

# SCAS Safeguarding Improvement Oversight Update

February 2023



# SCAS Safeguarding Quality Oversight Report

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<b>Provider</b>	South Central Ambulance Service (SCAS)
<b>Title</b>	Safeguarding Improvement Oversight – Quarterly Report
<b>Situation</b>	<p>SCAS formally entered the NHS England Recovery Support Programme in October 2022. The Integrated Care Board (ICB) of Hampshire and the Isle of Wight are the lead ICB for the Oversight of delivery of improvement within the Trust, in partnership with Berkshire, Oxford and Buckinghamshire ICB (BOB), Frimley ICB and in partnership with the NHS England South East Regional team.</p> <p>The HIOW ICB Chief Nursing Officer wrote to the Children’s Safeguarding Partnership and the Safeguarding Adults Board Chairs across the multiple counties that SCAS operates services within to explain the NHS Governance, Oversight and Scrutiny arrangements that had been put in place to monitor the delivery of improvement. This letter was shared in September 2022 stating that a quarterly progress report would be provided to the Boards and Partnerships updating them on the progress the Trust was making and any risks to delivery of this work.</p>
<b>Background</b>	<p>SCAS provides a range of emergency, urgent care and non-emergency healthcare services to adults and children across Hampshire, Portsmouth, Southampton, Buckinghamshire, Berkshire, Oxford and they partner with the Isle of Wight Ambulance Service. They also operate non-emergency patient transport services in Surrey and Sussex. They serve a population of over 7 million and answer over 500,000 urgent calls every year. SCAS employ 4,550 staff and over 1100 volunteers. For the past 2.5 years, SCAS have provided a key role in leading the National response to the Covid19 pandemic.</p> <p>SCAS received a focussed Safeguarding inspection by the Care Quality Commission (CQC) in November 2021, and a Well Led Inspection in April and May 2022. This was followed by the issuing of a CQC Section 29a Warning Notice in May 2022 .The CQC report for this Well Led inspection was published in August 2022 in which the CQC rated the Trust as ‘Inadequate’ in the SAFE domain and the WELL LED Domain, resulting in an ‘Inadequate’ rating overall.</p> <p>The Integrated Care Boards were established in England in July 2022. For NHS Organisations with quality concerns it is the ICBs responsibility to establish an Oversight process to gain assurance of improvement against these concerns. Prior to July 2022, multiple Clinical Commissioning Groups (CCGs) held this responsibility and accountability.</p> <p>In August 2022, Terms of Reference were developed to formalise an existing fortnightly Safeguarding joint meeting between Safeguarding Designates from across BOB, Frimley and HIOW with SCAS. This became the fortnightly Safeguarding Improvement Oversight group. HIOW ICB took over the chairing of the meeting as the lead ICB for Oversight in October 2022.</p>

<b>Assessment</b>	<p>Phase one of the SCAS Safeguarding Improvement plan, with 23 specific improvement actions, has been delivered. An external Peer Review visit took place in December 2022 to 'quality test' that the evidence presented at the fortnightly oversight group was in place within the organisation and that staff understood the changes are were working differently. The phase one programme was focussed on policies and procedural foundations being in place and this was the focus of the visit. Areas for continued improvement were shared and are being taken forward in phase two. The Oversight arrangements for safeguarding have reduced from fortnightly to monthly following the quality visit.</p>
<b>Progress and Risks</b>	<p>SCAS have now developed a phase two improvement plan which was shared with the Oversight group in February 2023. The plan, and all the improvement actions, are aligned to the Safeguarding Accountability and Assurance Framework (NHSE July 2022).</p> <p>6/13 Domains of the Provider Section 4.2.1 of the NHS Safeguarding Accountability &amp; Assurance Framework are in place. The 8 other domains are progressing and are planned to be delivered in full by December 2023.</p> <p>7 priority areas for phase two improvement are:-</p> <ul style="list-style-type: none"> <li>• Embedding the Allegations Management work across the Organisation</li> <li>• Production of the Organisational Annual Safeguarding Report and delivery of the Annual Audit Programme</li> <li>• Operationalise a Safeguarding Dashboard</li> <li>• Development and delivery of inhouse level three safeguarding training, MCA training and launch Oliver McGowan training</li> <li>• Maintain high quality Safeguarding Supervision arrangements</li> <li>• Improve the quality of interagency referrals and information sharing</li> <li>• Embed Learning Culture using Case Studies, Serious Case Reviews and other Investigation findings to drive improvement</li> </ul> <p>In the past quarter, the Oversight group with partners from Safeguarding and Quality teams have undertaken a Quality Assurance visit and have been provided the full phase two plan, evidence of the results from a Domestic Violence referral audit in which 23/25 referrals were 'good' and 'complete', learning and action has already been taken forward using the audit as the driver for improvement. Training trajectories for Priority A staff have been maintained ahead of plan for Level 3, despite significant operational pressures through December 22 and January 23. Training on S42 response and Domestic Abuse has commenced.</p> <p>Three top risks remain:-</p> <ul style="list-style-type: none"> <li>IT system resilience</li> <li>Maintaining the release of operational staff for training</li> <li>Maintaining the release of operational staff for supervision</li> </ul>