







Trust Board Report

Meeting Date:	29 June 2015
Title:	The Lampard Report; Recommendations, assurance and work-plan
Executive Summary:	The Lampard Report 2015 highlights the ease with which a celebrity or VIP visitor can gain access to patients and patient areas. Additionally, the fact of their celebrity status and links with a hospital or service can conspire to foster their identity as a person in a position of trust – particularly if they also work in a volunteer capacity, so further facilitating their ease of access to vulnerable groups. The report makes a number of recommendations and work is underway to achieve compliance with them
Action Requested:	To note and approve work underway to achieve implementation of recommendations
Report of:	Cheryl Etches, Chief Nursing Officer
Author: Contact Details:	Jane O'Daly Tel 01902 698788 Email Jane.odaly1@nhs.net
Resource Implications:	Costs of DBS processes
Public or Private: (with reasons if private)	Public Session
References: (eg from/to other committees)	From JHSCG
Appendices/ References/ Background Reading	
NHS Constitution: (How it impacts on any decision-making)	In determining this matter, the Board should have regard to the Core principles contained in the Constitution of: <ul style="list-style-type: none">  Equality of treatment and access to services  High standards of excellence and professionalism  Service user preferences  Cross community working  Best Value  Accountability through local influence and scrutiny

Background Details

1	The Lampard Report 2015 highlights the ease with which a celebrity or VIP visitor can gain access to patients and patient areas. Additionally, the fact of their celebrity status and links with a hospital or service can conspire to foster their identity as a person in a position of trust – particularly if they also work in a volunteer capacity, so further facilitating their ease of access to vulnerable groups. The report makes a number of recommendations and work is underway to achieve compliance with them
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Annex A: REPORT ON TRUST PROGRESS IN RESPONSE TO KATE LAMPARD'S LESSONS LEARNT REPORT

NAME OF TRUST:	Royal Wolverhampton Hospital Trust			
Recommendation	Issue identified	Planned Action	Progress to date	Due for completion
I. All NHS hospital trusts should develop a policy for agreeing to and managing visits by celebrities, VIPs and other official visitors.	There is a draft VIP visiting policy which will be updated in the light of the report publication		VIP visiting policy ratified	Complete
II. All NHS trusts should review their voluntary services arrangements and ensure that: <ul style="list-style-type: none"> • 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. 	Review underway. 600 volunteers have been identified and additional information gathered eg role / location / whether regulated or unregulated activity / date of DBS check if any / level of supervision and level of safeguarding training	Further work required to cleanse data eg identifying those who have not volunteered in last year and identifying those whose DBS check is more than 3 yrs old. Manager of volunteers to write to those who have not volunteered to outline expectations before commencement of role in future Those returning will undertake either a voluntary disclosure process (if DBS done within last 3 yrs) or DBS check (if done more than 3 yrs ago)	Process of review complete and those who have not had DBS check notified to HR	Complete
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.	Trust safeguarding training target audience and levels of training currently under review. Safeguarding children is currently level 2 mandatory on induction for all clinical staff. With effect from May, safeguarding adults level	Volunteers identified as undertaking regulated activity to be notified by Deputy Manger Patient experience to IMTG	Volunteers have been identified and included in target audience	Complete

	2 will also be mandatory on induction for all clinical staff. Refresher training will be required 3 yrly			
<p>IV. All NHS Hospital trusts should undertake regular reviews of:</p> <ul style="list-style-type: none"> • 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. 	<p>Review of safeguarding including assurance process, team structure and resources, training and policies was initiated in January 2015 and is completed. The assurance process identifies that there is limited assurance position in the Trust with the majority of standards being assessed as not effective or only partially effective. Restructure of the safeguarding team to commence 13.6.15</p>	<p>April 17th 2015; Team restructure underway. Application made to VCP for 2 new posts. Combined safeguarding adult / children level 2 training programme to be initiated May 2015.</p>	<p>Team restructured and recruitment commenced</p>	<p>Complete</p>
<p>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.</p>	<p>Currently there is no process of refreshing DBS checks for staff and staff employed prior to DBS process being in place may not have had DBS undertaken</p>	<p>To scope number of relevant staff and plan developed for voluntary disclosure similar to "fit and proper person" test for all staff or renewal of DBS April 2015 scoping underway led by Director HR</p>	<p>Scoping has been completed and draft report of recommended options including cost analysis to be shared with executive board before end June 2015. The least cost approach would be to enforce a Trust wide 3</p>	<p>July 2015</p>

			year declaration process. The timeframe for a final agreed solution has been altered to July due to the cost impact	
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.	HR 47 Social Media Policy in place			Complete
VII. All NHS hospital trusts should ensure that arrangements and processes 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.	Identification of any issues with procurement and scope action plan		The Trust uses the national framework agreement in place for staffing and support agencies - this provides that all the relevant employment and background checks are conducted - contract staff are also required to attend the Trust induction where issues such as safeguarding	Complete

			are covered and discussed.	
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.	All required processes in place.	Internal issues re policy, identification and progress of those cases where individuals require referral to vetting and barring process are currently subject to review	Policy and guidance is accessible via the intranet and staff responsible for checking undergoes appropriate training, the process periodically audited internally and externally (Baker Tilly)	Complete
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.	Work underway to review current celebrities and donors / whether risk register needs to reflect any identified risk		No concerns identified. VIP policy now in place	Complete
<p>I confirm that this Trust Board has reviewed the full recommendations in Kate Lampard's lessons learnt report:</p> <p>SIGNED: Jane O'Daly Head of Safeguarding</p> <p>CE NAME: David Loughton</p> <p style="text-align: right;">DATE:5.6.15</p>				

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