



NHS Greater Glasgow and Clyde **Public Protection Strategy** **Safeguarding: It Matters to Us**

Five Nations Seminar Event 21 June 2024

NHSGGC: The Scope



NHS Greater Glasgow and Clyde (NHSGGC) is the largest NHS organisation in Scotland and one of the largest in the UK and Europe covering six local authority area - Health and Social Care Partnerships, with a population of 1.3 million.



NHSGGC is responsible for providing and managing a whole range of health services including hospitals and General Practice. NHSGGC works alongside partnership organisations including Local Authorities and the voluntary sector.



NHSGGC has nine main hospital sites and 35 hospitals of different types, this includes five maternity hospitals/units, five Emergency Departments and three Minor Injuries Units.



Contracts with around 232 GP Surgeries (1300 General Practitioners); dental services in more than 279 locations; almost 188 Optician practices; over 50 Health Centres and Clinics and more than 288 Pharmacies

NHS GGC Public Protection Service



Executive Nurse Director – Delegated Executive Lead for Public Protection

Development of Public Protection Service 2022 – additional responsibilities for Adult Support and Protection (ASP) to ensure consistent and standard approach to Child Protection (CP) and ASP.

The Public Protection Unit (PPU) is comprised of:

Chief Nurse – Head of Public Protection Service

Public Protection Medical Lead

Public Protection Lead Nurse – Child Protection

Public Protection Lead Nurse – Adult Support and Protection

Public Protection Nurse Advisors

Development Officer / Administration Team

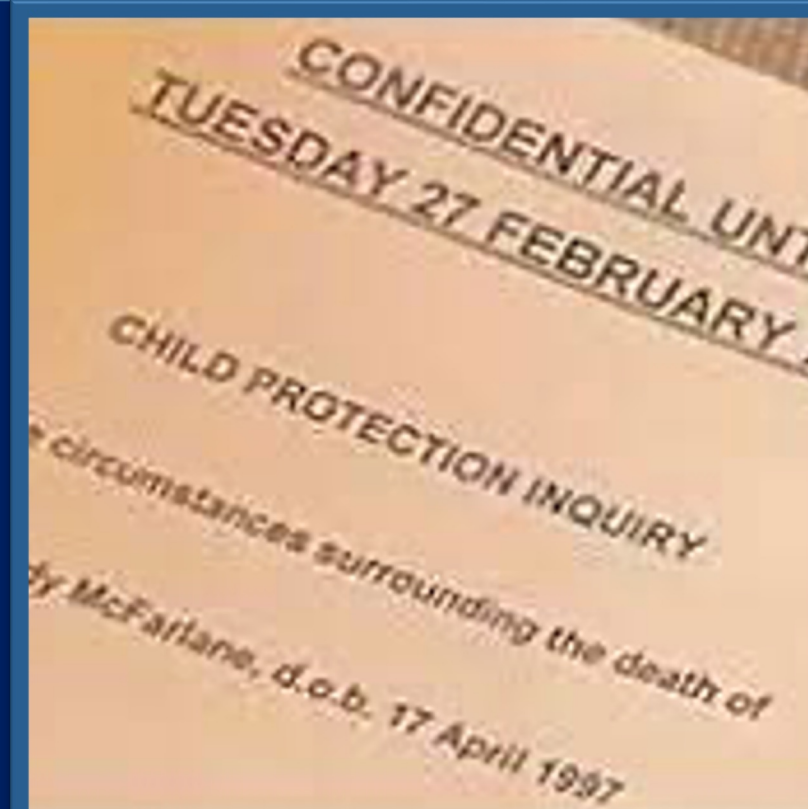
Lead Paediatrician for Child Protection

Overview



- Scottish Policy Context
- Public Protection Case Vignettes
- Public Protection NHS Scotland Accountability and Assurance Framework
- Reviewing and Strengthening NHS GGC approach
- Consulting and Engaging the Public Protecting Community Across the System



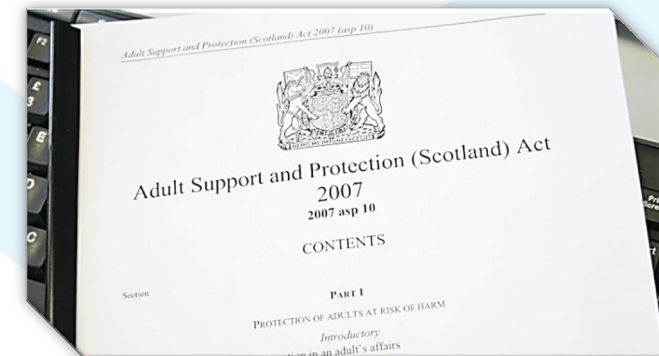


- **Kennedy McFarlane:** Inquiry finds death of murdered girl 'could have been prevented'
 - Led to major review of the Child Protection system in Scotland and clear multi-agency responsibilities defined.

Current Policy Drivers – not exhaustive



- **National Guidance for Child Protection in Scotland 2023**
- **Adult Support & Protection (Scotland) Act 2007**
- **Revised Code of Practice (2022)**
- **NHS Scotland Accountability Framework for Public Protection 2022**
- **Regulatory Bodies Codes of Practice- NMC, GMC, GDC, GPC**



Public Protection – Key Components



No one discipline or agency alone is responsible for ensuring the safety of those at risk, it is therefore vital that NHS GGC staff work with their partners towards providing safer outcomes for our most vulnerable citizens.

Public Protection is a Shared Responsibility

Safeguarding: It Matters To Us



Reflection on Public Protection Cases



REVEALED **LOCKERBIE CONFESSION**
Terrorist bombmaker admitted to wife his group - not the Libyans - planted the bomb **PAGES 4-10**

dailymirror.co.uk facebook.com/TheScottishDailyRecord twitter.com/Daily_Record
FRIDAY, DECEMBER 21, 2016

Daily Record
SCOTLAND'S CHAMPION **99p**

EVIL PARENTS JAILED

Celtic Eddie ready to play **BACK PAGE**

THE BIG SOAP QUIZ **PAGES 26&27**

Little Lauren starved, neglected & left to die in utter squalor

TRAGEDY
Two women were sent to jail to await sentence yesterday for the sickening neglect of a girl who died aged only two.

GRANT McCABE
Sweeney showed such callous indifference to daughter Lauren Wade that she died from complete neglect - filthy, emaciated and infested with lice.

Prosecutors dropped a charge of killing Lauren, and Wade and Sweeney admitted neglect. **SEE PAGES 4&5**

Reflecting on the tragic deaths of Declan Hainey and Lauren Wade



Declan



Baby born 17th April 2008 in RAH.

Badly decomposed body found by grandmother and step-grandfather on 30th March 2010. Not possible to determine cause of death nor when Declan died - estimate of the time of death suggests this may have been up to six months prior to discovery

Mother known to services for a number of years. Involved with Health and Social Work addiction services in the period immediately preceding birth and in the first year of life

Relationship with father ended before the birth of Declan - played no part in the care of Declan - no contact with him. Declan was not subject to Child Protection procedures and was not subject of any formal supervision measures.



Lauren



Morning 20th March 2015 aged 2 years and 5 months was found unresponsive on the couch within her home. Lauren was later pronounced dead at RHSC

Post mortem examinations identified Lauren was filthy with severe head lice infestation, was extremely thin and underweight with evidence of severe neglect. The infestation period was estimated by the Pathologist to be for at least 6 months but possibly up to 17 months or longer.

On the day of Lauren`s death the house was described as uninhabitable by Police. It was filthy with rubbish strewn throughout, rubbish dated back to 2013.

Lauren lived with her two sisters and her mum and partner though professionals thought she was a single parent. There was no knowledge of the children`s father or whether he was involved in parenting. They were known to universal health services and education.

Why Public Protection Matters



“At the heart of the Significant Case review is a young woman from within our community and it is to that community we are seeking information.”

‘Carers’ jailed for murder of vulnerable
Margaret Fleming



Esther Brown: Man charged with rape and murder of pensioner in her own home



Margaret



Margaret was murdered by a couple thought to be her 'carers'. She is thought to have been murdered between December 1999 and January 2000. In 2016 it became apparent she had not been seen for many years and was missing.

Margaret was not formally diagnosed with a learning disability but was treated as having additional needs. She was in receipt of benefits over a sixteen-year period without being seen.

Margaret's parents had a difficult relationship and were separated. Margaret initially lived with her father and spent some time living with her grandparents and mum. Respite was provided by family friends which extended to her remaining with them. These family friends were eventually convicted of her murder.

Margaret attended mainstream school and college but gradually became invisible.



MAPPA SCR: Person H



On 15 October 2021, Person H was convicted of Murder and Section 1 Sexual Offences (Scotland) Act 2009 (Rape) of Woman A and subsequently sentenced to life imprisonment.

Person H had a turbulent childhood. His mother had a history of schizophrenia and his father had little or no involvement in his life. When 5 years old, Person H witnessed his mother fall to her death from their fifth-floor home – Person H considered it most likely to be suicide.

From 10 years old, Person H was regularly using cannabis and alcohol and was engaged in criminality and antisocial behaviour.

Person H used a wide variety of drugs with alcohol, becoming problematic from the age of 14 years. He was homeless from 2009 until 2013; during this period, his alcohol and drug use increased and were a significant factor in his criminal offending behaviour.

Why do we need a NHS Public Protection Accountability & Assurance Framework?



To date health boards have not had mutual access to any standardised self-evaluation toolkit, consequently, variations have been highlighted in Health Board:

- designated roles
- functions
- resourcing
- governance arrangements for public protection

Variations have led to inconsistencies in lines of accountability; governance; delivery and support for public protection services.

NHS Scotland Accountability Framework for Public Protection 2022



Health Boards have structural and organisational responsibilities in respect of child and adult protection.

These include use of:

- appropriate policies to keep child and vulnerable adults safe
- safe recruitment practices
- staff induction and provision of adequate training
- procedures for whistle blowing and complaints
- robust information sharing agreements
- the promotion of a workplace culture that listens to children, young people, and adults and considers their views and wishes.

NHS Scotland Accountability Framework For Public Protection 2022



- Sets out exemplar evidence of high-quality, safe, and effective services that promote the protection of children and adults for territorial Health Boards
- Evidence reflects key recent policy and practice developments, findings from Scotland's Independent Care Review and subsequent publication of The Promise, and a range of sources including inspection findings and reviews of cases where children and adults have died or been significantly harmed.
- The Framework is intended to guide Health Boards in assessing the adequacy and effectiveness of their public protection arrangements at both strategic and operational levels and to inform existing Health Board and shared multi-agency governance and assurance arrangements, covering all levels of staff including independent contractors.
- Chief Executives should consider whether this evidence is reflective of the public protection arrangements in their Health Board, and where further focus is required as part of ongoing development and quality assurance processes.

STANDARDS 1 - 4



1. An executive Health Board lead has overall responsibility for child protection, adult protection, and MAPPA
2. Lead clinicians are resourced and supported to provide advice, expertise, and professional leadership across the Health Board and contracted services.
3. All NHS employees, GP practices, and independent contracted practitioners are supported and directed to the actions they need to take when a child or adult is at risk of harm.
4. The Health Board promotes a children's rights-based approach and a culture of listening to children and young people and taking account of their wishes and feelings.

STANDARDS 5 - 8



5. Robust governance, accountability, assurance, and reporting arrangements for public protection are in place across Health Board services

6. Education, learning, and development arrangements support all NHS employees, GP practices, and independent contracted practitioners in their public protection roles and responsibilities.

7. Strategic and operational arrangements between the Health Board and its multi-agency partners support effective joint working and communication.

8. The Health Board provides an effective medical response for children and adults in need of assessment and care.

NHS Scotland Accountability Framework for Public Protection 2022



- NHSGGC contributed to National Short Life Working Group and Test of Change
- Local Benchmarking exercise undertaken to support the identification of good practice, some gaps and inconsistencies and areas for improvement.
- 8 standards, 54 sub standards, 160 measures

Developing Our Strategy



- Building on the National Public Protection Assurance and Accountability Framework;
- Engagement Events;
- Engagement with Public Protection Chief Officers Groups, Public Protection Forum, Area Nursing and Midwifery Advisory Committee , Board Clinical Governance Forum, Executive Nurse Director – Senior Management Team, Corporate Management Team;
- Current knowledge of the views of children, young people and their families and our adult and older people through local engagement activity, contribution to Inspections and Care Assurance activity;
- Webropol Survey
- Communication with our Staff;
- Ensuring roles and responsibilities are clearly understood;
- Role of Public Protection Forum to Support, Monitor and Escalate.

We have a **bold new vision** for NHSGGC

NHSGGC Public Protection Strategy



.....because when it goes wrong, it goes badly wrong.

‘Those who occupy senior positions in the public sector must be required to account for any failure to protect vulnerable children from deliberate harm or exploitation. The single most important change in the future must be the drawing of a clear line of accountability, from top to bottom, without doubt or ambiguity about who is responsible at every level for the well-being of vulnerable children.’ Lord Lamming (Victoria Climbe)

This statement is transferrable to vulnerable adults.



Safeguarding - It Matters To Us

NHSGGC
Public Protection Strategy
2023 - 2026 - DRAFT



Our Vision

Our vision is to reduce the risk of harm to babies, including the unborn, children, young people and adults in our communities. We do this by working together across all our health services and our multi agency partners.

We are committed to providing a high quality public protection service that provides leadership, support and works in collaboration to keep people safe and protected from harm.

NHSGGC is committed to delivering on our **Six Strategic Aims** which have been developed in collaboration with a wide range of stakeholders.

NHSGGC Public Protection Strategy



Strategic Aim 1	We keep people safe – prevent and reduce harm
Strategic Aim 2	Our Staff are confident and competent
Strategic Aim 3	Our leaders and managers will ensure competent discharge of services and professional duties
Strategic Aim 4	Our strengthened approaches between and across strategic and operational practice and processes enhance our visibility and influence.
Strategic Aim 5	Our Leaders value the importance of partnership working and seek opportunities to improve its effectiveness in achieving a broad range of Public Protection outcomes for people.
Strategic Aim 6	Our quality assurance processes are SMART and developed actions consistently seek assurances of continued improvement.

NHSGGC Public Protection Strategy



Overseeing

NHSGGC Public Protection Forum

Delivering

Managers, clinicians, professional leads, clinical governance leads, Public Protection Service

Practising

Professional, clinical, administrative and support staff including independent contractors

Supporting

Staff employed in activities underpinning clinical and care governance, e.g. those involved in clinical effectiveness, audit, complaints handling and risk management

All Nurses have duty to make sure that:



Safety and Quality

- Safeguarding concerns are dealt with promptly and appropriately
- Reported in a secure and responsible way to all relevant agencies
- Escalate or alert those able to protect patients and / or other children/ adults at risk from harm
- Minimise the risk of abuse

Knowledge, Skills and Performance

- Make the care of your patient your first concern.
- Keep your professional knowledge and skills up to date.
- Provide a good standard of practice and care
- Recognise and work within the limits of your competence
- Support/ Participate/ Lead : continuous improvement activity / SAERs learning reviews/ staff learning & education / sharing good practice/ peer review and discussion/ compliance monitoring

Safeguarding Matters To Us



- We have listened to staff and learned from previous and current public protection cases
- We have reviewed national policy
- We are driven by the learning from Declan`s, Lauren`s, Margaret`s, Ester`s experiences which I have shared with you today
- We know our staff want to do the right thing
- We will support our staff by providing leadership, support and advise as we work collaboratively to make a difference.
- We have established a Public Protection Service which is transitioning from a Child Protection Unit
- We have reviewed our Public Protection Governance Structures reviewing the Terms of Reference of our Public Protection Forum and it`s supporting Public Protection architecture
- We have asked the question, “ what does NHS GGC need to do to keep the population safe, prevent and reduce harm”?
- We have used the Scottish Government Public Protection Assurance and Accountability Framework as an excellent platform to answer this question.
- We have recognised the need for a Public Protection Strategy to provide a coherent vision for the Organisation and have developed our Delivery Plan to support its implementation.

Key Messages – Our Call For Action



Safeguarding Matters to Us

Public Protection is an Operational Priority for the Board.

- The golden thread weaved throughout this presentation is that safeguarding and the protection of people in NHSGGC is “**everyone’s** business, **everyone’s** concern and **everyone’s** responsibility.”
- We have listened and continue to learn from cases, several of which have been shared with you today. We must keep their stories alive, remember their names and deliver on our promises.
- Through the delivery of this strategy, supported by further engagement with our staff and all who access our services, we will ensure NHSGGC is a strong partner in Public Protection.

Link to NHS GGC Public Protection Strategy

https://www.nhsggc.scot/wp-content/uploads/2024/02/Public-Protection-Strategy-document_rgb.pdf



Pause for Questions and Reflections