

# NHS England & NHS Improvement (London Region) Safeguarding Spring Newsletter April 2022



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## Hello from Gwen Kennedy



### Hello everybody

Thank you for your interest in this safeguarding newsletter, within the pages is some really helpful information to support safeguarding practice. The feedback that we receive about this newsletter is positive and I would like to thank all the contributors for helping to make it so comprehensive, and for our own Paul McCann in the NHSE Safeguarding Team for being the lead editor and pulling this altogether .

Since our last newsletter, the world has had to respond to an increasingly complex environment. This reminds us that safeguarding is much broader than child protection and

considers a very wide range of areas. The current conflict in Ukraine, and the impact of the pandemic, means that professionals and services are under increased pressure to respond to the many issues exacerbated by these situations, including the challenge of increases in child and adult poverty, emotional distress of parents and children, domestic abuse, and hidden harms.

Thank you for all your continued diligence and support in all areas of safeguarding adults and children in London.

Finally a link to last year's NHSE annual safeguarding report has finally been published – link [here](#)

Have a lovely Easter break and Spring Season.

**Gwen Kennedy**

**Regional Lead for Safeguarding  
NHS England & NHS Improvement, London**



## Children's Safeguarding

### 1. **Child Mental Health: new report :**

The [Nuffield Foundation](#) has published its review of developments in young children's health in the UK over the last 20 years.

Findings include: young children are healthier than they were 20 years ago, but progress has stalled in recent years; there are significant inequalities in mental health disorders among young children; and mental health disorders are more prevalent among young children of families with poor parental mental health, lower incomes and in receipt of benefits.

Recommendations include integrating effective health services to create an accessible system that meets the needs of young children and their families; addressing health and social inequalities; and removing linguistic, cultural and digital barriers to public health information and services.

Download the report [here](#):

### 2. **CEOP launch new website:**

The National Crime Agency's **CEOP Education team** aim to help protect children and young people from online child sexual abuse.

They do this through the **CEOP Education Programme** which provides training, resources and information for children and young people, their families and those who work with them.

CEOP Education launched a new website on 22<sup>nd</sup> March. The new 11-18s website has information and guidance which is appropriate and relevant to the experiences of young people aged 11-18.

The new website is designed to be an accessible and engaging resource for young people to visit alone at home, or within lessons as a learning tool. As such, they have updated our 11-18s toolkit to sit alongside the website and support its use as an effective learning resource for young people.

Link to [website](#)

You will be able to download the accompanying [toolkit](#)

### 3. **New resource for identifying CSE concerns**

The [Centre of Expertise on Sexual Abuse](#) has recently published a new resource for identifying and recording concerns of child sexual abuse to help professionals develop their awareness of the wider signs and

indicators that may give cause for concern of child sexual abuse.

The easy-to-use [Signs and Indicators](#): 'A template for identifying and recording concerns of child sexual abuse' is the first in a new series of resources designed to support professionals working with children across a range of organisations and agencies to identify and respond to concerns of child sexual abuse. Further resources, supported by a series of films, will be published in the near future.

**NSPCC Learning** has updated its information on protecting children from emotional abuse. The web pages cover: the impact of emotional abuse and recognising, responding to and preventing emotional abuse. NSPCC Learning has also published a briefing summarising statistic around emotional abuse. Findings include: although most child abuse includes an element of emotional abuse, it is recorded as a specific concern for just over 1 in 3 children who are the subject of a child protection plan or on a child protection register in the UK. Visit the page: [here](#)  
Read the briefing: [here](#)

#### 4. [New report of Draft Online Safety Bill](#)

The **House of Commons Digital, Culture, Media and Sport Committee** has published a report on the [Draft Online Safety Bill](#). The report finds that the Govt's proposed legislation to tackle online harms would fail to prevent the sharing of some of the most "insidious" images of child abuse and violence against women and girls.

It recommends that the government address types of content that are technically legal, either through primary legislation or as types of harmful content covered by the duties of care.

Read the report: [here](#)

#### 5. [Kantar Public's report on Multi-agency reform](#)

The **Department for Education** (DfE) has published findings from research by [Kantar Public](#) into behavioural drivers and barriers to multi-agency partnership working for children's safeguarding in England.

Findings include: slimmed down strategic meetings enabled more active engagement from senior leaders, but left wider organisations and frontline staff feeling less able to contribute; and consistent communication helped build positive relationships, but the volume of information made it hard for frontline staff to assess what was relevant.

Recommendations include creating an established partnership voice, such as a Multi-Agency Safeguarding Hub (MASH), to facilitate consistent processes and communication across agencies; and giving frontline staff opportunities and support to engage, provide input and receive feedback on interventions.

Please read more [here](#)

## **6. Promoting safer sleeping for babies' in high risk groups in England:**

“A piece of research that has been commissioned by the DHSC in relation to *Promoting safer sleeping for babies in high risk groups in England* following a recommendation from the National Safeguarding Practice Review Panel's "[Out of Routine](#)" report. A review of sudden unexpected death in infancy in families where the children are considered at risk of significant harm.

### *Promoting safer sleeping for babies in high risk groups in England*

The research aims to promote safer sleeping for babies in high risk groups in England. It will use behavioural insights and models of behaviour change, working with parents whose children are at risk of significant harm, to develop effective safer sleep messages and approaches.

The two objectives are:

(1) to identify the relevant behaviours that are necessary to prevent SUDI, associated with situational or out of routine risk, in families with an infant who is at significant risk of harm, and (2) to generate a practice model for supporting families whose children are at risk of significant harm to increase safe infant sleeping, including in out of routine situations, in addition to the pathways to embed it within multiagency service provision based on the 'Prevent and Protect' practice model outlined in the 'Out of Routine' report.

The project will involve conducting in depth interviews with around 15 families whose young children are known to be at risk, recruited in two geographical locations. This will then lead to a consultation with stakeholders and 4 local authorities, with this work concentrated in two geographical locations.

The output will be a short report which will provide best practice evidence to help the **Department of Education and Children's Services** improve their **Sudden Unexplained Death of Infants** (SUDI) safe infant sleeping messaging and support in the short term. The final report will be delivered in Jan 2023 with the work commencing in Jan 2022.

## 7. **New NHS youth crime initiative launched :**

The **NHS London Violence Reduction Programme** is launching a new campaign supporting [YourStance](#) in recruiting healthcare volunteers to teach basic life support and haemorrhage control skills to young Londoners aged 11-25 years at risk of serious youth violence.

**YourStance** brings together experienced volunteer healthcare professionals to teach young people at risk of serious youth violence the skills of basic life support and haemorrhage control. Currently, an outreach programme exists, led by a small number of healthcare professionals in the North East London communities.

Using existing knowledge, design and implementation, the London Violence Reduction Programme and YourStance are

working together to equip vulnerable young Londoners fundamental lifesaving skills. Outreach sessions will teach youth aged 11 – 25 how to perform cardiopulmonary resuscitation (CPR) and haemorrhage control following serious incidents of violence.

The [NHS London Violence Reduction Programme](#) is partnering with YourStance to recruit a volunteer network of healthcare professional to teach haemorrhage control and basic life support skills to young people across the capital to help reduce serious youth violence and its impact on local communities across the capital.

The sessions teach fundamental life skills so that, if the worst happens, a young person might know how to save someone in an emergency. The sessions are also designed to inspire young people to consider a career in healthcare and take a proactive, positive role in looking after the health of their peers.

**Martin Griffiths, Consultant Trauma Surgeon and Clinical Lead for NHS England's Violence Reduction Programme** says "*the work of organisations such as YourStance, run entirely by volunteers, is crucial in helping us to reduce and improve the health and wellbeing of our communities for the future.*"

To register as a volunteer, [click here](#) or email [YourStance](#) directly.

### *YourStance Campaign Communications*

A communications toolkit has also been designed to support this campaign across our networks. Please see [here](#)

Below are some steps we can take to support the campaign:

- View campaign toolkit (see above google drive link) providing an overview of the campaign, our target audiences, key messages, copy for use (please note the hashtag [#lifesavingskills](#) for use on social media).
- Re-tweet campaign tweets about the volunteer campaign through your organisational comms.
- Share some of our suggested tweets and/or social media assets from your personal accounts.
- Watch and share [our full video](#) about the campaign (snippets will be shared on Twitter).

Please feel free to share with relevant colleagues. If you have any questions about the campaign, please contact by email [england.violencereduction@nhs.net](mailto:england.violencereduction@nhs.net)

## 8. Youth Violence & County Lines :

The **House of Commons Library** has published a briefing on youth violence and county lines drug dealing. The briefing looks at: the prevalence of county lines activity; the involvement of children; women and girls' involvement in county lines; and the impact of the coronavirus pandemic on county lines offending.

The Govt. and police response to county lines are also discussed.

Read the full briefing [here](#)

## 9. Communication with Children Guide:

Research and practice show that it can take years for a child to get to the point where they feel able to tell someone about their experiences. It is therefore vital that anyone who works with children know how to recognise what is happening and have that conversation. This report brings together research and practice guidance to help give professional the knowledge and confidence to act.

Please read more [here](#)

## 10. Changes need in children's social care:

**The Children's Commissioner for England** has published a paper focusing on the changes needed in children's social care in England. The paper, which includes case studies of children and young people in care, is intended as the Commissioner's submission to the independent review of children's social care in England. It covers what children and young people have said they want from the services supporting them; and looks at putting the review's findings into practice. Read the news story [here](#)  
Read the report [here](#)

## 11. New SE Region webinars:

The **South East Region's Designated Health Professionals for Looked After Children and care leavers** have delivered a series of webinars focussing on what makes a difference to the children and young people in their care. Please find the links to the recording below:

- **Surrey Specialist CAMHS for children in care, care leavers and post order & STARS service-** CAMHS 3Cs: Emina Atic-Lee. Please click [here](#)

- **Refugee Realities-** Kent Refugee Action Network (KRAN): Razia Shariff and a young person with lived experience. Please click [here](#)
- **Looked After Children access to dental care during the Covid-19 pandemic-** NHS: Alison Cross and Rachael Redwood. Please click [here](#)
- **The looked after children and care leavers primary care project-** NHS: Dr Sharon Kefford, GP children's safeguarding and designated doctor for looked after children Surrey Countywide. Please click [here](#)
- **Care Leavers: What works talk-** Surrey Local Authority: Amy Caddy and Jamie-Leigh Clark. Please click [here](#)

## 12. Trauma-informed care principles in children's social care:

The [Early Intervention Foundation](#) (EIF) has published a new report exploring how trauma-informed care principles have been adopted by children's social care (CSC) teams in England to improve the quality of their services. Findings from the report, which was produced in partnership with **What Works for Children's Social Care**, include: no single model of trauma-informed care currently exists in CSC in England; there are significant overlaps

between trauma informed care activities and standard social care practices; and trauma informed activities rarely lead to evidence-based interventions.

The full report can be found [here](#)

### 13. **Institute for Healthy Living: Annual Survey:**

The [Institute for Health Visiting](#) have released their 8th annual survey which was completed by 1,291 practitioners from across the UK during October 2021.

The findings present health visitors' unique view into the lives of babies, young children and their families who are often hidden behind front doors and invisible to other services. The pandemic is not over – its impact on families has been significant and is ongoing. Health visitors reported soaring rates of domestic abuse, mental health problems, child behaviour problems, poverty, and child safeguarding.

The resounding headline message to policy makers is captured in this report's sub-title which is a direct quote repeated hundreds of times throughout the survey responses, "We need more health visitors.

Please read full report [here](#)



## Adult Safeguarding

#**hello** my name is...

### 14. **Introducing Elaine Ruddy:**



My name is Elaine Ruddy I have recently re-joined the NHSE & NHSI London Region as the **Liberty Protection Safeguards Clinical Lead**.

This is a new role to assist with supporting the NHS with the forthcoming introduction of Liberty Protection Safeguards.

I am a learning disability nurse by background and no stranger to the safeguarding team as I previously worked in the team 5 years ago as the Safeguarding Adults Lead for the region. Prior to re-joining the Safeguarding Team, I was working as the Improving Quality of Care lead in the National Learning Disability and Autism Programme where my portfolio included the National Inpatient Unit of Concerns workstream and the Safe and Wellbeing Reviews Programme.

I have also worked in the London Region Learning Disability and Autism Programme where I led on LeDeR, SEND, Quality and the Host Commissioning workstreams.

My contact details are: [elaine.ruddy@nhs.uk](mailto:elaine.ruddy@nhs.uk) and I look forward to meeting and collaborating with many of you in future.

#### *The LPS Consultation launched:*

The Govt. has launched a public consultation on proposed changes to the Mental Capacity Act (MCA) Code of Practice for England and Wales, which includes guidance on the new LPS system.

This is a joint consultation published by DHSC and MoJ. This consultation seeks views on the

proposed changes to the Mental Capacity Act 2005 Code of Practice and the implementation of Liberty Protection Safeguards.

The consultation is now live and can be found [here](#):

**The consultation will close on 07.07.22 at 11.45 pm**

#### **15. Liberty Protection Safeguard Masterclass 2022:**

University London College Hospital is very pleased to host their next Liberty Protection Safeguard Masterclass 2022 which has been sponsored by NHSE London Safeguarding team

It will be delivered by barrister Tim Spencer-Lane, **on Weds 1<sup>st</sup> June 2022, 1300- 1600 hrs** via Zoom.

Please note that this is only open to professionals, with a provider email address (i.e. not private email).

Book early to avoid disappointment via the Eventbrite [link](#)

#### **16. Essex Autonomy Project Webinars**

Between April 2020 and Jan. 2022, EAP hosted a series of Rapid Response Webinars in collaboration with the [National Mental Capacity Forum](#).

A recording of the webinar and a copy of the slides are now available on the Essex Autonomy Project website.

To access the slides and recording, please follow [this link](#), and scroll to the bottom of the page.

### 17. Covid Vaccinations Dispute Case P:

A London CCG recently took a case regarding a Covid vaccine dispute to the Court of Protection. The case involves a patient with a learning disability and a number of complex health problems.

P did not have capacity to consent to the vaccine, his GP and care team all believed the vaccine would be in his best interests, however his mother objected to him having the vaccine. The Judge decided that the vaccine would be in P's best interests, however made a number of important points including that

*“if there's any doubt – make an application.....  
The threshold for making applications is low. In cases such as this, where P's mother was objecting, and does object, there doesn't seem to be any doubt that there should have been an application sooner.*

For More information and a written piece by NCL: Designated Nurse David Pennington please go to the **Futures NHS link** [here](#):

If you have not registered already, you'll need to complete our easy registration process.

If you have an NHS email address you can self-register on the platform by filling the form and completing your profile.

### 18. Revisiting safeguarding practice:

New Safeguarding guidance which was freshly published by **Dept Health & Social Care** in Jan. 2022 setting out the importance of practice principles integral to safeguarding adults.

This is to make sure statutory responses are informed by a consistent person-centered approach. This guidance is designed for practitioners within local authority adult social services, or where these are delegated who are involved in safeguarding adults.

Safeguarding is often used as a broad term to refer to services that seek to protect individuals from exploitation or abuse or address instances of these when they arise.

This guidance specifically focuses on adult safeguarding – the statutory safeguarding duties that are outlined in sections 42 to 46 of the Care Act 2014

Please read full guidance [here](#)

## 19. **New Govt Guidance on Forced Marriage**

The Govt has published updated guidance on dealing with forced marriage:

Previously there were two separate documents: multi-agency statutory guidance for the leaders of organisations with safeguarding responsibilities, and non-statutory multi-agency practice guidelines for front-line professionals. Those have now been brought together in one overarching document.

The division between the parts which are statutory and those which are not is unchanged – the two elements of the content are marked clearly in the overarching document – but this helps to bring closely linked content together in one place.

The updates to the document reflect not only the many changes which have taken place since the guidance was first published in 2014, but also reflect the comments of a wide range of stakeholders. There are, for the first time,

specific chapters on: the role of registrars; how to support victims who have learning disabilities; and the role of staff at the UK border. The updated guidance also provides additional information on ‘honour’-based abuse more broadly, and on the different groups of people who can be affected by forced marriage, including male and LGBTQ victims.

We would encourage you to make staff aware of this guidance and to promote its use, within your organisation and region.

Please read [here](#)

## 20. **Statutory Domestic Abuse Definition Update:**

Sections 1 and 2 of the new statutory definition of Domestic Abuse commenced on 2<sup>nd</sup> Oct 2021 (section 3 relating to children will not yet commence and National Police Chiefs Counsel are working on advice).

The definition adds [economic abuse](#) as a form of Domestic Abuse and extends the range of family members who could be subject to Domestic Abuse.

- [Section 1](#): Definition of “domestic abuse”
- [Section 2](#): Definition of “personally connected”

*“relative” has the meaning given by section 63(1) of the Family Law Act 1996. (Section 63 of the Family Law Act says that a person’s relative can be ‘(a) the father, mother, stepfather, stepmother, son, daughter, stepson, stepdaughter, grandmother, grandfather, grandson or granddaughter of that person or ‘(b) the brother, sister, uncle, aunt, niece, nephew or first cousin (whether of the full blood or of the half blood or by marriage or civil partnership) of that person or of that person’s former spouse, former spouse, civil partner or former civil partner).*

The wider “relative” meaning will now need to be considered when referring to Domestic Abuse support agencies, Domestic Violence Disclosure Scheme ([Clare Law](#)), Multi-Agency Risk Assessment Conference (MARAC) and/or Police. There may be changes within your local policies that now need to include the Domestic Abuse Act definition.

More information can be found [here](#)

## 21. [New research into parent domestic abuse:](#)

The **Lancashire Violence Reduction Network** have just released a piece of research

undertaken with the **University of Central Lancashire** to further understand child (aged over 16) to parent domestic abuse. The research is based on Lancashire data but we believe it to be reflective of the national picture.

Key findings are:

- One in ten domestic abuse crimes in Lancashire are committed by people towards their own parents
- Of the 66,973 domestic abuse cases reported to Lancashire Constabulary between November 2018 and February 2021, 7,171 were committed by people over the age of 16 towards a parental figure.
- It is not just adolescents that abuse their parents, our findings uncovered perpetrators aged between 16 and 74 years with victims aged between 30 and 98 years.
- The average age of perpetrators was 27 years, while the average age of the victim was 54 years.
- Some perpetrators used intimidating behaviour and coercive control and caused the victims significant fear. Other incidents centred around children struggling with substance use, some incidents may be better understood as carer burnout

- In around a quarter of the cases, perpetrators appeared to struggle with their mental health and diagnosis, or behaviour consistent with, autism, ADHD, depression, Schizophrenia and psychosis, and emotionally unstable personality disorders were likely an important factor.



## All Safeguarding

### 22. New VAWG Framework launched by College of Policing:

[The College of Policing](#) has launched a new framework to prioritise and address the issue of violence against women and girls (VAWG) in England and Wales.

The framework outlines policing's commitment to preventing VAWG and focuses on three pillars: *'building trust and confidence'*; *'relentless perpetrator pursuit'*; and *'safer spaces'*. As part of this framework, a new toolkit has been created, which aims to support police officers and staff to protect women and girls from misogyny and bring criminals to justice.

Read the news article [here](#)

Download the framework [here](#)

The problem may be on the rise due to changes in national demographics. [The Office for National Statistics Labour Force Survey](#) found that the number of people aged 20-34 years living with their parents since 1996 has risen by a third and by March 2020, this equated to 28% of people within this age group sharing a home with their parents, grandparents, or step-parents

The project has secured funding for a second phase, which will further examine the profile of this specific genre of offenders and how this might change over time. These findings will be published later this year

The full report, *'Understanding child to parent domestic abuse in Lancashire'*, is available to [download](#)

You can get in touch if you would like to find out more - [LancsVRN@lancashire.police.uk](mailto:LancsVRN@lancashire.police.uk)

### 23. **'Enough' - Home Office launches new VAWG campaign**

The Home Office has also launched a campaign to highlight different forms of violence against women and girls (VAWG). A new website provides information on the steps people can take to safely challenge violence against women and girls; guidance for victims of these crimes; and advice for perpetrators who recognise their behaviour needs to change. Separately the Home Office has published an update on the Govt's progress in implementing the tackling violence against girls strategy published in July 2021 which sets out further action to be taken.

Visit the campaign website: [Enough](#)  
Read the policy paper: [Tackling violence against women and girls strategy: progress update](#)

### 24. **New SARC's campaign launched in NHS:**

Victims and survivors of sexual and domestic abuse are being encouraged to come forward for NHS help and care, as part of a major campaign backed by a £20 million boost to specialist services.

Two new clinical lead roles for domestic violence and sexual assault are also being created, alongside dedicated domestic violence support for the NHS and integrated care systems across the country.

The new campaign – which has backing from a royal and a former prime minister will highlight the specialist support offered at dozens of sexual assault referral centres (SARCs) in England.

Please read more [here](#)

In case you haven't had chance to see it yet, below is the campaign film, along with the SARC animation, which was played at the safeguarding webinar:

- [Campaign film](#)
- [Sexual assault referral centres animation - YouTube](#)

### 25. **'Virginity repair' surgery to be banned in Britain under new bill:**

Hymenoplasty surgery has no place in the medical world, British healthcare professionals were warned today, as legislation to criminalise the practice was introduced by the government.

An amendment added to the [Health and Care Bill](#) in Jan 2022, will make it illegal to perform

any procedure that aims to reconstruct the hymen, with or without consent. Dozens of clinics, private hospitals and pharmacies have offered the controversial surgery with the promise of “restoring virginity” – with growing numbers of girls and young women coerced into undergoing the procedure. Scar tissue is used to construct a fake hymen with the aim of making a girl or woman bleed when she next has intercourse.

See Guardian new story [here](#)

## 26. Safeguarding Checklist- A Free Assessment - Ann Craft Trust:

Do your staff or organisation understand what safeguarding is? Do you have up to date policies and procedures in place that will protect adults and young people at risk from harm?

The [Ann Craft safeguarding checklist](#) allows you to test your individual or organisational safeguarding knowledge and practices. Test your knowledge by completing our online safeguarding checklist which covers the Safeguarding, Prevention, Recognition, Reporting & Recording and Reviewing processes.

### *The checklist and what to expect: -*

Allow approximately 15 minutes to complete the 5 categories with a simple yes/no response.

On completion, you will receive a tailored report with the responses and a unique link to additional learning resources and materials, allowing you to have the right safeguarding measures in place for young people and adults at risk.

Please note that If you are unsure about any question please select No to receive the response and access to further resources and materials.

Please click [here](#) to access the checklist

## 27. The Brain Story:

**The Brain Story Brain Story Certification** is a free, in-depth course for professionals interested in the scientific underpinnings of the Brain Story.

The course offers:

- Video of over 30 leading experts in neurobiology and mental health 10 modules self-paced.
- Certification in Brain Story science

After taking this course learners will be able to:

- ✓ Explain how brains develop and how social interactions shape development.
- ✓ Describe the effects of stress on brain development, and the impact of adverse childhood experiences on physical and mental health outcomes, including addiction.
- ✓ Identify evidence-based approaches for children in the prevention, intervention, and treatment of childhood adversity.
- ✓ Describe the basic neurobiology of both substance and process addiction.
- ✓ Identify evidence-based approaches for adults in the prevention, intervention, and treatment of addiction

To learn more about the course and how you can enrol please click [here](#)

## 28. Ukrainian refugees and risks of exploitation:

**The Human Trafficking Foundation, British Red Cross, Hope for Justice, FLEX, Anti-Slavery International** and **GLAA** are seeking to coordinate a collective response to the emerging risk of slavery faced by Ukrainian refugees entering the UK.

As such, there are a number of powerful materials already in existence, which help to

inform refugees of their rights and entitlements in the UK, and likely many more currently being developed.

Those travelling to the UK (both without documents and under the Ukraine scheme) are at significant risk of exploitation, both in transit and upon their arrival.

The team are seeking to collate pre-existing materials, in order to avoid any unnecessary duplication. By reviewing materials, they can then collectively address the emerging risks that schemes – such as the Homes for Ukraine may present. They will then be in a position to address any gaps in existing materials in order to mitigate these very unique and emerging risks.

Their aim is to pool existing and any newly developed materials ensuring that any new materials they develop, are done so in collaboration, and are not a duplication of pre-existing materials but addressing the gaps and needs. The hope would be to embed these and work with the refugee and Humanitarian sector to coordinate this.

**Please email Paul McNulty**

[paul.mcanulty@hopeforjustice.org](mailto:paul.mcanulty@hopeforjustice.org) with any relevant materials.

The team will be in touch if they are going to include or look to adapt any resources your organisation sends over.

### [New Refugee/Asylum Seeker Rapid read](#)

Elaine Goodwin NHSE National Homeless and Inclusion Health Nursing Lead, Vikki Gray Head of Clinical Quality, Safeguarding – South East and Cathy Sheehan NHSE National Safeguarding Clinical Lead have also created a helpful Rapid Read '*Health and safeguarding migrant refugees and people seeking asylum*'.

There is some very useful information and links included. It can be accessed via **FuturesNHS** using this [link](#) and is also attached with this newsletter.

### 29. **Modern Slavery Annual Report:**

The Govt. has published their **Modern Slavery Annual Report**, which covers key developments across the UK to tackle modern slavery.

The report covers the Govt's response to modern slavery between Oct. 2020 to the end of Sept. 2021, looking at law enforcement, prevention, supply chain transparency, victim support and international engagement.

Please read report [here](#)

### 30. **The NRM: Joining efforts to protect the rights of trafficked persons:**

*'The NRM: Joining efforts to protect the rights of trafficked persons*. A practical handbook (second edition) has been published by **Office for Democratic Institution Human Rights** (OSCE & ODHR).

Rachel Witkin and other colleagues from the [Helen Bamber Foundation \(HBF\)](#) have been working in collaboration on this over the past few years and the Healthcare chapter has been written with input from the clinical team at HBF. Health has been included as a central part of the National Referral Mechanism (NRM) structure for the first time, rather than as an "add on". The link to the document can be found [here](#)

Please note -it is a lengthy document with 543 pages, the chapter relating to health is titled '*The healthcare needs of survivors of Human Trafficking*' and is from pages **359 - 396 (Chapter 17)** of the handbook).

### 31. **Modern Slavery and Exploitation helpline annual assessment :**

The **Modern Slavery and Exploitation helpline** annual assessment was published on 5<sup>th</sup> April 2022 and highlights the key issues and also the showcases the great work that

[UNSEEN](#) do in supporting the Modern Slavery and Exploitation helpline, which has been in operation since 2016.

You can access the report via the following [link](#).

## SCRs and Independent investigations

### 32. Child Q Serious Case Review:

In 2020, Child Q, a Black female child of secondary school age, was strip searched by female police officers from the Metropolitan Police Service. The search, which involved the exposure of Child Q's intimate body parts, took place on school premises, without an Appropriate Adult present and with the knowledge that Child Q was menstruating. Teachers told the review that on the day of the search they believed Child Q was smelling strongly of cannabis and suspected that she might be carrying drugs.

The review posed three key questions: -

- Was the rationale and practice to strip search Child Q sufficiently attuned to the rights of children as set out in the relevant articles of the United Nations Convention on the Rights of the Child?

- Was practice involving Child Q sufficiently focused on her potential safeguarding needs?

Is the law and policy, which informs local practice, properly defined in the context of identifying potential risk and furthermore, does law and policy create the conditions whereby practice itself can criminalise and cause significant harm to children?

Given the situation and circumstances of the incident, the review focused on the decisions and actions of the school staff and MPS Officers.

The review makes eight findings and 14 recommendations for improving practice.

Some of these are transferable and relevant to health settings.

**Finding 2:** The decision to strip search Child Q was insufficiently attuned to her best interests or right to privacy.

**Finding 3:** School staff deferred to the authority of the police on their arrival at school. They should have been more challenging to the police, seeking clarity about the actions they intended to take. All practitioners need to be mindful of their duties to uphold the best interests of children.

**Finding 4:** School staff had an insufficient focus on the safeguarding needs of Child Q when responding to concerns about suspected drug use.

**Finding 8:** Having considered the context of the incident, the views of those engaged in the review and the impact felt by Child Q and her family, **racism (whether deliberate or not) was likely to have been an influencing factor** in the decision to undertake a strip search.

**Recommendation 5:** The CHSCP should review and revise its awareness raising and training content to ensure the Child Q case is referenced, with a specific focus on reinforcing the responsibilities of practitioners to advocate for and on behalf of the children they are working with / who are in their care.

**Recommendation 8:** Where any suspicion of harm arises by way of concerns for potential or actual substance misuse, a safeguarding response is paramount. Practitioners should always contact Children's Social Care to make a referral or seek further advice in such circumstances.

**Recommendation 13:** The CHSCP should continue with its rolling programme of multi-agency adultification training. Participation should be actively focused on practitioners from the police and schools, with the Training, Learning & Development Subgroup developing a process to specifically evaluate impact across these sectors.

**Recommendation 14:** The CHSCP should expedite its work on developing an anti-racist charter and practical guides that support the

eradicating of racism, discrimination, and injustice across its local safeguarding arrangements.

This Safeguarding Children Practice Review (SCPR) was discussed with London ICS Chief Nurses/nominated Deputies in an extraordinary Safeguarding Governance meeting on 30<sup>th</sup> Mar 2022. The key findings and learning from this SCPR were also discussed at the London Region Chief Nurses meeting 8<sup>th</sup> April. Impact on staff had been raised as an issue (lived experience of racism and discriminatory practices). We encourage all NHS organisations to promote the key findings and learning from this SPR and consider the recommendations in relation to their local services and safeguarding arrangements.

The NHSE London Region Safeguarding Team plan to liaise with CHSCP and will consider commissioning some 'Adultification Awareness training' webinars for NHS Safeguarding Leads across the region so understanding of this issue is improved. We would recommend discussing the key findings and learning from this SPR across the London Region Safeguarding Networks.

The SPR published in Mar 2022 by City & Hackney Safeguarding Children Partnership (CHSCP) can be found online [here](#)

### 33. Independent investigation report:

#### London :

NHS England and NHS Improvement have published the Independent Investigation Annual Report (2019 – 2021).

The report details the findings and performance of commissioning of Independent Investigations, which primarily relate to homicides committed by those in receipt of mental health services. Independent investigations commissioned under the [Serious Incident Framework \(2015\)](#) ensure that mental health care-related homicides are investigated in such a way that effective learning can be identified, and changes implemented to minimise the risk of recurrence.

The report can be read here [Independent investigation reports for London](#)

*Published Independent investigations reports*

### 34. Assurance Review Mr X:

NHSE/I London region have published a mental health homicide independent investigation for Mr X.

The report and action plan can be accessed [here](#) and [here](#)

### 35. Assurance Review Mr J:

NHS England and NHS Improvement have published an [assurance review \(Mr J\)](#). The review undertaken by Verita was commissioned following publication of the initial report and action plan to ensure recommendations have been actioned and embedded into practice.

The assurance review can be located [here](#)

The investigation report can be accessed [here](#)

### 36. Mr A and Mr B Mental health homicide independent investigation:

Please be advised NHSE/I London region have today published a mental health homicide independent investigation for Mr A and Mr B.

The report and action plan can be accessed [here](#) and [here](#)

### 37. Publication of Independent Investigation report for Mr N and Mr G:

NHSE/I London region have today published the mental health homicide independent investigation report for Mr N and Mr G.

The final report and action plan can be accessed via this [link](#)

**Please get in contact...**



**WE'D LOVE  
TO HEAR  
FROM YOU**

**Thank you!!**

**Thank you for reading our newsletter, we hope you found it interesting and useful.**

From the London Region Safeguarding Programme team, we also wanted to say a big **THANK YOU** for all of the amazing work that you do!

**NHS England London Region Safeguarding Team**

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