

Agenda Item:	6
Date of meeting:	23 September 2026
Report to the:	Trust Board
Title of report:	Annual Safeguarding Report – Norfolk Community Health and Care Trust (NCHC)
Report author:	Vicky Aspinall, Head of Safeguarding
Executive sponsor:	Kate Howard, Chief Nurse
Recommendation:	Note

Assurance level:	Substantial ✓ Reasonable Partial ☐ Minimal ☐
Rationale:	

1.0 Executive Summary

- 1.1 This is the annual report detailing Children and Adults Safeguarding activity for 2025-2026. It informs the Board of the changes strategically for both children and adults services and outlines performance against commissioning requirements including Section 11 reviews.
- 1.2 Overall training compliance for both children and adults safeguarding has remained above the trust target.
- 1.3 The safeguarding team has continued to see increases in the volume of calls for advice and support from NCHC colleagues. The safeguarding team responded to over 820 safeguarding calls in the past year. The themes from these discussions support the assumption that staff are being professionally curious and are developing a 'think family' approach.
- 1.4 The Safeguarding Children and Adults Group has appropriate representation and ensures safeguarding across the age ranges is considered and that learning is shared. The introduction of case study discussion as a rolling agenda item has provided another forum to share experiences and learning. Places are now represented at all local sub-group meetings of the Safeguarding Adults Board and Safeguarding Children's Partnership.

- 1.5 There has been an increase in Domestic Homicide Reviews (DHR) and Safeguarding Adult Reviews (SAR) in Norfolk. The safeguarding team and Quality Team have represented NCHC within these discussions. Action plans for DHR and SAR recommendations had been added as agenda items for the Safeguarding Children and Adults Group, but now these are reviewed in the Trust Strategic Safeguarding meetings.
- 1.6 There is evidence of an increase in safeguarding adult section 42 enquiries to the safeguarding team from the Local Authority. These safeguarding enquiries aid the local authority in investigating safeguarding adult concerns where NCHC staff have been involved in direct patient care. These concerns may be raised against NCHC, but equally may be raised against care homes, care agencies or the acute health sector. There is a section 42 action plan which the safeguarding team are working through currently which has focused on internal processes as well as work to strengthen partnership working. This is being monitored through the Service Assurance Committee.
- 1.7 The safeguarding team has had increased requests from staff for support to better understand and utilise their skills in undertaking Mental Capacity Act Assessments.

2.0 How the report supports tackling Health Inequalities

- 2.1 Safeguarding teams respond to inequalities in social, health and education experiences of our service users and support staff with ways in which the most vulnerable in our society can be offered an enhanced lived experience. This document has been developed with due regard to the elimination of discrimination, harassment and victimisation, to advance equality of opportunity and to promote inclusivity of all persons.
- 2.2 The safeguarding teams across the Trust support the ambition to be an anti-racist organisation and this document is written through the lens of inclusivity and justness.

3.0 Links to Board Assurance Framework / Trust(s) Risk and Issue Registers

- 3.1 N/A

4.0 Legal and Regulatory requirements

- 4.1 The Crime and Disorder Act 1998
Children Act 1989, 2004 & 2014
Children and Social Work Act 2017
United Nations Convention on the Rights of the Child 1989
UN Convention on the Rights of Persons with Disabilities 2006
Mental Health Act 2007
Working Together to Safeguard Children 2023 & 2026
Inter Collegiate Guidance Adults 2024; Children and Young People & Children and Young People in Care 2025.
Care Act 2014 & Care Act Statutory Guidance 2015
Sexual Offences Act 2003
Mental Capacity Act 2005
Domestic Abuse Act 2021 & Domestic Abuse Act Statutory Guidance 2022
Serious Violence Duty 2022
Prevent Duty 2023
Modern Slavery Act 2015
FGM Act 2003
Safeguarding Vulnerable Groups Act 2006 and Protection of Freedoms Bill

5.0 Previous consideration by Committee or Executive

5.1 Safeguarding report to Quality Committee – 14.8.26

Report

6. Introduction

- 6.1 The Head of Safeguarding presents this annual report as 'substantial level' assurance against the NHS England Safeguarding Accountability & Assurance Framework 2024 (updated in 2026) that NCHC have effective safeguarding arrangements in place which seek to protect individuals from harm caused by abuse or neglect occurring regardless of their circumstance. The 2026 (fifth edition) reinforces the commitment to ensure the safety, protection and welfare of babies, children, young people and adults – including the prevention of harm and upholding the dignity of the deceased.
- 6.2 NCHC contributes to performance and quality measures as requested by the Care Quality Commission (CQC), Norfolk Safeguarding Adults Board (NSAB), Norfolk Safeguarding Children Partnership (NSCP) and the Norfolk & Suffolk Integrated Care Board (ICB). The monitoring requirements are reflected in the respective NCHC safeguarding children and adult work plans. Progress against these plans is in turn monitored quarterly by the Quality Committee (QC) with escalations to Trust Board as required.
- 6.3 This annual report will describe the achievements and activities across the safeguarding portfolio in relation to statutory requirements, quality and performance indicators.

7 Leadership and Accountability

- 7.1 The Care Act 2014 and Section 11 of the Children Act 2004 both outline the requirement for a clear line of accountability within NHS organisations in respect of safeguarding and protecting the welfare of children and adults.
- 7.2 Leadership and responsibility at Board Level is achieved through the Chief Nurse and Allied Health Professionals Officer who also, alongside the Safeguarding Leads, represents the Trust at multi-agency strategic forums. Clinical expertise is provided through the safeguarding team for children and adults.

8 Policies and Procedures

- 8.1 The Trust's Deprivation of Liberty Policy and all appendices have been updated to reflect changes to local safeguarding arrangements.
- 8.2 The Trust's Mental Capacity Act Policy and appendices have been updated and reflect changes in Government legislation and best practice guidance.
- 8.3 All relevant policies and procedures have been monitored during the last twelve months to ensure they reflect current national advice and guidance. Two policies will be merged with Cambridgeshire Community Services NHS Trust (CCS) to support the new Trust (East of England Community Health and Care NHS Trust) on day one of its merger.

9 Children's Safeguarding Practice Reviews (SPR), Safeguarding Adult Reviews (SAR) and Domestic Homicide reviews (DHR).

- 9.1 The Norfolk Safeguarding Children's Partnership now undertake rapid reviews and safeguarding practice reviews (previously called serious case reviews) in line with Working Together (2023) legislation. NCHC has been involved in two rapid reviews and one Safeguarding Practice Review (SPR) in the last year. The SPR involved a young person under the care of specialist children's services.
- 9.2 NCHC have not been involved in any published Safeguarding Adult Reviews (SARs) in the past 12 months. There are however 2 that have been published locally that have relevance to the Trust, learning from the cases will be applied to policy, training and supervision within 2026. These are SAR Doris and SAR Douglas.

9.3 Learning from SAR Doris

The Safeguarding Adult Review of Doris highlights the critical importance of professional curiosity and coordinated multi-agency working when individuals present with long-term self-neglect and complex health and social care needs. The review emphasised that repeated low-level concerns should not be normalised over time; instead, patterns of deterioration require escalation and shared risk ownership. There was learning around the need for clearer accountability for lead professional roles, improved information-sharing between health, housing and adult social care, and the consistent application of the Care Act safeguarding framework even where an individual appears to refuse support. For community health services, the review reinforces the importance of robust assessment of mental capacity, respectful but persistent engagement, accurate record-keeping, and staff confidence in using safeguarding and escalation processes to challenge drift and reduce cumulative harm.

9.4 Learning from SAR Douglas

The Safeguarding Adult Review of Douglas highlights the risks associated with transition points, masculine reluctance to engage with services, and assumptions about resilience or independence masking vulnerability. The review identified missed opportunities for earlier intervention, particularly where concerns were viewed in isolation rather than as indicators of escalating risk. Key learning includes the need for trauma-informed and person-centred approaches, stronger recognition of the impact of social isolation, and improved coordination between physical health, mental health, substance misuse and safeguarding pathways. The review also focusses on the importance of holistic assessment in routine contacts, effective multidisciplinary communication, and ensuring practitioners feel empowered to raise safeguarding concerns and seek senior oversight when risk factors persist or increase.

- 9.5 NCHC safeguarding team were involved in two published domestic homicide reviews (DHR). These were DHR Irene and DHR Bobo.

9.6 Learning from DHR Irene

The Domestic Homicide Review of Irene highlights the importance of early identification of domestic abuse, particularly where coercive control, health vulnerabilities and disengagement from services are present. The review reinforces the need for routine enquiry, professional curiosity and safe information-sharing across agencies to build a full understanding of risk. For community health services, key

learning includes the value of consistent documentation, clear escalation through safeguarding pathways, and ensuring staff are confident to recognise and respond to domestic abuse indicators even when disclosure is limited or indirect.

9.7 Learning from DHR Bobo

The Domestic Homicide Review of Bobo emphasises the need to recognise domestic abuse affecting men and those with complex needs, where risk may be underestimated or obscured by presenting behaviours such as substance use, mental ill health or social isolation. The review highlights missed opportunities for coordinated multi-agency planning and timely intervention. Learning for the Trust includes strengthening trauma-informed practice, challenging assumptions about vulnerability and gender, improving communication between health and partner agencies, and ensuring domestic abuse is considered alongside safeguarding and clinical risk assessments.

- 9.8 Learning from these cases has been rolled out in safeguarding level 3 training and shared with Domestic Abuse Champions across the Trust. Alongside this, learning is shared at operation and strategic meetings, with systemwide discussions taking place at Safeguarding Boards.

10 Safeguarding support and advice:

- 10.1 Safeguarding support and advice are provided to places to support the identification and understanding of categories of abuse and the actions that are required to be taken.
- 10.2 The number of calls (from clinical colleagues) for safeguarding children advice in the last 12 months has remained stable totalling 136 calls. However, there have been many more complex case calls into the team and the subsequent child protection strategy meetings have taken longer due to the complexities identified.
- 10.3 There is continued evidence of a high level of calls for safeguarding adults from clinical staff in the last 12 months. A total of 684 safeguarding adult calls were taken by the safeguarding team this past year. This level of calls is likely due to the impact of the level 3 safeguarding adults' workbook and training as staff are becoming more professionally curious. The level of complexity of the cases discussed have also increased with the need for more complex case meetings.
- 10.4 Each Place now has a named link representative from the Safeguarding team who attends governance meetings. This has contributed to better discussion, understanding and reporting of safeguarding. Managers/leaders understanding of their roles and responsibilities for safeguarding is also now more evident as they ask for advice to support their teams.
- 10.5 The information and activity data contribute to delivery of appropriate and up to date safeguarding training. It gives assurance that staff are calling into the team for advice and support and not waiting to call.
- 10.6 There has continued to be an increase in Section 42 enquiries from the Local Authority Safeguarding team to the NCHC Safeguarding team. These are all enquiries where NCHC patients are at the centre of safeguarding concerns. This has resulted in the

safeguarding team processing approximately 18 section 42 enquiries each month. The reasons are varied and include residents in care homes not seen in a timely fashion or those in residential care not receiving the correct care, or equipment. There continues to be a theme of Section 42 enquiries relating to pressure area care and wound care. This is recognised as a system wide issue by the Integrated Care Board. The safeguarding team are represented at Pressure Ulcer Learning Group and Safety Huddle, ensuring the themes noted are fed into internal discussions. The Head of Safeguarding presented a report on section 42 enquires raised against NCHC at an internal meeting in July 2025. The report had a resulting action plan to support the improved relationship between NCHC and their partners as well as improved reporting guidance internally, this work is on-going.

11 Safeguarding Mandatory training including Prevent

- 11.1 Staff compliance with safeguarding training has increased in most areas in the last twelve months. Both Mental Capacity Act and Deprivation of Liberty (DOLs) Safeguarding training continues to rise resulting both areas now being above the trust internal target of 90%.
- 11.2 The Safeguarding team has continued to develop online training which includes workbooks and an online group discussion/learning session at the end of the day for level 3 training (Children and Adults). The feedback has been excellent and reflects the increase in calls and curiosity of staff about safeguarding matters.
- 11.3 Prevent figures: Basic awareness training compliance is 92% and WRAP level 3 compliance is 95%. Both are above the national requirement of 90%. This is monitored quarterly via NHS England and Commissioners.
- 11.4 In March 2025 the level 3 safeguarding adults training compliance sat at 89% which is an improvement of 12% from the 77% at end of 2024-2025. A new safeguarding level 3 adult workbook has been developed which concentrates on trauma informed safeguarding practice. Managers are reminded at Governance meetings and NCHC Safeguarding Adult and Child group to review the compliance of their teams monthly. At supervision sessions staff are directly reminded of their responsibilities to maintain their compliance.
- 11.5 Level 3 children's training compliance has fluctuated over the past 12 months but has ended with an improved compliance of 90%. This may be partly attributable to new reminders process commenced by the safeguarding team.

Table 1			
Safeguarding training category	Overall compliance at end March 2026	Target by end March 2027	Comments
Safeguarding Children level 1	97%	90%	
Safeguarding Children level 2	98%	90%	
Safeguarding Children level 3 (Staff encouraged to also attend NSCP training)	90%	90%	

Safeguarding Children Level 4	100%	100%	
Safeguarding Adults Level 1	96%	90%	
Safeguarding Adults Level 2	93%	90%	
Safeguarding Adults Level 3	89%	90%	Improved position since March 2024. Further work is underway to increase further to reach the 90% compliance requirements.
Safeguarding Adults Level 4	100%	100%	
Mental Capacity Act (MCA)	91%	90%	
Mental Capacity Act/Deprivation of Liberty Safeguards (MCA/DoLS)	92%	90%	
Prevent (overall)	94%	90%	

12 KEY ACHIEVEMENTS 2025-2026

12.1 Children's Safeguarding

NCHC safeguarding team have been involved with the delivery of a Neglect Safeguarding Children Level 3 training package for the systemwide neglect champions within Norfolk. The session was also recorded so that it could be shared more widely.

12.2 A development plan was developed which informed children's safeguarding training and supervision for 2025-2026.

12.3 Topics for the 2025-2026 safeguarding level 3 training have been reviewed, based on local/ national learning and now includes neglect and domestic abuse.

12.4 The Safeguarding Team have been progressing the domestic abuse action plan which resulted from the 2024-2025 multiagency Joint Targeted Area Inspection. Work has been undertaken which includes the development of guidance to support clinicians in effective routine enquiries.

12.5 The Head of Safeguarding and Deputy Named Nurses for Children have participated in the development and improvement of the new Norfolk Safeguarding Children's Partnership Joint Agency Group Supervision (JAGS) process.

12.6 The Section 11 Review for Safeguarding Children was undertaken in 2025-2026. The key themes identified of family networking are being addressed locally and regionally. Work around Child Sexual Exploitation and Child Sexual Abuse is continuing at pace. The feedback from the Norfolk Safeguarding Children's Partnership highlighted the good progress made in all areas.

13 Adult Safeguarding

13.1 Attendance at the Norfolk Adult Safeguarding Board (NSAB) and participation in the 2025-2025 development plan has continued.

- 13.2 Regular meetings take place between NCHC Safeguarding team and Norfolk County Council social care teams in relation to complex section 42 investigations. This has improved communication, and the quality of information shared between the organisations.
- 13.3 The Norfolk NSAB key priorities and focus Areas for 2025 were as follows:
- Transitional Safeguarding: A major focus is on young people moving from children's services to adult services, especially those with experiences of exploitation, trauma, or mental health needs.
 - Self-Neglect and Hoarding: Continued focus on managing cases of self-neglect and hoarding through multi-agency partnerships.
 - Data and Analytics: Improving the use of data to understand trends and themes in safeguarding, supported by a new PowerBI dashboard to monitor Board measures.
 - Digital Vulnerability: Increasing awareness of technology-enabled financial, emotional, or exploitative abuse, particularly for older adults.
 - Mental Capacity and Communication: Targeted action to improve understanding and application of the Mental Capacity Act and effective communication across all safeguarding work.
 - Emollient Risk Reduction: Coordinating actions to manage the fire risk associated with emollient creams

14 Key achievements safeguarding team 2025/2026

- 14.1 The NCHC Safeguarding Child and Adult group became Committee's in common with the Group Model changes. This change required a review of the Terms of Reference and purpose.
- 14.2 The team continued to update and embed safeguarding processes and policies across all NCHC departments and services including clinical and corporate services.
- 14.3 Attendance and participation at governance meetings and learning huddles has led to increased senior staff confidence in their understanding and support to staff where safeguarding concerns are raised as well as the promotion of safeguarding as a 'golden thread'.
- 14.4 Support, supervision and de-briefs to staff involved in safeguarding cases and processes in both child and adult teams increased as understanding of safeguarding improved.
- 14.5 The Head of Safeguarding completed a report reviewed and improved on a new section 42 internal process ensuring safeguarding team oversight of social care referrals.
- 14.6 The Prevent training trajectory has been achieved and maintained.
- 14.7 Ward based safeguarding adult clinics including supporting staff with understanding safeguarding and assessing the mental capacity of patients continued and uptake is improving as ward managers encourage staff to participate. Additional external Mental Capacity Act (MCA) training has been accessed by staff to further support their confidence and application of the MCA.

- 14.8 There has been a re-focus on the Domestic Abuse Champions Forum. There have been a new cohort of Domestic Abuse Champions that have been recruited giving staff better access to support when needed. The safeguarding team have delivered additional training to the Domestic Abuse Champions to ensure they are equipped with the skills and knowledge to support their patients and colleagues.
- 14.9 The safeguarding team have continued to pilot adults safeguarding supervision sessions and have opened this up to the High Intensity Service and Psychological Services. These sessions are facilitated by the Head of Safeguarding. The sessions have been positively received, and there is a current workplan which is identifying the next set of teams to receive the support.

15 Securing our future

- 15.1 The Safeguarding Children team continues to provide safeguarding supervision, training and support to East Anglian Children's Hospices (EACH) and has successfully negotiated a further 12-month contract until 2027. The Head of Safeguarding further supports EACH in meeting their safeguarding responsibilities by being their named nurse.
- 15.2 All children's safeguarding supervision groups for 2025-2026 continued to follow the NCHC multi-disciplinary group model. Following the merger this will be reviewed and brought in line with the new supervision model.
- 15.3 The NCHC safeguarding team have led the organisational response to the NSCP section 11 work around neglect and father inclusive practice in line with the Norfolk Safeguarding Children Partnership priorities. In the coming year new priorities will be identified and the safeguarding team will self-assess against these, identifying gaps in practice and actions required to address these.
- 15.4 The safeguarding team and quality team have carried out an Mental Capacity Act (MCA) Audit in 2025/2026. The audit demonstrated 'reasonable assurance' in the completion of MCA assessments. Particular areas for improvements were identified in the recording and consideration of best interest decision making. The safeguarding team continue to support the quality team to work through the corresponding action plan.
- 15.5 From 1 January 2026, the safeguarding teams officially merged. The benefits already being seen include more prompt communication/information sharing and joint incident reviews. A more joined up approach will benefit the safeguarding of all patients in our care.

16 Conclusion

- 16.1 In conclusion the safeguarding team has continued to fully fulfil and undertake the statutory functions required of the Trust within 2025-2026.