## Annex A: REPORT ON TRUST PROGRESS IN RESPONSE TO KATE LAMPARD’S LESSONS LEARNT REPORT

### NAME OF TRUST: Brighton Sussex University Hospitals

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Issue identified</th>
<th>Planned Action</th>
<th>Progress to date</th>
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<tr>
<td><strong>I.</strong> All NHS hospital trusts should develop a policy for agreeing to and managing visits by celebrities, VIPs and other official visitors.</td>
<td>Risk assessment and DBS checks in place for visits to the nursery. Procedures in place but formal policy not yet established for the management of visits by celebrities, VIPs and other visitors.</td>
<td>Existing arrangements will be formalised in Visits Policy by Director of Communications</td>
<td>Policy will be submitted to Clinical Management Board for approval in June 2015</td>
<td>End of June 2015</td>
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| **II.** All NHS trusts should review their voluntary services arrangements and ensure that:  
  - They are fit for purpose;  
  - Volunteers are properly recruited, selected and trained and are subject to appropriate management and supervision; and,  
  - All voluntary services managers have development opportunities and are properly supported. | All volunteers are standard DBS checked and receive information on Safeguarding Children and Adults upon their Induction.  
Appropriate arrangements are in place for recruitment, selection and training of volunteers. | Existing arrangements will be formalised in Volunteers Policy by Voluntary Services Manager | Policy developed and will be submitted to Clinical Management Board for approval in June 2015 | End of June 2015 |
| **III.** All NHS hospital staff and volunteers should be required to undergo formal refresher training in safeguarding at the appropriate level at least every three years. | All hospital staff receive safeguarding refresher training. To date, volunteers have received Safeguarding training at Induction, and this will be extended to incorporate refresher training. | Refresher training will be coordinated by the Voluntary Services Manager with the Safeguarding team and Deputy Chief Nurse.  
This will include a prompt on the current training database for recall. | The safeguarding children team liaise with the Volunteer managers about training updates and existing volunteers are invited to the induction sessions  
Training dept will need to update OLM | End of June to implement  
End of 2015 to complete training of all volunteers |
IV. All NHS Hospital trusts should undertake regular reviews of:

- Their safeguarding resources, structures and processes (including their training programmes); and,
- The behaviours and responsiveness of management and staff in relation to safeguarding issues.
- to ensure that their arrangements are robust and operate as effectively as possible.

Arrangements for safeguarding children and adults are well established with strong governance arrangements; identified lead professionals; mandatory training; and good participation in local safeguarding arrangements.

The Trust completes the Section 11 audit on a regular basis which is monitored by both the CCG & LSCB.

Monthly monitoring by the CCG is undertaken.

The Trust contributes to LSCB multi-agency audits 4 times per year.

Most recent Section 11 completed in 2014.

Ongoing

V. All NHS hospital trusts should undertake DBS checks (including, where applicable, enhanced DBS and barring list checks) on their staff and volunteers every three years. The implementation of this recommendation should be supported by NHS Employers.

DBS checks are undertaken as per DBS guidelines, but not repeat DBS checks.

Trust volunteers have DBS checks on appointment, but not repeat DBS checks.

Charitable organisations operating in the Trust do not carry out DBS checks on their own volunteers or safeguarding training.

This recommendation is under review by the Department of Health and the Trust will take into account the outcome of this review.

This will include evidence around the advised frequency of DBS checks in reducing risk.

The Trust will also work with charitable organisations to bring them in line with Trust policy on the use of volunteers on Trust premises.

The Trust will consider its position on repeat DBS checks following the outcome of the national review of this recommendation.

End of 2015

VI. All NHS hospital trusts should devise a robust trust-wide policy setting out how access by patients and visitors to the internet, to social networks and other social media activities such as blogs and Twitter is managed and where necessary restricted. Such policy should be widely publicised to staff, patients and visitors and should be regularly reviewed and updated as necessary.

Where, in limited cases, we provide Internet access to patients a strict policy is applied and the conditions signed for by each patient or parent/guardian/career in the case of under 18’s.

Patients and visitors are advised of the Trust policy.

In addition, in the Children’s Hospital, posters remind parents of the dangers of internet use.

Not applicable

Not applicable
VII. All NHS hospital trusts should ensure that arrangements and processed for the recruitment, checking, general employment and training of contract and agency staff are consistent with their own internal HR processes and standards and are subject to monitoring and oversight by their own HR managers.

There is variability across in the Trust with regard to the processes for engaging temporary staff, either individually or via agencies, with 5 categories identified - doctors (locums), nursing, Allied Health Professionals (AHP), management, clerical & admin.

Procurement will prepare standard approaches to engaging temporary staff and supporting contractual arrangements.

HR Recruitment to specify process for clearing temporary staff for all 5 groups.

This will be implemented for all 5 staff groups with the relevant Executive Director.

Complete

Complete

Good progress to date for locum doctors and nursing staff with further work required in the other areas.

End of 2015

VIII. NHS hospital trusts should review their recruitment, checking, training and general employment processes to ensure they operate in a consistent and robust manner across all departments and functions and that overall responsibility for these matters rests with a single executive director.

Overall responsibility for these matters sits with the Deputy Chief Executive. With the Director of Education and Knowledge being responsible for Education.

Creation of a People Board for all workforce, employment and training issues.

All employment policies are being reviewed as part of the new People and Well-being Strategy.

People and Well-Being Strategy will be submitted to the Board for approval on 1st June.

New People and Well-Being Strategy will be launched in June 2015.

IX. NHS hospital trusts and their associated charities should consider the adequacy of their policies and procedures in relation to the assessment and management of the risks to their brand and reputation, including as a result of their associations with celebrities and major donors, and whether their risk registers adequately reflect this.

Trust Guidelines for Fund-holders of the Charity provides the framework for the fiduciary duties of the Charity. Due diligence is undertaken with major donors.

The planned development of the Charity will involve more extensive engagement with major donors and the Charity policy framework will be reviewed to ensure its adequacy.

Existing Trust Guidelines will be reviewed in the second half of 2015

End of 2015

I confirm that this Trust Board has reviewed the full recommendations in Kate Lampard’s lessons learnt report:

SIGNED: 

DATE:
Return to Natalie Dixon, Senior Policy Advisor, NHS TDA – Natalie.Dixon7@nhs.net