data from multiple sources and will include recommendations for action. The Needs Assessment is now being updated and will be shared once finalised.
- A series of community engagement and awareness raising activities are planned for 2020, largely using some one-off funds provided from the Ministry of Housing, Communities and Local Government. These

- have been planned with the support of the FGM Steering Group and will be delivered by local community groups/members.
- A referral pathway workshop is being planned for ~March 2020 to identify existing pathways and gaps in Enfield.
- Two half-day training days in March are being offered to frontline staff across different sectors in the borough and community and voluntary sector staff.
- The North Central London (NCL) Harmful Practices Group is made up of representatives from across the five boroughs of NCL including safeguarding and public health leads. The group aims to facilitate sharing of best practice and a joint approach to Harmful Practices across the NCL area and are in the process of developing their workplan.



# Healthwatch Enfield

Healthwatch Enfield was established to act as the statutory, independent consumer champion for health and social care services in the borough. Our roles and responsibilities include:

- Obtaining the views of local people regarding local health and care services and importantly to make these views known
- Promoting and supporting the involvement of local people in the commissioning, the provision and scrutiny of local health and care services
- Providing advice and information about access to local health and care services
- Enabling local people to monitor the standard of provision of local health and care services and whether and how local care services could and ought to be improved
- Formulating views on the standard of provision and whether and how the local health and care services could and ought to be improved; and sharing these views with Healthwatch England

Healthwatch Enfield is also able to raise relevant issues at a number of strategic boards. This allows us to provide support as well as challenge and highlight issues raised by local people in the development and delivery of local strategies.

In terms of safeguarding, Healthwatch has

- ensured that our Board, staff and volunteers are trained to understand and follow up any safeguarding concerns identified by us or raised with us in our work locally
- arranged refresher children's safeguarding training for staff, volunteers and board members last autumn
- reviewed our safeguarding policy in May 2020
- supported and challenged data presented at a number of strategic boards

We have supported the consultation on the Hoarding Policy and promoted safeguarding training opportunities.

We offered feedback on the 'safeguarding adults at risk audit tool' in response to a request from Healthwatch England and shared the response with the Enfield safeguarding team.

We have been able to use the experience of our 'Enter and View' activity in care homes as part of our feedback on safeguarding although this work is suspended during the pandemic.

We dealt with three separate concerns raised with us (one issue was also referred to the CQC) and in all cases the concerns were dealt with urgently by senior managers.



We value the strong commitment to improving engagement and understanding of safeguarding across all communities.

### **Safeguarding focus during Pandemic**

We have promoted information about safeguarding and particularly domestic abuse throughout the lockdown period.

# Integrated Learning Disabilities Service (ILDS)

ILDS continues to provide a multi-disciplinary approach to managing PMLD which includes social, physical, psychological and mental health assessments.

- Safeguarding response and plans completed within usual time frame, essential face-to-face meetings have taken place during lockdown where tech/video couldn't be used.
- In some cases following closure of a case, a review may take place (3 months) to make sure all protective measures are still robust and that service users is safe and any agreed actions have been completed.
- Throughout the safeguarding there is continued Management support & oversight and clear directions from the Sam is recorded in cased notes.
- There is also emphasis on making Safeguarding Personal (MSP) within the recordings.

#### Safeguarding focus during Pandemic

 We have continued to offer all specialisms in the service and prioritised urgent review and associated clinical work to support individuals and keep them safe at home; we have used technology in various different forms and developed a series of social

- stories and accessible information both for our website information and for individuals.
- We have made over 2,000 welfare calls to those who are high risk; non-compliant: no access to internet etc and working with those who are non-compliant with multiple agencies involved.
- We have been working with parents and carers to support significant anxiety level and the challenges around the apparent inequality and national reporting of the approach especially to testing and reporting mortality and also access to PPE - most people with complex LD needs live at home and in supported living accommodation and not inc are homes so access to testing excluded those with PMLD. In Enfield we have acknowledged this and we acted very early on to ensure people who needed PPE had the PPE they needed.
- We have set up our own test site for LD and MH this week.
- We have been particularly challenged in LD buy the number of deaths, increased in April to around 650% on last year, 12 deaths; 10 due to C19

- Multi LD have and are particularly vulnerable, 7 out of the 10 deaths had 3 or more comorbidities which is not unusual in complex LD.
- All Rapid Reviews have been completed.
- Findings thus far indicate all 10 had access to the health and care they needed at that time.
- 8 out of the 10 died in hospital which indicates the correct processes followed and clinical oversight provided.
- All will be subject to full LeDeR review, we are awaiting further guidance on this from NHSE.
- PWMLD have been disproportionately affected and live in the family home.
- We have supported and prevented admissions, as well as supporting individuals through a mlti-agency approach to receive the care and support needed in hospital.
- As a service, we have continued limited essential face to face assessment weg, MCA & BI and all safeguarding.
- We have not had any admissions to ATU's since the lockdown down started, we have managed to discharge 2 individuals although this was delayed because of the situation.

# London Ambulance Service



# London Community Rehabilitation Company

- 1. The London Community Rehabilitation Company (LCRC) Learning and Development Team have delivered further Safeguarding Assessment Training (REACTA). The Learning and Development plan includes the teaching and development of assessment and planning skills for a) all new staff and b) ongoing staff development. Feedback and review of the training has supported the LCRC to help evaluate and develop this area of work.
- 2. The CRC Performance Management Information for Safeguarding has been updated and will support the operational management of safeguarding risks and will support us towards the assurance of and the quality of our safequarding practice. This helps to manage our resources and prioritise the right service users within the communities particularly if they are very vulnerable with a high level of safeguarding concerns.
- 3. CRC are now able to undertake regular quality audits on a monthly and quarterly basis.
- 4. Omnia (integrated case management and risk and needs assessment tool) has been used which enables:
  - Action planning objectives to be developed which are directly linked to the service user's risk and needs

- A strengths-based approach to risk assessment, which leads to risk management and action plans that support desistance
- An ongoing review of the risk and needs and of the delivery of the action plan.
- 5. LCRC Public Protection Boards (PPB) have been developed at a local and pan-London level that have a focus on various Safeguarding themes. This allows a two-prong approach whereby frontline issues can be escalated and important strategic message and processes cascaded and shared.

### **Partnership Working**

- 1. There are upcoming transforms and organisational restructures due to the announcement of the Re-Nationalisation of the Offender Management section of Probation. This is scheduled to be implemented in June 2021. This may have some negative impact but the North London CRC Manager and the NPS Managers have a good relationship and continue to work very closely together to manage this.
- 2. When CRC resources are under restraint it can be challenging to engage in the Adult Safeguarding sub-groups. This has had an impact in for example we are unable to offer

- the support for the MASH Hubs. Given the future changes that the Offender Management section are renationalising will allow both CRC/ NPS services to be amalgamated and this will strengthen this area of work. Until then we will continue to manage this via the MASH Process that has been set up and monitor any processes via the MASH and ideally develop any Adult MASH within the local boroughs.
- 3. Safeguarding Adult Briefings were delivered to local teams.
- 4. CRC will continue to engage in Safeguarding Boards moving forward until June 2021.

#### **During the Covid-19 Pandemic**

Our priorities were staff safety, re-opening offices which can adhere to social distancing measures, continuing to prioritise the work of our complex, higher risk cases through face to face supervision and partnership working, reintroduction of Community Payback placements and the increased delivery of interventions whether that be over the phone or another medium or in small group settings. All our cases where there is an identified safeguarding concern currently fall under the amber/red category and therefore should be being seen consistently in line with our current EDM. They will remain priority cases in our recovery.

# London Fire Brigade

- Staff at varying ranks have been consulted on a range of safeguarding processes.
   Consultations in line with the devolution project have resulted in changes to how safeguarding referrals are completed and who is responsible for raising them, as well as, changes to both LFB Adult and Child Safeguarding policies and training.
- The number of Egress licences required have been identified and provided to the Business Systems Improvement Manager. Once provided this will ensuring that all Brigade staff who require access to raise and send safeguarding referrals to Local Authorities can do so securely through encrypted emails.
- Both the LFB Adult and Child Safeguarding policies have been amended and republished to provide clear and concise guidance on the importance of raising referrals, vulnerability factors to look for, and how to complete a referral.
- Due to the specialist knowledge required to deliver effective safeguarding training a training exemption has been agreed between the Brigade and their training providers, Babcock. A Training Request Form has been signed by the Assistant Commissioner Fire Safety and sent to

- Training and Professional Development to action. The training contract set up has been delayed due to the current pandemic and therefore training is not expected to commence until later in 2020.
- Work between Community Safety and Training and Professional Development is currently being undertaken to update the Safeguarding Computer Based Training (CBT) package in light of the above delays. Current monitoring by Community Safety Policy & Project of the CBT packages has identified the completion rate is not at the expected level; they are currently working with the Developing and Maintaining Operational Professionalism team on how best to monitor completion rates. Once the CBT package is updated it will be made mandatory and this will be communicated to all staff. Completion monitoring will be undertaken on a quarterly basis.
- A general Data Sharing Agreement for the Brigade has been documented, the agreement can be used and adapted for any local authority. Following the provision of the training identified above, a half day workshop will be provided on data sharing protocols and practices for safeguarding. In addition, over the last 12 months the

Information Management team have been implementing an Information Sharing Gateway, aimed to simplify and increase information sharing between the Brigade and local authorities.

Specific to Enfield LFB crews have forwarded 88 safeguarding referrals to MASH during 2019-20.

A subject for our recent Borough Training Day was 'Safeguarding' and our commitment to this and referral process was communicated to all personnel working for LFB within the Borough.

#### **Safeguarding focus during Pandemic**

Although our Home Fire Safety Visit programme has been temporarily halted we continue to visit households raised as 'high risk' as part of a referral and also those that are passed to us as high risk by partner agencies or from attending incidents.

Options are being looked at to begin HFSVs with appropriate social distancing measures.

# London Metropolitan Police, North Area BCU

Our progress with regards to safeguarding adults at risk, children and young people over 2019-20:

- Creation of a Modern Slavery coordinator to support Local Authority strategy on Modern Slavery
- Realignment of staff to support DA hub
- Operation Harbinger golden hour principle when a child has been arrested, improve liaison with Met Detention and MASH
- Operation Flute contextual safeguarding operation focussing on exploitation

### Safeguarding focus during Pandemic

Details of our agency's response to safeguarding during the Pandemic:

- Business as normal through the realignment of staff, particularly as the result of covid related sickness
- Support of Enfield DA hub
- Improvement of domestic abuse investigation within the first 24 hours
- Recovery planning for Child Abuse investigation



# **National Probation Service**

# Cluster Quality Quarter Focus: Q3 – Safeguarding

The focus in Enfield probation in Q3 was on Adult and Child Safeguarding. Briefings, and team meetings focused on the topic.

### **Learning and Development**

All staff in the London Division have been set an objective in their annual appraisals to complete the Adult Safeguarding E-learning and if appropriate to the grade classroom training as well.

All staff have an objective in their yearly appraisal to complete e-learning module on

Safeguarding Children. Offender Managers and Senior Probation Officers have to complete a 2-day classroom training module on Child Safeguarding and Domestic Abuse, and renew every 3 years. This will be part of the professionalisation agenda for the probation Service.

Some staff have attended training on making referrals and attending Child Protection Conferences.

#### **Making Every Contact Count**

Staff training focuses to support staff to have conversations with offenders and their families/support networks regarding their wellbeing

and accurate information to signpost to appropriate services. Work is underway to look at the data in the borough to determine age ranges of offenders and anecdotally we are managing many more aging offenders, particularly sex offenders.

#### **MASH**

MASH SPOCs are in place in the Enfield Probation Office.

# **Public Health Approach to Serious Youth Violence – Youths in transition**

NPS London is developing a Transition strategy for youths leaving children's services and entering adult probation. A parallel strand is working with care leavers in the adult criminal justice system. The Strategy is due to be published in the next 3 months and training in place for Offender Managers trained to deliver a transition programme.

#### Remerging of NPS and CRC

Transition Boards have been set up and the 10 Regional Directors appointed. The reunification process is due to complete in 18 months' time. Further updates will be provided as and when the working model is completed and signed off. For the time being it is very business as usual.



# NHS Enfield Clinical Commissioning Group

Enfield CCG Safeguarding Team key achievements April 2019 - March 2020:

- Delivered Modern Slavery Conference to front line practitioners across the partnership in May 2019
- Co-ordinated and delivered pressure ulcer training to Nursing Home staff and social care staff in May 2019
- Ensured continued support for decision making in the Adult MASH team with the Named GP for adults attending weekly
- Facilitated Safeguarding Lead GP forums for leads in GP practices
- Co-ordinated and delivered 4 safeguarding updates for GPs and Practice nurses
- The Named GP for safeguarding adults has become a member of the LeDeR steering group alongside the Designated nurse
- New Safeguarding Children Partnership arrangements signed off in June 2019
- Attended Police Hydra training on Prevent and Channel panel processes in July 2019
- Participation in multi-agency neglect audit in August 2019
- Delivered 1 day conference on the New Liberty Protection Safeguards in January 2020
- Co-ordinated 1 day training course for safeguarding children and adult leads on writing Individual Management reviews in February 2020
- Supported the North Central London Child Death Overview process with co-ordination of the transformation project
- Continued partnership working with LCW on developing their safeguarding processes to ensure the service implements the Child Protection Information Sharing system
- Continued commitment to supporting, contributing to and learning from Serious Case reviews, Domestic Homicide Reviews and Safeguarding Adult Reviews



### **Safeguarding focus during Pandemic**

NHS Enfield CCG safeguarding team continued to offer support and advice to commissioning and provider teams. The CCG requested Business Continuity plans from organisations and shared them with the Partnership Board manager as part of assurance for the continuity of services.

The CCG merged on the 1st of April 2020 to become North Central London CCG with a more joined up approach to safeguarding across the 5 North Central London boroughs.

The CCG supported a number of work streams including the homeless and rough sleepers group, domestic violence and abuse, care home support, provider concerns meetings and risk management panels, as well as virtual attendance at Partnership meetings. Supervision for Named Provider leads continued via virtual discussions.

Safeguarding referrals were notably decreased from all organisations, partly due to the significant reduction in A&E attendances for both children and adults. The lockdown restrictions imposed potentially has had an impact on individuals seeking treatment for conditions leading to some delays in care management.

Health has seen a significant increase in the number of patient deaths across acute Trusts and in Care homes, including individuals with Learning Disabilities.

#### Some examples of changes to practice:

Lead Nurse Assessor for Safeguarding supported a Care Home during the crisis. Her role included offering on site clinical leadership and support to the management team.

Children requiring Child Protection Medical examinations were risk assessed prior to attendance at a clinic appointment.

Collaborative working with Local Authority colleagues reduced the clinic time required for the child with most of the history taken over the phone. The clinic provision was moved to Edgeware hospital to further reduce the risk for the child, family and social worker attending an Acute Trust.

The Looked After Children health team moved to a virtual space with staff working from home and offering support to children over the phone. A consultant Paediatrician offered additional support to the locum team covering Initial Health Assessments. This led to an increase in compliance with achieving the 20 day target. Review health assessments were also completed over the phone with the

Designated Nurse supporting virtual strategy meetings as required.

The Named GPs and Designated Nurse coordinated a virtual Safeguarding Lead GP forum for the practice children and adult leads. Presentations included the Children's MASH Head of Service, Integrated Learning Disability Service and the IRISi Independent Domestic Violence Advocate.

# North Middlesex University Hospital NHS Trust

### **Safeguarding Team**

The Safeguarding Adult team capacity increased by two safeguarding advisors from November 2019.

A review of safeguarding within the Trust has been undertaken and the Adult Safeguarding team has now combined with the Safeguarding Children's team to form a Trust wide Safeguarding Team. Discussions are still ongoing with regards to the strategic leadership. oversight and management for safeguarding however it is anticipated that a senior role will be created that will report directly to the Chief Nurse. There is now one Trust Safeguarding Committee that covers both adults and children.

#### **Learning Disability**

A full time LD Liaison Nurse has been in post since November 2019. This had been funded as a part-time post. Through our electronic system Medway we have now been able to create a dashboard so that we have realtime data with regards to inpatients who have a Learning Disability.

#### **Training**

The North Middlesex has had an additional focus on training around the use of the Mental Capacity Act and Deprivation of Liberty



Safeguards. There has been ad hoc face to face teaching in clinical areas as well as mandatory training on Induction for clinical staff of all professions. Our current training data for MCA and DoLs stands at 88% which is the highest it has ever been.

Applications for DoLs have more than doubled during this reporting period. The reason for this is due to the increased awareness and confidence of staff with regards to MCA and

DoLs rather than an increase in patients who require DoLs application.

A series of six face to face sessions were provided by an external trainer in addition to the above. Face to Face Training has also been provided to Matrons and Ward managers at their study days. E-learning packages are also available and the Trust uses the Health Education England's MCA and DOLS e learning training packages.

Safeguarding Adult training has been delivered to the Board as part of their accountability. This was delivered by the Chair of Haringey Safeguarding Adult Board which shows the Trust's commitment to partnership working.

Training sessions specifically on domestic abuse have been provided as well as Train the Trainer sessions. Tailored sessions have been provided to ED staff and maternity staff.

#### **S42**

During 2019-20 65 Section 42 concerns raised against the Trust. This is considerably lower than the previous year 2018/19 where 108 cases were raised. Contained within this category are discharge issues, pressure area damage on discharge and poor communication. The majority of referrals relate to those in the over 70s category, again which is in line with the national picture.

The Trust has made significant changes to the discharge processes with a dedicated team that now is led by a Therapist to support with the discharge process. A time limited Improvement Board was set up to support developmental and improvement works in the Care of the Elderly wards. Post Covid, the Care of the Elderly wards have all been refurbished and renamed.

### **Safeguarding focus during Pandemic**

The Safeguarding Team has continued to deliver its statutory functions throughout Covid.

Visiting during Covid has been significantly restricted however communication with families has been maintained via mobile phones/iPads/FaceTime etc facilitated by the ward staff.

The IDVA service has not been on site since just before lockdown and not yet returned to work on site. Domestic abuse cases increasing during Covid (same number as for this time last year however only 40% of the ED attendances compared to the same period last year.

Neglect cases increased in comparison to last year and more complex.

ED attendances still below numbers compared to last year but beginning to climb steadily.

Face to face training recommenced 4 June (socially distanced) however online training has continued throughout Covid. Looking at more innovative ways of delivering training such as through Webinars and Team Meetings.

# One-to-One (Enfield)

### Our progress with regards to safeguarding adults at risk, children and young people over 2019-20

We ensure our members, staff and volunteers are aware of the different types of abuses and know about our safeguarding policies and procedures.

- We also ensure our staff and volunteers are trained on safeguarding and understand the importance of reporting and following organisation's policies and procedures when dealing with safeguarding matters.
- Our safeguarding policies and procedures are regularly reviewed and updated by the Management Committee and staff members.
- We also offer relevant safeguarding awareness/learning opportunities to our members, volunteers and staff so everyone can keep up to date with information and changes.

### Safeguarding focus during Pandemic

The following are some of the actions we have taken towards safeguarding our members and volunteers during this pandemic, to ensure that they are safe and healthy.



- Regular weekly phones calls to check how they are doing.
- Any safeguarding matters or any other concerns are addressed at our weekly staff zoom meetings and appropriate actions are taken to report the concerns.
- Many of our members are using social media such as Facebook and WhatsApp. which can create scope for hate crimes, so to ensure they are safe we have been checking our Facebook and WhatsApp group chats every day of the week, which has created extra demand on our work.
- We are in contact with Enfield Integrated Learning Disability Services and have been having our focus group meetings and learning disability partnership board meetings where we can raise our concerns and also keep abreast with any changes.
- Our CEO has been making regular video messages for our members explaining government's rules and guidance on the COVID-19 pandemic.

# Royal Free London NHS Foundation Trust

There has been a 12% increase in the number of referrals to the acute liaison nurses for people with learning disability. The team have also been able to make it easier for staff to identify people with a learning disability on their electronic staff record. We have produced Easy Read information about Safeguarding for people with a learning disability.

We have introduced changes to our incident and risk monitoring system that now means we are able to identify when a reported incident relates to a person with a learning disability. The liaison nurse is then able to review. We will also be able to analyse frequency of events and areas of concern. We have introduced a Trust wide policy for working with people with a learning disability. We have completed the NHS Improvement benchmarking audit for Learning Disabilities and Autism and are collating the outcomes and planning for improvements where they are required.

There has been an increase in the number of women referred to the specialist midwives for vulnerability and referrals to social care for the unborn. Two new posts within the Better Birth initiative have been created with a specific remit to support the safeguarding activity.

We have an ongoing awareness raising campaign to supporting staff who are or have

been victims of domestic abuse, This includes revising workplace policies and linking into the health and wellbeing strategy for staff

The CQC inspection report published on 10 May 2019 found that safeguarding was given sufficient priority by the trust however it was noted that the safeguarding training compliance needed improvement. The team have introduced safeguarding adults level 3 training which has had very positive evaluation, with 281 staff trained in six months.

Between April 2019 and March 2020, there were 1039 cases referred to the adult safeguarding team which were shared with 25 local authorities.

There has been an improvement seen through audit of the quality of the DoLS paperwork that is now reviewed and supplied to Enfield. The mental capacity assessments have increased in numbers to almost 100% per quarter and the quality of the assessment has vastly improved. We believe that this is in part due to the training we have delivered – we have focused on the MCA and DoLS for part of the Level 3 day, and we have been delivering bespoke training to wards specifically on the same subject. The Trust has a plan for implementing LPS, although this is currently on hold.

We continue to have hospital based independent domestic abuse advisors who are available to support patients and staff.

We ran an awareness raising campaign in July and December 2019 work place support for staff experiencing domestic abuse which included;

- leaflets and handouts for staff and mangers
- support from the Communication team to have regular promotional features
- Chief executive Vlog with an interview advisor on our intranet page freenet
- posters promoting the IDSVA for staff areas and toilets doors
- updated the DVA policy to include more about supporting staff who disclose
- safeguarding training about domestic abuse.

The campaign is ongoing.

We raised awareness of young carers on young carers day 30.01.2020 and worked with the Trust support hub for patients with long term conditions. We provided training for the staff and volunteers and developed pathways to make referrals for and identified young carer.

### **Safeguarding focus during Pandemic**

On the 24th March 2020 the RFLNHSFT safeguarding continuity plan was shared with the CCG leads.

The plan set out how safeguarding activity would be managed during the following weeks and has been updated more recently.

The safeguarding team remained in their roles and were able to work remotely or in offices where social distancing was maintained. Some of the access to remote working was challenging at times to get set up. One administrator was redeployed for a period of time.

We still had access to the hospital based Independent Domestic Sexual Abuse Advisors (IDSVA) although they were working from home and providing telephone support to patients and staff affected by domestic abuse. National helplines, email, text and live chat support services, and local specialist services, were promoted on Freenet along with knowledge of Silent Solutions the system the police uses to filter out accidental and hoax calls made from mobile phones.

We responded to one freedom of information request about the number of incidents of domestic abuse.

Staff were able to provide face to face support and guidance to the few inpatients that required it, such as patients with a learning disability by ensuring that they applied the appropriate PPE during the consultation.

Some staff we also able to support other areas of the Trust as required.

All face to face safeguarding training was halted and staff encouraged to access eLearning alternatives. As we have reintroduced level 3 safeguarding children we are able to get staff to think about the possible consequences for children and adults at home during lockdown.

RFL visiting restrictions were amended to allow one visitor for someone with a learning disability while they were in hospital. This was to decrease anxieties for the patient and to facilitate good communication.

Paediatric services across NCI were reconfigured and both the Royal Free and Barnet hospitals closed to inpatient paediatric patients and Barnet hospital closed to paediatric emergency patients. The safeguarding team undertook the liaison with community services for children attending the ED.

The community midwifery provision was scaled back to provide cover for the inpatient activity. However the vulnerable women's team was enhanced to ensure there was no impact on the safeguarding work.

All women under to care of the vulnerable womens team had their care plans reviewed to ensure that there were robust birth plans in place for women due to deliver during the next two months.

We introduced ICON, a coping with crying programme, for all new parents on the maternity wards and the neonatal unit. The bulk of parents would receive the intervention on day five at home when a midwife conducted a face to face visit.

The midwifery appointments schedule was revised but the majority of appointments would remain face to face for the vulnerable caseload.

No partners were permitted to attend appointments which meant that domestic abuse screening was easier to complete.

All case conferences, core groups, discharge planning meetings and strategy meetings were mapped out to ensure that if the named midwife could not attend a member of the safeguarding team would cover, virtually.

Child protection medicals were amended to reduce the amount of face to face time required with a the history taking completed over the telephone.

Safeguarding supervision was conducted by phone or virtually.

Multi-disciplinary weekly safeguarding meetings continued virtually.

School nurses covering the special needs school made regular contact with the vulnerable children's family regularly and school medicals were conducted by phone.

We produced a safeguarding newsletter which was promoted on the RFL daily COVID-19 update and on our Trust intranet.

A significant number of consultations were held over the phone or video appointments. Staff were reminded through a Safeguarding Newsletter and our internal intranet of how to get help and support and that it was still important that we ask questions and remain professionally curious about safeguarding, especially when we have concerns about the patient's or a family member's need for additional support or safety.

Also if they were not able to make contact with a vulnerable patient or a child or young person for a planned telephone or video consultation to treat that the same for a 'was not brought' or 'did not attend' face to face consultation. Where there were concerns the patient should not be discharged from the service without consideration being given to their vulnerability and any decision to discharge was communicated clearly to the GP.

Where teams were struggling with time constraints to complete the necessary paperwork, the

safeguarding advisors completed clinical incident forms, concerns forms and DoLS documentation on their behalf, particularly where staff were wearing full PPE as this makes it impossible to use computers. Staff were reminded that where patients lack the relevant mental capacity to consent to care and treatment, clinicians needed to seek the views from those closest to the patient in order to make a best interest decision. With visiting restrictions in place it made seeking these views more difficult, but complying with their legal obligation to seek these views, in order to make these decisions they were ascertained over the phone or via video calls.

Guidance from the OPG on how NHS staff could rapidly obtain details of its register of LPAs, EPAs and deputies were shared via our Freenet and on a newsletter.

All elderly or vulnerable patients being discharged home were given a care package which was a large bag of essential groceries.

Donations to the hospital of puzzle books, phones, iPads were utilised to keep patients engaged and allow them to communicate to the outside world while they were not allowed visitors.

The Trust has introduced a risk assessment process for staff at higher risk of COVID-19, including our BAME staff. Staff are being asked to complete a COVID-19 risk assessment form

which should be used to help identify risks and managers can then discuss actions that can be taken to reduce or eliminate any risks relating to work.

The Trust had a film crew from the BBC in from day one of lockdown, a two part series called Hospital was aired on the BBC to a fantastic response, it perfectly captured the struggles and challenges involved in coping with COVID-19.

#### Learning

The safeguarding team adapted quickly to remote working and it has been clear that there are some clear advantages for some people to have the opportunity to work from home.

The team have valued the weekly catch up meeting that we instigated and we will continue with it going forward.

The ICON programme for parents will continue and we are now rolling it out to our emergency departments so that it can be delivered when parents bring young babies to the ED.

The safeguarding children advisors have provided a lot of support to the vulnerable women's midwives by participating in safeguarding meetings and providing safeguarding supervision. We hope to continue this and will review as services start to return to normal.





**Telephone** 

Website www.enfield.gov.uk/safeguardingenfield



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