

BARNSLEY CLINICAL COMMISSIONING GROUP
SAFEGUARDING PEOPLE POLICY

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| Version: | 2.0 |
| Approved By: | Quality and Patient Safety Committee |
| Date Approved: | 13/12/18 |
| Name of originator/author: | S MacGillivray, A Fawcett and Dr L Oughton. |
| Name of responsible committee/individual: | QPSC |
| Name of executive lead: | Chief Nurse |
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| Target Audience: | All employees of the organisation |

THIS POLICY HAS BEEN SUBJECT TO A FULL EQUALITY IMPACT ASSESSMENT

Amendment Log

| Version No | Type of Change | Date | Description of change |
|-------------------|-----------------------|----------------------------|--|
| draft | | 02 December 2015 | Review of previous policy post care act |
| 1 | | 31 March 2016 | Approved by QPSC |
| 2.0 | Review | 26 th June 2018 | Title changed to remove the word vulnerable. Legal framework updated. The term “vulnerable adults” replaced with “adults at risk of abuse or neglect”. Role of Designated Adult Safeguarding Manager (DASM) removed as no longer required by Care Act 2014. 8.3 Allegations of Abuse amended to include adult policy “People in Positions of trust (PiPot) Terminology amended throughout to include; Safeguarding Adult Review (SAR) Domestic Homicide Review (DHR) |

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1. Introduction

- 1.1 This policy sets out the clear standards and requirements for NHS Barnsley Clinical Commissioning Group (Barnsley CCG) employed staff and services commissioned by Barnsley CCG. It details NHS Barnsley CCG governance arrangements for safeguarding and supports the advice and guidance laid out in the Barnsley Safeguarding Children Board (BSCB) and the Barnsley Safeguarding Adults Board (BSAB) Procedures and Guidance. These should be read in conjunction with the policy. The policy is also informed by the documents 'What to do if you are worried a child is being abused' (DfES 2006), Working Together to Safeguard Children (2018), Children Act (DCSF 1989 and 2004), The Care Act (2014), The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, the Mental Capacity Act (DH 2005) and the principles of Making Safeguarding Personal.
- 1.2 Barnsley CCG fully endorses that safeguarding is everyone's responsibility. Barnsley CCG will strive to ensure that the NHS contribution to safeguarding and promoting welfare is discharged effectively across the whole local health economy through its commissioning arrangements.
- 1.3 Achieving good outcomes for adults, children and young people requires all those who work with responsibility for assessment and the provision of services to work together according to agreed plans. Effective collaborative working requires professionals and agencies to be clear about:
- Their roles and responsibilities for safeguarding and promoting the welfare of adults and children and young people;
 - The legislative basis of their work;
 - The procedures to be followed, including the way in which information will be shared across professional boundaries, and what will be recorded;
 - Which agency, team or professional has lead responsibility;
 - Any timescales set down in regulations or guidance, which govern the completion of assessments, action plans and timing of reviews.
- 1.4 This policy outlines how NHS Barnsley CCG will fulfil its statutory duties under Section 11 of the Children Act 2004 and The Care Act 2014 to safeguard and promote the welfare of children, young people and adults. It is designed to ensure that health services in Barnsley are operating in accordance with legal and statutory guidance. In addition it takes account of best practice guidance (Intercollegiate 2014 Safeguarding Children and Young People: Roles and Competences for Health Care Staff).
- 1.5 NHS Barnsley CCG will hold providers of all NHS services that they commission to account for the safeguarding of all service users deemed to be at risk of abuse or neglect, monitored through the South Yorkshire Wide Safeguarding Standards (Appendix 1).

2. Policy Statement

2.1 NHS Barnsley CCG shares a commitment to safeguard and promote the welfare of Adults, Children and Young people.

NHS Barnsley CCG will:

- Comply with all national and local safeguarding policies and procedures;
- Ensure that regional and local guidance are implemented in the local health economy;
- Work closely with all statutory and voluntary partners represented on the Barnsley Safeguarding Adults Board and Barnsley Safeguarding Children Board;
- Ensure that the NHS in Barnsley has the capability and capacity to protect and promote the welfare of children, young people and adults in Barnsley;
- Ensure all commissioned health services comply with all national and local safeguarding policies and procedures and seek assurance with regard to this;
- Ensure that the wider health and social care community in Barnsley learns from serious incidents and serious case reviews and that required improvements are embedded into local services/practice;
- Ensure that recommendations and lessons learnt from safeguarding assurances, including Section 11, Children Act, self-assessment audits and Safeguarding Adult Reviews are implemented;
- Ensure all our employees know what their role is regarding safeguarding and are trained appropriately;
- Ensure that allegations made against our employees are responded to appropriately;
- Ensure that recommendations and lessons learnt from the Child Death Overview Panel (CDOP) are implemented.

2.2 As a commissioning organisation, NHS Barnsley CCG will work with partner agencies in order to develop quality systems, promote safeguarding practice across the district and effectively monitor performance of providers in relation to safeguarding adults, children and young people.

Specifically:

- All organisations providing services commissioned by NHS Barnsley CCG are required to demonstrate commitment to safeguarding adults, children and young people and to working within agreed local multi-agency procedures, national guidance and legislation;
- NHS Barnsley CCG will actively contribute to multi-agency responses regarding concerns of abuse or neglect within commissioned services;
- All providers are expected to establish procedures and systems of working that ensure safeguarding children concerns are referred to Barnsley Children's Social Care services as indicated in the Barnsley Safeguarding Children Board procedures and all safeguarding adult concerns are referred to appropriate teams as indicated in the South Yorkshire Safeguarding Adults Procedures and the Barnsley Safeguarding Adults Board Operational Guidance;

- NHS Trusts providing services commissioned by NHS Barnsley CCG are expected to actively contribute to the work of the Barnsley Safeguarding Children Board and the Barnsley Safeguarding Adults Board and their sub groups;
- All providers who deliver services commissioned by NHS Barnsley CCG are required to meet the minimum safeguarding standards as set out in this policy (See Appendix 1).

2.3 This policy applies to all employees (including students on placement and volunteers) of Barnsley CCG, any staff who are seconded to the organisation, contractors and agency staff and any other individual workers on CCG premises or conducting business on behalf of the CCG.

3. Addressing Equality & Promoting Diversity

3.1 In line with equality legislation, this policy aims to safeguard children, young people and adults who may be at risk of abuse or neglect irrespective of their protected characteristics as outlined in the Equality Act 2010.

The 9 protected characteristics are:

1. Age
2. Race
3. Sex
4. Disability
5. Marriage/civil partnership
6. Maternity /pregnancy
7. Religion/belief
8. Sexual orientation
9. Gender reassignment

4. Equality and Diversity Statement

4.1 NHS Barnsley CCG is committed to ensuring that it treats its employees fairly, equitably and reasonably and that it does not discriminate against individuals or groups on the basis of their ethnic origin, physical or mental abilities, gender, age, religious beliefs or sexual orientation.

4.2 If you have any concerns or issues with the contents of this policy or have difficulty understanding how this policy relates to you and/or your role, please contact the Document Owner/Author.

5. Governance and Accountability

5.1 The NHS Barnsley CCG Governing Body is responsible for ensuring all requirements relating to safeguarding and promoting the welfare of service users deemed to be at risk of abuse or neglect are in place and upheld by all providers, from whom services are commissioned. The governing body will assure itself that safeguarding is a priority across the health economy. The governing body receives regular reports and updates with reference to safeguarding including annual reports.

5.2 Local Safeguarding Boards are multi-agency bodies with a remit to protect those at risk of harm, as well as contributing to safeguarding their welfare:

- Barnsley Safeguarding Children Board has the lead responsibility for keeping children safe, as set out in the guidance under the Children Act 2004. This includes the prevention of significant harm or the risk of significant harm, as well as the wider remit of ensuring every child's welfare is safeguarded;
- Barnsley Safeguarding Adults Board has the lead responsibility for keeping adults safe. This includes the prevention of significant harm or the risk of significant harm, as well as the wider remit of ensuring every adult's welfare is safeguarded. As a result of the Care Act 2014, Safeguarding Adults Boards are a statutory requirement;
- The lead responsibility for coordinating Domestic Homicide Reviews lies with the Multi-agency Group the Community Safety Partnership. They will initiate, oversee and manage Domestic Homicide Reviews.

5.3 The NHS Barnsley CCG Quality and Patient Safety Committee will ensure that safeguarding and promoting the welfare of all service users deemed to be at risk of abuse or neglect is integral to clinical governance and audit arrangements.

5.4 The NHS Barnsley CCG Serious Incidents Process will oversee the investigation of and learning from Serious Incidents (SI) and Safeguarding Adult Reviews (SAR).

6. Leadership and Management

6.1 The NHS Barnsley CCG Chief Officer has responsibility for ensuring that the NHS contribution to safeguarding is discharged effectively across the whole local health economy through the commissioning arrangements.

6.2 The NHS Barnsley CCG Chief Nurse, as Executive lead for Safeguarding Children and Adults, will ensure that robust safeguarding assurance arrangements and improved safeguarding practice are in place, on behalf of the Chief Officer by:

- Working closely with the safeguarding leads from all partner agencies to ensure there are robust safeguarding arrangements across Barnsley;
- Directing the internal and external assurance of safeguarding arrangements across the health economy including developing relationships with the Local team of the NHS Commissioning Board and NHS regulators;

- Leading and developing the Barnsley health economy safeguarding assurance arrangements with providers, Local team of the NHS Commissioning Board and NHS regulators;
- Ensuring service providers are aware of their responsibilities in reporting safeguarding incidents;
- Ensuring the management of high level incidents in line with the BSCB and BSAB Serious Case Review / Safeguarding Adult Review and serious incident performance management processes as appropriate;
- Directing Barnsley's health economy performance in relation to serious safeguarding incidents and Serious Case Reviews / Safeguarding Adult Reviews;
- Providing strategic leadership to the safeguarding agenda across the Barnsley health economy to enable the NHS Barnsley CCG to meet its duties;
- Leading the NHS commissioning health contribution on the BSCB and BSAB;
- Leading the NHS commissioning health contribution to the Home Office PREVENT agenda;
- Implement and audit policy and strategy in relation to safeguarding;
- Developing partnerships with other CCG's, NHS Commissioning Board (NHS England) Local Team and other organisations to share best practise in relation to safeguarding;
- Leading the development of effective NHS overview reports for Serious Case Reviews/ Safeguarding Adult Reviews ensuring that lessons learnt are disseminated;
- Ensuring that NHS Barnsley CCG has effective professional appointments, systems, processes and structures in place to support the safeguarding lead;
- Ensure that NHS Barnsley CCG staff have access to appropriate training and monitor this;
- Ensuring that safeguarding is positioned as core business in NHS Barnsley CCG strategic and operating plans and structures.

6.3 Barnsley CCG Contract Managers are accountable and responsible for ensuring:

- All services commissioned have robust policies and procedures embedded to safeguard and promote the welfare of children, young people and adults which are in accordance with the BSCB and BSAB Procedures (Safeguarding Standards for contracts – Appendix 1);
- All contracts and service specifications will have clear service standards for safeguarding service users deemed to be at risk of abuse or neglect;
- That monitoring arrangements are clear.

6.4 In addition, the CCG in Barnsley will ensure that Designated Nurses for Safeguarding Adults and Children, together with an appropriate doctor e.g. Named GP Safeguarding, Designated Doctor Safeguarding Children, are in place to take a strategic and professional lead on all aspects of the NHS contribution to safeguarding service users deemed to be at risk of abuse or neglect . The function of these professionals is to:

- Provide advice and expertise for other professionals across the NHS and other partner agencies;
- Provide advice, support and professional supervision to the Named Professionals in each provider organisation to:
 1. Promote good practice and quality assure the services they provide
 2. Ensure that staff use effective systems to record their work
 3. Follow local multi-agency policy and procedures
 4. Enable them to manage stresses within their work.
- Ensure that Working Together (2018), the Barnsley Safeguarding Children Board Serious Case Review panel and Safeguarding Adult Review (SAR) guidance are adhered to with regard to commissioning a health overview report to evaluate the practice and learning;
- Evaluate the lessons learnt from the Child Death Overview Panel and ensure that recommendations are appropriately actioned in line with Working Together Chapter 7 and BSCB;
- Evaluate learning from SAR's and ensure that recommendations are actioned and embedded;
- Lead the development of a robust safeguarding training strategy for health professionals across all health providers.

7. Commissioning Health Care

- 7.1 NHS Barnsley CCG has a responsibility to assure itself that all commissioned health services adhere to national and local safeguarding procedures, ensuring that their functions are exercised with a view to safeguarding and promoting the welfare of all service users deemed to be at risk of abuse or neglect.
- 7.2 NHS Barnsley CCG will ensure that services are commissioned which improve the quality of safeguarding arrangements and practice for the population of Barnsley.
- 7.3 NHS Barnsley CCG requires all providers to have in place a comprehensive safeguarding policy which is in line with national, BSCB, BSAB guidance and which takes account of guidance from relevant professional bodies. Inherent within any policy should be that service users deemed to be at risk of abuse or neglect, without exception, have the right to protection from abuse regardless of their protected characteristics as outlined in the Equality Act 2010.
- 7.4 BSCB, BSAB and NHS Barnsley CCG require that agencies take responsibility for ensuring staff are appropriately trained to meet the safeguarding needs of adults whom they may have contact with, either directly or via their family/carers and that robust systems, policies and procedures are in place to safeguard and promote the welfare of all service users deemed to be at risk of abuse or neglect.

8. Our Staff

8.1 Recruitment

NHS Barnsley CCG has a Recruitment Policy which stipulates that at least one member of each recruitment panel should have attended recruitment and selection training which is mandatory for all recruiting managers. The training incorporates safe recruitment principles which are then required to be adhered to when selecting and appointing an individual. The process is audited to check that policy requirements are being followed. The Policy complies with the six NHS Employment check standards.

NHS Barnsley CCG will comply with the Disclosure and Barring Service (DBS) which was established under the protection of Freedoms Act 2012. This services aims to help employers make safer recruitment decisions and prevent unsuitable people from working with at risk groups including children.

8.2 Managers are responsible for making sure that:

- Staff are aware of their roles and responsibilities in relation to safeguarding people;
- Staff carry out their roles in accordance with policies and procedures;
- The level of training required for each member of staff is identified;
- Staff attend the appropriate level of training and have access to appropriate supervision and support;
- Records of training attendance are kept for all staff;
- Ensure that all allegations of abuse are taken seriously, reported and investigated appropriately in line with local and national procedures.

8.3 Allegations of Abuse

NHS Barnsley CCG takes very seriously allegations of abuse which may arise from a child, an adult, a parent, a member of the public or staff. NHS Barnsley CCG has identified a Senior Officer, who ensures that all statutory and local policies and duties are undertaken. Where this involves a directly employed member of staff and there is a prima facie case to answer an investigation under the Local Disciplinary Procedure would be undertaken by the relevant manager liaising as necessary with any other agencies involved in the case. If the allegation relates to a member of staff abusing a member of the public please refer to BSCB Allegations against staff policy and the BSAB Protocol for Responding to Concerns about a Person in a Position of Trust (PiPoT).

9. Information Sharing

9.1 NHS Barnsley CCG has high level information sharing policies in place and is proactive in working in partnership with local statutory and voluntary agencies in order to protect and promote the welfare of Barnsley residents. Senior managers will promote good practice in information sharing according to published national guidance.

10. Incidents, Near Misses and Complaints/Serious Care Reviews (SCRs)/Safeguarding Adult Reviews (SARs)/Domestic Homicide Reviews (DHRs)

- 10.1 NHS Barnsley CCG will assure itself that all providers have in place policies which ensure that employees record any near misses, incidents, unmet needs or serious untoward incidents in relation to safeguarding children or adults on their incident management forms and systems.
- 10.2 SCRs are conducted in accordance with Working Together to Safeguard Children (2018), BSCB procedures and SAR's within BSAB policies. These include areas such as:
- When a child dies, including by suicide, abuse or neglect are known or suspected to be a factor in death;
 - Where the case raises concern about inter-agency working when a person deemed to be at risk of abuse or neglect has suffered significant harm;
 - Where an incident has resulted in a domestic homicide review (DHR).
- 10.3 NHS Barnsley CCG will review and evaluate the practice of all involved health professionals, including GPs and all independent health providers involved in an SCR, SAR or DHR. The designated professionals, in conjunction with the BSCB and BSAB will quality assure the process ensuring that Individual Management Reports and action plans meet the expected standard of Ofsted and the Care Quality Commission.
- 10.4 Barnsley CCG will require assurance that all relevant recommendations arising from SCRs, SARs and DHRs are actioned in a timely manner.

11. Minimum Safeguarding Adults and Children Standards for Providers

11. All providers of services commissioned by NHS Barnsley CCG are required to meet specified minimum standards in relation to safeguarding adults and children. These standards are not exhaustive and may be in addition to those standards required by legislation, national guidance or other stakeholders, including regulators and professional bodies. (See Appendix 1).

12. Performance and Monitoring of Providers

- 12.1 Provider's performance in relation to safeguarding adults and children will be managed primarily through existing contract monitoring arrangements.
- 12.2 Information will be provided to NHS Barnsley CCG on a quarterly and/or annual basis. Providers will be advised in advance of when this information is required if it is out of their existing internal reporting schedule.

13. Conclusion

- 13.1 The safety and welfare of people at risk of abuse or neglect is everyone's responsibility. The health service will work in partnership with the Local Authority, other public organisations, the private and the third sector to ensure that all clients receive appropriate and safe health care.

Safeguarding Standards for Commissioners of Services

REVISED STANDARDS FOLLOWING REVIEW OF RECOMMENDATIONS FROM WINTERBOURNE INVESTIGATION

Important points:

- The standards are a proposed minimum standard set. Where commissioners have existing standards or arrangements that go beyond these, then the higher standard should be maintained;
- Standards that only apply to specific provision, i.e. NHS or Care Home providers have this identified within the body of the standard, all others standards should be viewed as universal;
- Unless specifically mentioned within the body of the standard, the kind of evidence required and the frequency of monitoring will be agreed locally;
- Within Yorkshire & the Humber a supplementary document will be provided that suggests the kinds of evidence that may be required from different types of providers and the frequency of monitoring for certain standards.

| Policy and procedures | |
|-----------------------|---|
| 1.1 | The Provider will ensure that it has up to date Organisational safeguarding children and adults policies and procedures which reflect and adhere to the Local Safeguarding Children Board (LSCB) and Local Safeguarding Adults Board (SAB) policies |
| 1.2 | The Provider will ensure that Organisational safeguarding policies and procedures give clear guidance on how to recognise and refer child / adult safeguarding concerns and ensure that all staff have access to the guidance and know how to use it. |
| 1.3 | The Provider will ensure that all relevant policies and procedures are consistent with and referenced to safeguarding legislation, national policy / guidance and local multiagency safeguarding procedures. |
| 1.4 | The Provider will ensure that all policies and procedures are consistent with legislation / guidance in relation to Mental Capacity Act 2005 and consent, and that staff practice in accordance with these policies. |
| 1.5 | The Provider will have an up to date 'whistle-blowing' / Raising Concerns procedure, which is referenced to local multiagency procedures and covers arrangements for staff to express concerns both within the organisation and to external agencies. The provider must have systems in place to demonstrate that all staff are aware of their duties, rights and legal protection, in relation to whistle-blowing/Raising Concerns and that they will be supported to do so. |
| 1.6 | The providers of care homes and hospitals will have an up to date policy and procedure covering the Deprivation of Liberty Safeguards 2009 (or any replacement guidance or legislation), and will ensure that staff practice in accordance with the legislation. |
| 1.7 | NHS Trusts and all providers of hospitals and care homes will have an up to date policy(s) and procedure(s) covering the use of all forms of restraint. These policies and procedures must adhere to contemporary best practice and legal standards. |
| 1.8 | The Provider will ensure that there is a safeguarding supervision policy in place and that staff have access to appropriate supervision, as required by the provider or professional bodies. |
| 1.9 | All providers will ensure that they have relevant policies and procedures in place to ensure appropriate access to advocacy within the care setting, including use of statutory advocacy roles. These policies and procedures must adhere to contemporary best practice and legislation. |

| Governance | |
|------------|---|
| 2.1 | The Provider will identify a person(s) with lead responsibility for safeguarding children and safeguarding adults. |
| 2.2 | NHS Trusts will identify a Board level Executive Director with lead responsibility for safeguarding adults and children. The NHS Trust will also have in post a named doctor and named nurse for adult and children safeguarding with sufficient capacity to effectively carry out these roles |
| 2.3 | NHS Trusts will identify a named health or social care professional with lead responsibility for ensuring the effective implementation of the Mental Capacity Act and Deprivation of Liberty Safeguards. |
| 2.4 | The Provider must ensure that there is a system for monitoring complaints, incidents and service user feedback in order to identify and refer any concerns including potential neglect. |
| 2.5 | NHS Trusts will ensure that there is an effective system for identifying and recording safeguarding concerns, patterns and trends through its governance arrangements including; risk management systems, patient safety systems, complaints, PALS and human resources functions, and that these are referred appropriately according to multiagency safeguarding procedures. |
| 2.6 | NHS Trusts should identify and analyse the number of complaints and PALS contacts that include concerns of abuse or neglect and include this information in their annual safeguarding or complaints report reviewed by their board. |
| 2.7 | The Provider must ensure that there are systems for capturing the experiences and views of service users in order to identify potential safeguarding and issues and inform constant service improvement. |
| 2.8 | Providers of hospitals and care homes, will ensure that there are effective systems for recording and monitoring Deprivation of Liberty applications to the authorising body/Court of protection. |
| 2.9 | The Provider will review the effectiveness of the organisations safeguarding arrangements at least annually. |
| 2.10 | NHS Trusts must have in place robust annual audit programmes to assure itself that safeguarding systems and processes are working effectively and that practices are consistent with the Mental Capacity Act (2005). |
| 2.11 | <i>All providers will have appropriate and effective systems in place to ensure that any care provided, is done so with due regard to all contemporary legislation. This includes, but is not restricted to, the Human Rights Act, Mental Capacity Act and Mental Health Act.</i> |
| 2.12 | The Provider will, where required by the local safeguarding board(s), consider the organisational implications of any Serious Case Review(s) and will devise and submit an action plan to the local responsible safeguarding board to ensure that any learning is implemented across the organisation. |

| Multiagency working | |
|----------------------------|--|
| 3.1 | The Provider will cooperate with any request from the Safeguarding Boards to contribute to multi-agency audits, evaluations, investigations and Serious Case Reviews, including where required, the production of an individual management report. |
| 3.2 | The Provider will ensure that any allegation, complaint or concern about abuse from any source is managed effectively and referred according to the local multi-agency safeguarding procedures. |
| 3.3 | The Provider will ensure that a root cause analysis is undertaken for all pressure ulcers of grade 3 or 4, and that a multi-agency referral is made where abuse or neglect are believed to be a contributory factor. |
| 3.4 | The Provider will ensure that all allegations of neglect or abuse against members of staff (including staff on fixed-term contracts, temporary staff, locums, agency staff, volunteers, students and trainees) are referred according to local multi-agency safeguarding procedures. |
| 3.5 | The Provider will ensure that organisational representatives/practitioners make an effective contribution to safeguarding case conferences/strategy meetings where required as part of multiagency procedures. |
| 3.6 | The Provider will where required, ensure senior representation on the Local Safeguarding Children Board and Local Safeguarding Adults Board and contribution to their sub-groups. |
| Recruitment and employment | |
| 4.1 | The Provider must ensure safe recruitment Policies and Practice which meet Contemporary NHS Employment Check Standards. Including Disclosure and barring Service (DBS) for all eligible Staff. This includes staff on fixed-term contracts, temporary staff, locums, agency staff, volunteers, students and trainees. |
| 4.2 | The Provider will ensure that Post recruitment employment checks are repeated in line with all contemporary national guidance and legislation . |
| 4.3 | The Provider must ensure that their employment practices meet the requirements of the Disclosure and Barring Service (DBS) and that referrals are made to the DBS and relevant professional bodies where indicated, for their consideration in relation to barring . |
| 4.4 | The Provider should ensure that all contracts of employment (including staff on fixed-term contracts, temporary staff, locums, agency staff, volunteers, students and trainees) include an explicit reference to staffs responsibility for safeguarding children and adults. |
| 4.5 | The Provider will ensure that all safeguarding concerns relating to a member of staff are effectively investigated, and that any disciplinary processes are concluded irrespective of a person's resignation, and that 'compromise agreements' are not be allowed in safeguarding cases. |

| Training | |
|----------|--|
| 5.1 | The provider will ensure that all staff and volunteers undertake safeguarding training appropriate to their role and level of responsibility and that this will be identified in an organisational training needs analysis and training plan. |
| 5.2 | The Provider will ensure that all staff, contractors and volunteers who come into contact with service users/patients undertake safeguarding awareness training on induction, including information about how to report concerns within the service or directly into the multi-agency procedures. |
| 5.3 | The Provider will ensure that all staff who provide care and/or treatment, undertakes training in how to recognise and respond to abuse (How to make an alert) at least every 3 years. |
| 5.4 | The Provider will ensure that all staff members (including staff on fixed-term contracts, temporary staff, locums, agency staff, volunteers, students and trainees) who provide care or treatment, have an understanding of the principles of the Mental Capacity Act 2005 and consent processes, appropriate to their role and level of responsibility , at the point of induction. |
| 5.5 | The Provider will ensure that all staff and volunteers undertake Mental Capacity Act 2005 and consent training, including the Deprivation of Liberty Safeguards appropriate to their role and level of responsibility and that this will be identified in an organisational training needs analysis and training plan. |
| 5.6 | The Provider will undertake regular training needs analysis to determine which groups of staff require further safeguarding children training in accordance with the intercollegiate document. |
| 5.7 | NHS providers will undertake a regular comprehensive training needs analysis to determine which groups of staff require more in depth safeguarding adults training. As a minimum this will include all professionally registered staff with team leadership roles undertaking multiagency training in how to recognise and respond to abuse. |
| 5.8 | The Provider will ensure a proportionate contribution to the delivery of multiagency training programmes as required by local safeguarding boards. |

Equality Impact Assessment (template)

| | | |
|--|---|--------------------------------------|
| Title of policy or service: | Barnsley clinical commissioning group Safeguarding People Policy | |
| Name and role of officer/s completing the assessment: | S MacGillivray – Designated Nurse Safeguarding Adults & Patient Experience, A Fawcett- Designated Nurse Safeguarding Children & Looked After Children and Dr L Oughton – Named GP Safeguarding Vulnerable People. | |
| Date of assessment: | | |
| Type of EIA completed: | Initial EIA ‘Screening’ <input type="checkbox"/> or ‘Full’ EIA process <input checked="" type="checkbox"/> | <i>(select one option) Full</i> |

| 1. Outline | |
|--|---|
| Give a brief summary of your policy or service <ul style="list-style-type: none"> • including partners, national or regional | This policy sets out clear standards and requirements for NHS Barnsley Clinical Commissioning Group in relation to safeguarding people. |
| What Outcomes do you want to achieve | The organisation meets governance and standards required relating to the safeguarding of people. |

| | |
|---|--|
| Give details of evidence, data or research used to inform the analysis of impact | The policy is based on national policies, acts of parliament and guidance. |
| Give details of all consultation and engagement activities used to inform the analysis of impact | None |

Identifying impact:

- **Positive Impact:** will actively promote the standards and values of the CCG.
- **Neutral Impact:** where there are no notable consequences for any group;
- **Negative Impact:** negative or adverse impact: causes or fails to mitigate unacceptable behaviour. If such an impact is identified, the EIA should ensure, that as far as possible, it is eliminated, minimised or counter balanced by other measures. This may result in a 'full' EIA process.

| 2. Gathering of Information | | | | | |
|---|--------------------------------------|--------------------------|--------------------------|---|--|
| This is the core of the analysis; what information do you have that might <i>impact on protected groups, with consideration of the General Equality Duty.</i> | | | | | |
| (Please complete each area) | What key impact have you identified? | | | For impact identified (either positive or negative) give details below: | |
| | Positive Impact | Neutral impact | Negative impact | How does this impact and what action, if any, do you need to take to address these issues? | What difference will this make? |
| Human rights | Yes | <input type="checkbox"/> | <input type="checkbox"/> | The policy is based on the Human rights of both children and adults and helps to protect these. | Implementation of the policy should ensure the CCG meets the requirements placed on it to safeguard all children and adults at |

| | | | | | |
|--|--------------------------|--------------------------|--------------------------|---|---------------------------|
| | | | | | risk of abuse or neglect. |
| Age | Yes | <input type="checkbox"/> | <input type="checkbox"/> | The policy applies to all age groups and offer protection to those that may be at risk due to their age. | AA |
| Carers | Yes | <input type="checkbox"/> | <input type="checkbox"/> | The policy applies to all people whether they are carers or clients. | AA |
| Disability | Yes | <input type="checkbox"/> | <input type="checkbox"/> | The policy does not discriminate against any protected characteristic and helps to support those who may be at risk due to having a protected characteristic. | AA |
| Sex | Yes | <input type="checkbox"/> | <input type="checkbox"/> | AA | AA |
| Race | Yes | <input type="checkbox"/> | <input type="checkbox"/> | AA | AA |
| Religion or belief | Yes | <input type="checkbox"/> | <input type="checkbox"/> | AA | AA |
| Sexual orientation | Yes | <input type="checkbox"/> | <input type="checkbox"/> | AA | AA |
| Gender reassignment | Yes | <input type="checkbox"/> | <input type="checkbox"/> | AA | AA |
| Pregnancy and maternity | Yes | <input type="checkbox"/> | <input type="checkbox"/> | AA | AA |
| Marriage and civil partnership (only eliminating discrimination) | Yes | <input type="checkbox"/> | <input type="checkbox"/> | AA | AA |
| Other relevant groups | Yes | <input type="checkbox"/> | <input type="checkbox"/> | AA | AA |
| HR Policies only: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |

IMPORTANT NOTE: If any of the above results in 'negative' impact, a 'full' EIA which covers a more in depth analysis on areas/groups impacted must be considered and may need to be carried out.

Having detailed the actions you need to take please transfer them to the action plan below.

| 3. Action plan | | | | |
|---------------------------------|-------------------------|---|------------------|----------------------------|
| Issues/impact identified | Actions required | How will you measure impact/progress | Timescale | Officer responsible |
| No actions required. | | | | |

| 4. Monitoring, Review and Publication | | | | |
|--|----------------------------------|-----------------------------|-----------------------------|-----------|
| When will the proposal be reviewed and by whom? | Lead / Reviewing Officer: | A Fawcett or S MacGillivray | Date of next Review: | July 2020 |

Once completed, this form **must** be emailed to the Equality Lead barnsleyccg.equality@nhs.net for sign off:

| | |
|---------------------------------|---------------------------|
| Equality Lead signature: | Colin Brotherston-Barnett |
| Date: | 04/09/2018 |